



@physicaltherapyresearch

RAPID RESEARCH

August 2023



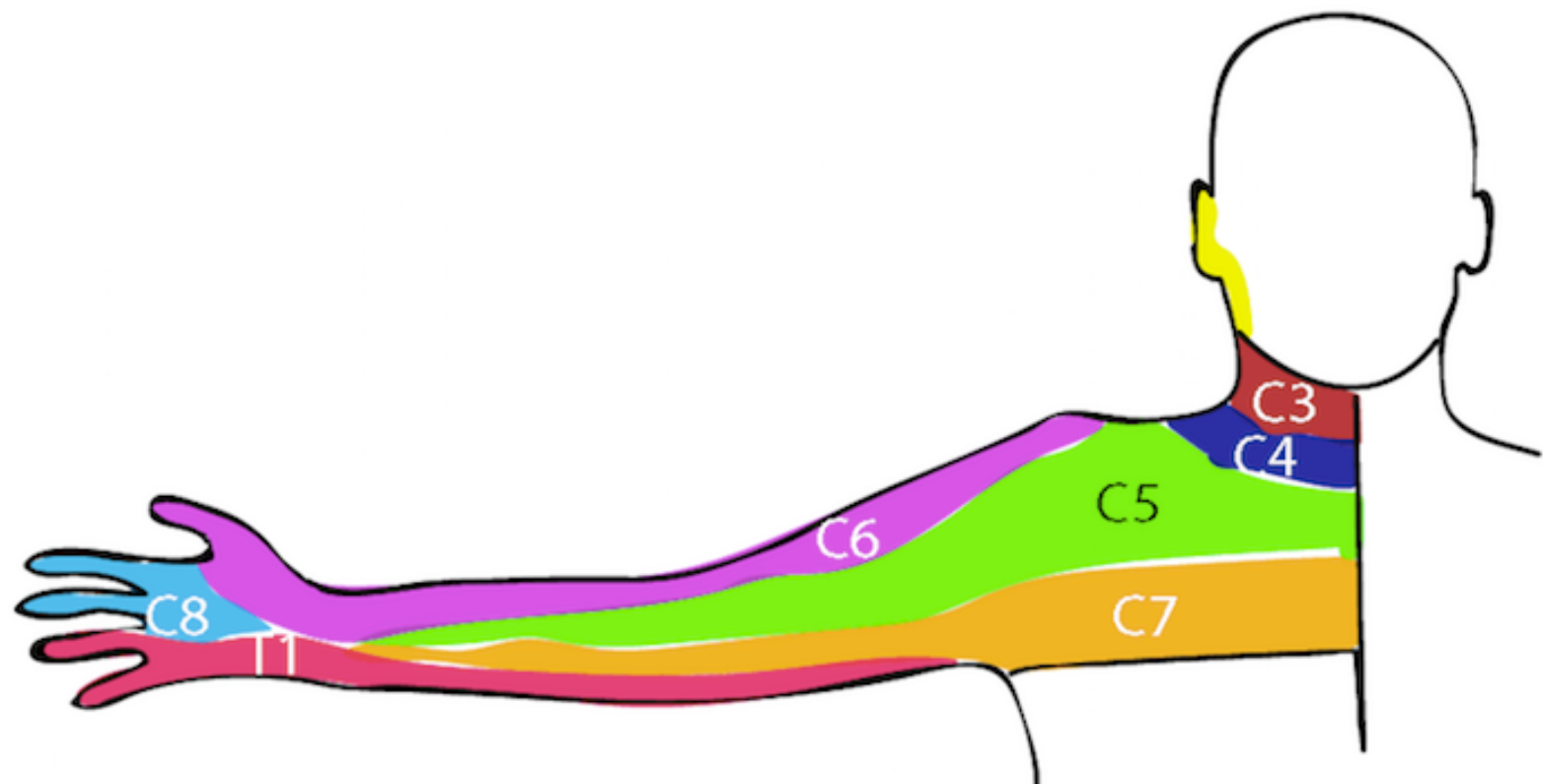
Inside This Week: Cervical Radiculopathy Testing & Treatment

