

A Focus on Clinical Expertise and Deductive Reasoning in Evidence-based Practice: The Lumbopelvic-hip

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Every day in clinical practice, health care practitioners meet patients seeking help for their pain and loss of function. While we wait for definitive scientific evidence to guide our practice, treatment must go on. Clinicians are keenly aware of the need to become evidence-based in clinical practice (EBP), but what does this truly mean? It appears that to many, EBP means that a clinician can only use assessment tests and treatment techniques or protocols that have been validated through the scientific process. This is difficult to adhere to since we don't have enough evidence at this time; indeed, could there ever be enough evidence for every situation met in clinical practice? Sackett et al (2000) defines evidence-based practice as "The integration of best research evidence, clinical expertise and patient values". They also note that "External clinical evidence can inform, but can never replace individual clinical expertise, and it is this expertise that decides whether the external evidence applies to the patient at all, and if so, how it should be integrated into a clinical decision". What is expertise? According to Ericsson & Smith (1991) "Expertise has been defined as having the ability to do the right thing at the right time".

This presentation will introduce a system-based classification for mechanism-based pain syndromes (Lee & Lee 2007). Following this, short cases or case examples will be presented which demonstrate impairments of the articular system (sacroiliac and pubic symphysis joints), myofascial system (abdominal wall and pelvic floor), neural system (altering timing/recruitment of local and global muscle systems), visceral system (uterus and bladder and associated ligaments) and combinations thereof. These examples will reveal how clinical expertise and deductive reasoning using this model helps to develop prescriptive multi-modal treatment programs for patients with pelvic girdle pain and thus assists the clinician to "do the right thing at the right time".