

대한신경외과학회지에 발표된 요통 환자의 치료결과 평가방법

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= Abstract =

Methods Measuring the Outcome of Patients with Low Back Pain in the Papers of Journal of Korean Neurosurgical Society

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Objectives : Criteria for evaluating the results of treating low back pain vary widely. We examined the methods measuring the outcome in the papers of Journal of Korean Neurosurgical Society.

Methods : We selected all published articles describing the methods measuring the outcome of low back pain in the journal. They were classified into 3 periods such as period 1 for volume 1 - 20, 2 for volume 21 - 25, and 3 for volume 26 - 28.

Results : There are 25 articles in period 1, 44 in period 2, and 30 in period 3. The outcome was classified into 0 to 5 classes by more than 15 different methods. Although the terms and descriptive criteria differ, 4 classes were the most common classification, being 16 in period 1, 39 in period 2, and 19 in period 3. The outcome was usually measured by authors' own method in period 1. In period 2, criteria by Gill et al was most commonly used along with many different criteria. Criteria by Prolo et al became a common method in period 3.

Conclusion : Varying methods compromised comparative analyses of outcome. A more simple and universally applicable criteria is necessary to facilitate comparisons among various methods of treatment.

KEY WORDS : Low back pain · Outcome measurement · Journal of Korean neurosurgical society · Spine.

서 론

가

대상과 방법

가

가 1~20 1 , 21~25 2 , 26~

가 28 3

가

가

결 과

1 25 , 2 44 , 3 30
 2~5
 가 1 16 , 2 39 , 3 19
 가 (Table 1).

1974

가 99.5%

1982 (excellent) 87%,
 (good) 13% 100%가
 가

, Excellent, Good, Poor(EGP) Good,
 Fair, Poor(GFP) , Good, Fair, Failed
 (GFFI) , Excellent, Good, Fair(EGF)
 가 가
 , Excellent, Good, Fair, Poor(EGFP) , Ex-
 cellent, Good, Satisfactory, Poor(EGSP) , Ex-
 cellent, Good, No improvement, Aggravated ,
 Improvement, Stationary, Aggravated, New findings,
 Excellent, Good, Fair, Unsatisfactory(EGFU),
 Excellent, Good, Fair,
 Poor, Failed Failure(EGFPFI)
 Cured, Much improved, Improved, Unchanged, Recur-
 rence

1 가
 가 가 , 2
 , Gill ⁸⁾ 가 , 3
 Prolo ¹³⁾ 가 (Table 2).

Benoist ¹⁾(EGFP), Ebeling ⁴⁾(EGSP), Getty ⁷⁾
 (GFP), Henley⁵⁾(EGFP), Herron ⁶⁾(GFP), Hudgins⁹⁾
 (EGFP), Kirkaldy - Willis ¹⁰⁾(EGFP), Ma(EGFP)¹¹⁾,

Table 1. Number of classes to measure the results of the back pain treatment

Number	Period 1	Period 2	Period 3	Total
2	2	0	0	2
3	4	5	2	11
4	16	39	19	74
5	3	1	4	8
Others	0	0	5	5

Period 1=Vol 1 - 20 ; Period 2=Vol 21 - 25 ; Period 3=Vol 26 - 28

White ¹⁴⁾(EGFP)

²⁾ , 가
 ring system) Picaza (0~20) Schreiber (5
 , 0~10) ()

고 찰

가

15가

가

2~3 2~5
 가 가 가
 4 가
 / / / , / / /
 , / / /
 , / / /
 (New findings) 4

가 ‘ ,
¹⁵⁾ ,
¹⁰⁾ , 가 ⁸⁾¹²⁾,
 가 ¹⁴⁾

5 ,
 , 가 . Macnab
¹²⁾ ,
 (much limitation of activity, high degree of pain,
 very minor improvement) ‘ , ‘
 , (severe pain and limitation, no
 improvement) ‘ ,

Table 2. Three most common methods measuring the outcome of patients with low back pain appeared in the papers of Journal Korean Neurosurgical Society (Vol. 1 - 28)

Author	Method	Frequency
Prolo et al ¹³⁾	Economy(5 classes) & Function(5 classes)	11
Macnab et al ¹²⁾	5 descriptive classes(EGFPFI)	8
Gill et al ⁸⁾	4 descriptive classes(EGFU)	7

EGFPFI=excellent, good, fair, poor, failed ; EGFU=excellent, good, fair, unsatisfactory

□ Appendix I □

Papers included this study

Year	Vol(pages)
1973	2(71 - 82)
1974	3(1 - 6)
1976	5(143 - 159)
1979	8(299 - 305)
1981	10(577 - 582)
1982	11(515 - 521)
1984	13(735 - 741)
1986	15(445 - 451), 15(567 - 572), 15(573 - 585)
1987	16(425 - 437)
1988	17(965 - 974), 17(1013 - 1028), 17(1389 - 1396), 17(1433 - 1439)
1989	18(129 - 136), 18(439 - 446), 18(447 - 454), 18(613 - 621), 18(1066 - 1072), 18(1073 - 1077)
1990	19(225 - 234), 19(1303 - 1313)
1991	20(528 - 534), 20(868 - 874)
1992	21(405 - 411), 21(505 - 514), 21(1615 - 1624), 21(671 - 677), 21(792 - 800)
1993	22(48 - 57), 22(58 - 62), 22(71 - 82), 22(339 - 349), 22(358 - 363), 22(493 - 503), 22(634 - 641) 22(968 - 974), 22(990 - 998)
1994	23(97 - 102), 23(625 - 629), 23(796 - 800), 23(1137 - 1142), 23(1375 - 1380)
1995	24(47 - 53), 24(239 - 245), 24(395 - 400), 24(565 - 573), 24(766 - 775), 24(916 - 923) 24(1065 - 1073), 24(1181 - 1186), 24(1385 - 1391)
1996	25(764 - 768), 25(793 - 801), 25(996 - 1002), 25(1142 - 1148), 25(1149 - 1155), 25(1183 - 1188) 25(1389 - 1394), 25(1395 - 1400), 25(1401 - 1406), 25(1620 - 1625), 25(1626 - 1632) 25(1794 - 1798), 25(1840 - 1844), 25(2250 - 2257), 25(2258 - 2261), 25(2262 - 2269)
1997	26(526 - 534), 26(542 - 547), 26(780 - 786), 26(808 - 813), 26(928 - 933), 26(946 - 952) 26(1259 - 1264), 26(1363 - 1370), 26(1401 - 1407)
1998	27(43 - 52), 27(153 - 158), 27(207 - 214), 27(229 - 236), 27(792 - 799), 27(815 - 819), 27(1109 - 1116) 27(1216 - 1223), 27(1370 - 1378), 27(1548 - 1557)
1999	28(246 - 252), 28(253 - 258), 28(470 - 474), 28(675 - 682), 28(809 - 816), 28(934 - 941), 28(971 - 979) 28(1120 - 1123), 28(1150 - 1156), 28(1579 - 1587), 28(1765 - 1773)

□ Appendix II □

치료결과 핵심 평가

1. ?
() () () () ()
() () () () ()
2. ?
() () () () ()
3. ?
() () () () ()
4. (4) ?

5. (4) ?

6. ?
() () () () ()