Canadian Chiropractic Guideline Initiative
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Launching the chiropractic practice-based research network

In December 2014, key stakeholders, including academics, elected professional provincial and national leaders, clinicians, government policy advisors, insurers, and patients met in Toronto to explore the factors critical to establishing and implementing a Canadian chiropractic PBRN. An advisory committee was established in Spring 2015.

CCGI seed fund awards for chiropractic PBRNs in Canada (2015-2018)

The CCGI Guideline Steering Committee approved seed funding to help establish local PBRNs in Canada through competitive announcements.

Research Funding

- **CCGI seed fund awards for three PBRNs totaling $45,000** were disbursed in October 2015
  
  *Project leads: Dr. Jeff Quon (BC), Dr. Jill Hayden (NS) and Dr. Simon French (ON)*

- **Two new CCGI awards totaling $25,000** were disbursed in March 2017
  
  *Project leads: Dr. Andrée-Anne Marchand (QC), Dr. Peter Stilwell (NS)*

- **The CCGI Guideline Steering Committee approved funding for awards totaling $45,000 in 2017-18**

Publications


What is a Practice-Based Research Network?

Primary care PBRNs bring together researchers and groups of clinicians and practices with the goal of improving health services delivery and closing the gap between research and practice.

The main goal of the CCGI PBRN is to optimize process of care, delivery and patient outcomes by ensuring clinical decisions are informed by evidence, patients’ values and preferences, and engaged clinicians. By providing researchers with a real-life laboratory setting in clinical practice, PBRNs creates a vital link between researchers, clinicians, patients, and professional leaders and serve as a research and Knowledge Translation network.

PBRN Advisory Committee

The PBRN Advisory Committee oversees the PBRN program in Canada and reviews the disbursement of CCGI seed funds to applicants. They meet regularly to review progress and discuss future directions for the program.
Dr. Jill Hayden DC, PhD, along with Dr. Peter Stilwell (Project Lead) led a team of researchers (Dr. Katherine Harman, Dr. Warren Hefford, Dr. Simon French, Dr. Janet Curran, and Piaf Des Rosiers) in a study looking at implementing a biopsychosocial assessment for low back pain within a Nova Scotian chiropractic PBRN.

"The aim of the study was to assess chiropractors’ awareness of low back pain clinical practice guidelines, and to identify barriers and facilitators to the screening and management of psychosocial factors for patients with low back pain.

Semi-structured interviews informed by the Theoretical Domains Framework were used with Nova Scotian chiropractors who were members of a PBRN."

Results

Most chiropractors in this study treated with an anatomical and biomechanical focus and reported that they did not always address psychosocial factors identified in their patients with low back pain. None of the 10 participants interviewed could name specific low back pain clinical practice guidelines. However, they correctly identified what guidelines generally recommended and described the value of psychosocial factors. Many of the barriers identified appeared to be modifiable with low-cost interventions, such as continuing education using evidence-informed behaviour change techniques.

Dissemination of results

Findings have been submitted to a journal for publication, and presented as a scientific poster at the Crossroads Interdisciplinary Health Research Conference in Halifax, Nova Scotia in March 2017. A workshop to PBRN members was delivered in Nova Scotia on 9 April 2017 (see picture above) which was pre-approved for continuing education credits by the Nova Scotia College of Chiropractors.

Dr. Jeff Quon, DC, PhD led a team of researchers (Dr. Brian Arthur (Project Lead), Dr. Simon French and Dr. Jill Hayden) in a study looking at engaging chiropractors in knowledge implementation with members of the Greater Vancouver-Fraser Valley Practice Based Research Network.

“Our study aimed to 1) estimate the rate of prescribed multimodal therapy for low back pain (LBP) amongst patients treated by PBRN chiropractors; 2) describe the short-term clinical outcomes of patients referred for standardized evidence-informed multimodal non-operative care that includes chiropractic spinal manipulation; 3) document changes in attitudes and opinions about evidence informed practice amongst chiropractors subsequent to participation in a PBRN; and 4) describe both the conditions (in addition to LBP), and the types of treatments received by patients managed by PBRN chiropractors.”

Progress to date

One hundred and twenty-three patients have now been referred from the hospital-based spine physician at Vancouver General Hospital for community-based chiropractic care through our PBRN. Discharge summaries have been collected on 81 patients treated by PBRN practitioners and summaries on remaining patients will be collected following completion of their respective SpineFlex program. Initial and follow-up EBASE questionnaires have been completed by 19/20 members of the British Columbia PBRN.

The research team anticipates completing the collection of all discharge summaries from patients by June 2017. They estimate data analysis and manuscript preparation to be completed by October 31, 2017. An extension to the initial timeline has been granted until October 2017.

PBRN activities in British Columbia

PBRN members have met regularly since September 2015. Topics for discussion have included the following: current evidence-based findings on exercise therapy for chronic LBP; best evidence syntheses for neck pain associated disorders; the OPTIMA 2015 systematic review on cost-effectiveness; assessment of causation and the management of patients experiencing adverse events; discussion of feedback from SpineFlex patients, and the importance of evidence-informed practice.

In November 2016, PBRN members held a ‘Meet and greet’ event with CCGI Best Practice Collaborators and Opinion Leaders in Vancouver, BC (pictured right).
The most frequent problem managed by participating chiropractors was back syndrome without radiating pain (20%). 88% of encounters were due to musculoskeletal complaints. The most common forms of care provided were soft tissue therapy (68%), manual adjustment (57%), and mobilization (47%).

A number of the participating chiropractors have expressed interest in continuing with the Queen’s University chiropractic PBRN, and two have expressed an interest in undertaking a Masters degree in a related area.
**CCGI seed fund awards for chiropractic PBRNs in Canada 2017-18**

Congratulations to the two successful PBRN teams who were awarded CCGI seed funds for 2017-18. Funding for their research projects will run from April 2017-March 2018.

**Dr. Andrée-Anne Marchand (Project Lead) and the research team (Dr. Mathieu Piché, Dr. André Bussières, Dr. Martin Descarreaux, Dr. Fadi Al Zoubi) in Québec** will be conducting a mixed methods pilot cluster-randomized controlled trial, looking at promoting the use of a self-management strategy among chiropractors treating individuals with spine pain.

**Dr. Peter Stilwell and Dr. Katherine Harman** with their team of researchers in Nova Scotia will be looking at communication styles used by chiropractors consulting with patients experiencing low back pain.

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