



## A. PEDro update (4 September 2017)

PEDro contains 37,649 records. In the 4 September 2017 update you will find:

- 29,740 reports of randomised controlled trials (29,031 of these trials have confirmed ratings of methodological quality using the PEDro scale)
- 7,278 reports of systematic reviews, and
- 631 reports of evidence-based clinical practice guidelines

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## B. Systematic review found that interventions based on diet and physical activity reduce gestational weight gain and lower the odds of caesarean section

Thirty-six randomised controlled trials were included in this systematic review (n=12,526 women). The mean (SD) age of the participants was 30 years (5.1). The trials included interventions based on diet, physical activity, or a mixed approach of diet, physical activity, and behavior modifying techniques. About 45% of the women included were nulliparous, 40% were obese, and a similar proportion were classified as sedentary. Methodological quality of the included trials was assessed for sequence generation, allocation concealment, blinding, incomplete outcome data, selective outcome reporting, and other potential sources of bias. The primary outcomes were gestational weight gain, a composite of maternal outcomes, and a composite of children outcomes. The secondary outcomes were individual maternal and children complications.

For gestational weight gain, the intervention group reported less weight gain than the control

group (mean difference (MD) -0.70 kg, 95% confidence interval (CI) -0.92 to -0.48 kg, 33 studies, 9,320 women). Differences in maternal and children composite outcomes were not statistically significant (maternal: odds ratio (OR) 0.90, 95% CI 0.79 to 1.03, 24 studies, 8,852 women; children: OR 0.94, 95% CI 0.83 to 1.08, 18 studies, 7,981 women). For the secondary outcomes, there was strong evidence for a reduction in the odds of caesarean section favouring the intervention group (OR 0.91, 95% CI 0.83 to 0.99, 32 studies, 11,410 women), but not for other individual complications. There is no evidence that effects differ across subgroups of women. In conclusion, diet and physical activity based interventions during pregnancy reduce gestational weight gain and lower the odds of caesarean section.

The International Weight Management in Pregnancy (i-WIP) Collaborative Group. Effect of diet and physical activity based interventions in pregnancy on gestational weight gain and pregnancy outcomes: meta-analysis of individual participant data from randomised trials. *BMJ* 2017;358:j3119.

[Read more on PEDro.](#)

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### **C. PEDro systematic review update in the BJSM**

A new PEDro systematic review update has been published in the *British Journal of Sports Medicine*:

- [Early comprehensive physiotherapy after lumbar spine surgery](#)
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### **D. Karin Valkenet wins PEDro prize for best clinical trial at WCPT 2017**

PEDro supported a new prize at the World Confederation for Physical Therapy (WCPT) Congress in Cape Town in July 2017. The prize was for the best clinical trial presented at the congress. 88 abstracts presenting the primary results of high-quality and ground-breaking clinical trials were considered for the prize. Six judges, all experienced clinical trialists, attended shortlisted presentations to choose the best trial.



The prize was awarded to Karin Valkenet from the University Medical Center Utrecht in the Netherlands for her paper entitled *Preoperative inspiratory muscle training to reduce pneumonia after esophagectomy: the results of the PREPARE study, an international multicenter RCT*. Congratulations Karin.

The [protocol](#) for the trial has been published and we are looking forward to indexing the published trial results on PEDro.

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## E. Next PEDro update (October 2017)

The next PEDro update is on Monday 9 October 2017. This is a week later than usual because of a public holiday in Australia.



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