

CADTH RAPID RESPONSE REPORT: REFERENCE LIST

Manual Therapy for the Treatment of Cervicogenic Headaches: Clinical Effectiveness

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About CADTH: CADTH is an independent, not-for-profit organization responsible for providing Canada's health care decision-makers with objective evidence to help make informed decisions about the optimal use of drugs, medical devices, diagnostics, and procedures in our health care system.

Research Question

What is the clinical effectiveness of using manual therapy for the treatment of adults or pediatric patients with cervicogenic headaches?

Key Findings

Fourteen systematic reviews, 12 randomized controlled trials, and one non-randomized study were identified regarding manual therapy for the treatment of cervicogenic headaches.

Methods

A limited literature search was conducted on key resources including PubMed, The Cochrane Library, University of York Centre for Reviews and Dissemination (CRD) databases, Canadian and major international health technology agencies, as well as a focused Internet search. No filters were applied to limit the retrieval by study type. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published between January 1, 1997 and July 7, 2017. Internet links were provided, where available.

Selection Criteria

One reviewer screened citations and selected studies based on the inclusion criteria presented in Table 1.

Table 1: Selection Criteria

Population	Adults and pediatric patients with cervicogenic headaches
Intervention	Manual therapy (including manipulation, mobilization, traction, and soft tissue therapy)
Comparators	<ul style="list-style-type: none"> • Pharmacological interventions (including opioids); • Non-pharmacological interventions (e.g., education, exercise, other manual therapies, electrotherapy, etc.); • Placebo/sham interventions; • Wait list; • No interventions
Outcomes	<ul style="list-style-type: none"> • Clinical effectiveness and safety (e.g., self-rated recovery, functional recovery [e.g., disability, return to activities, work, or school], clinical outcomes [e.g., pain, health-related quality of life, depression, time to benefit, no change or worsening of pain, etc.]); • Adverse events and harms
Study Designs	Health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies

Results

Rapid Response reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials and non-randomized studies.

Fourteen systematic reviews (some with meta-analysis), 12 randomized controlled trials, and one non-randomized study were identified regarding manual therapy for the treatment of cervicogenic headaches. No relevant health technology assessments were identified.

Additional references of potential interest are provided in the appendix.

Health Technology Assessments

No literature identified.

Systematic Reviews and Meta-analyses

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12. Astin JA, Ernst E. The effectiveness of spinal manipulation for the treatment of headache disorders: A systematic review of randomized clinical trials. *Cephalalgia*. 2002 Oct;22(8):617-23.
[PubMed: PM12383058](#)
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Randomized Controlled Trials

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Non-Randomized Studies

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Appendix — Further Information

Previous CADTH Reports

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Guidelines and Recommendations

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Review Articles

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40. Pollmann W, Keidel M, Pfaffenrath V. Headache and the cervical spine: A critical review. *Cephalalgia*. 1997 Dec;17(8):801-16.
[PubMed: PM9453267](#)