- ✓ Test Accuracy to Diagnose Cervical Radiculopathy
- ✓ Accuracy of Patient Interviews & Testing for Cervical Radiculopathy
- ✓ Manual Therapy for Cervical Radiculopathy

TEST ACCURACY TO DIAGNOSE CERVICAL RADICULOPATHY

[Click for Full Text
\(Rubinstein et al. 2007\)](#)

This review assessed the diagnostic accuracy of clinical tests used to diagnose cervical radiculopathy.



KEY FINDINGS

6 studies included; 5 provocative tests assessed

Spurling's Test w/ Extension:

Sensitivity: 90% + || Specificity: 94-100%

Traction/Neck Distraction:

Sensitivity: 44% || Specificity: 94-97%

Valsalva's Maneuver:

Sensitivity: 22% + || Specificity: 94%

The Upper Limb Tension Test (ULTT):

Sensitivity: 72-97% + || Specificity: 11-33%

Shoulder Abduction Test:

Sensitivity: 78% + || Specificity: 92%

MAIN TAKEAWAYS

Spurling's test, as well as positive findings for traction/neck distraction, and the Valsalva's maneuver might be suggestive of a cervical radiculopathy (i.e. given their high specificity).

A negative ULTT might be used to rule it out (i.e. given its high sensitivity).

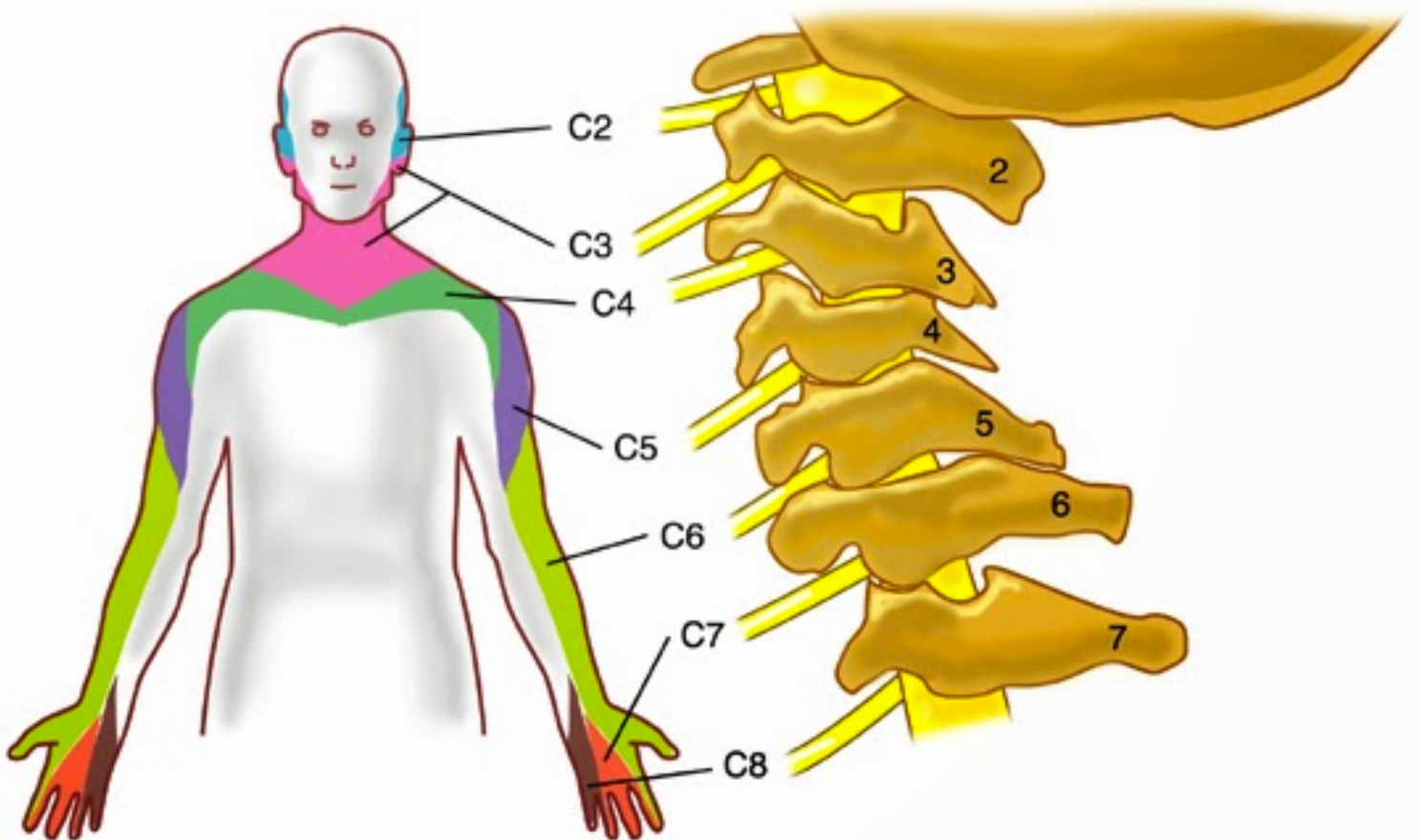
No provocative test demonstrated both high sensitivity and high specificity.

Only one study evaluated these tests in primary care, which is the setting in which these tests are most likely to be used. However, this study was of poor quality.

ACCURACY OF PATIENT INTERVIEWS & TESTING FOR CERVICAL RADICULOPATHY

[Click for Full Text \(Sleijser-Koehorst et al. 2021\)](#)

This systematic review evaluated and determined the diagnostic accuracy of patient interview items and clinical tests to diagnose cervical radiculopathy



KEY FINDINGS

WEEK 1: AUGUST 2023

143 participants were included

Patient Interview + Testing Findings Specificity:

Arm pain worse than neck pain: **81%**

Provocation of symptoms when ironing: **81%**

Symptom reduction by walking with hand in pocket: **85%**

Spurling test: **84%**

Reduced reflexes: **81%**

Patient Interview + Testing Findings Sensitivity:

Paraesthesia and/or numbness: **88%**

Paraesthesia: **83%**

MAIN TAKEAWAYS

The patient interview items:

'arm pain worse than neck pain'

'provocation of symptoms when ironing'

'reduction of symptoms by walking with your hand in your pocket'

AND clinical tests:

Spurling test and reduced reflexes

***Increase the likelihood of cervical radiculopathy.**

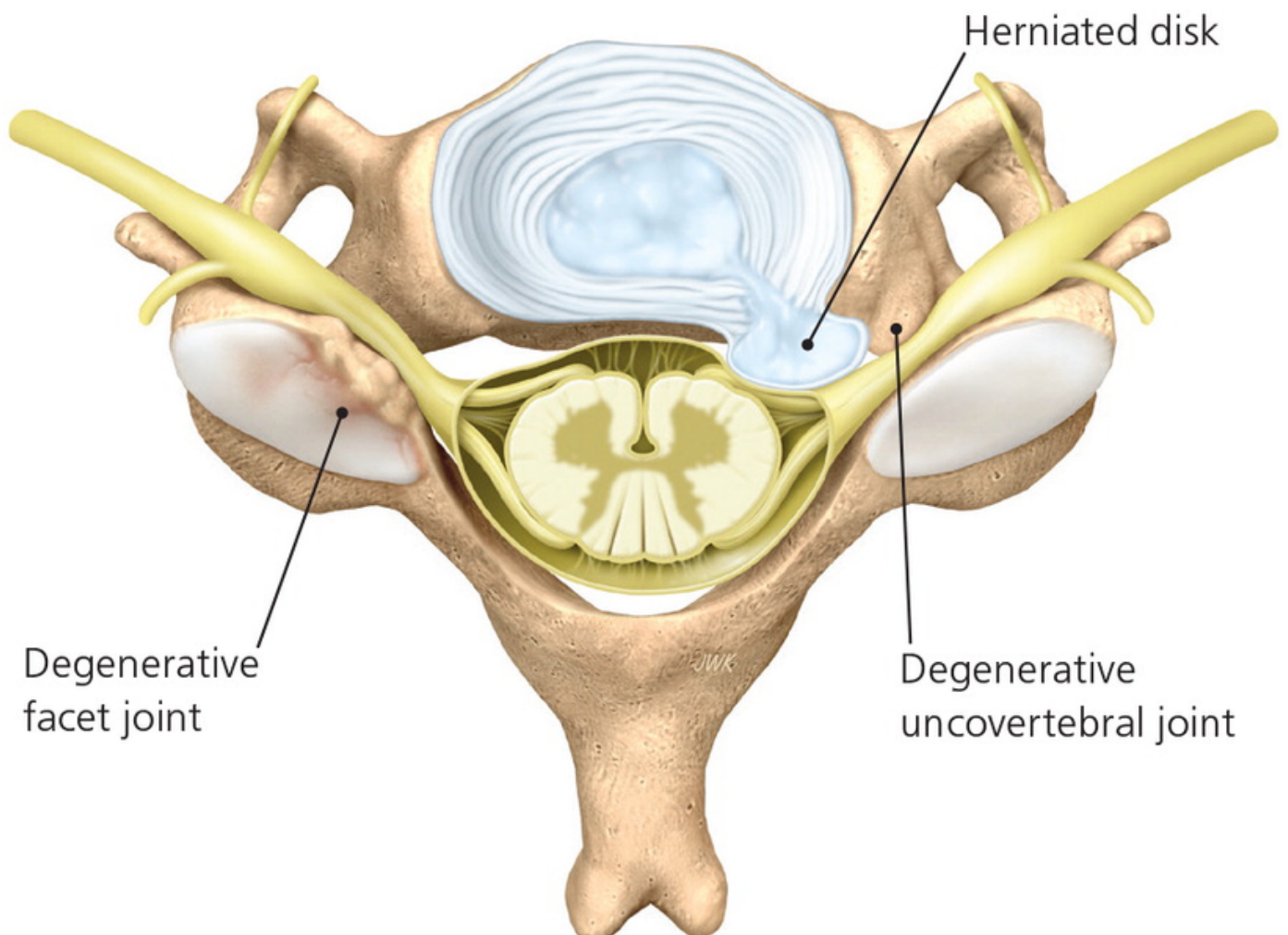
The absence of paraesthesia and/or numbness decreases the likelihood of cervical radiculopathy

MANUAL THERAPY FOR CERVICAL RADICULOPATHY

AUGUST 2023

[Click for Full Text](#)
(Kuligowski et al. 2021)

This review evaluated the accuracy and efficacy of manual therapy in treating cervical and lumbar radiculopathy.



KEY FINDINGS

27 articles included; 21 on cervical radiculopathy

Treatment for cervical radiculopathy (CR) often focuses on traction techniques due to the comfortable grip and control available in the cervical spine.

Neural mobilization is also common and positive effects have been observed on functional outcomes when using neural mobilization in combination with other treatment modalities.

Joint techniques are suitable for treating joint-oriented dysfunctions in CR.

Exercise programs, particularly neck-specific exercises, have also shown promise in improving pain, quality of life, and functional outcomes in patients with CR.

MAIN TAKEAWAYS

Traction remains a common approach in treating CR.

Multimodal treatment combining various techniques like neural mobilization, joint techniques, and specific exercise programs appear to provide better outcomes for patients.

However, there is still a need for more research to establish the efficacy and specificity of these treatment methods for cervical radiculopathy.

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We would greatly appreciate any feedback you have, as it helps us continually improve!

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