

Author Year Country Research Design Score Sample Size	Methods	Outcome
Pillastrini et al. 2006 Italy RCT PEDro = 3 Level 2 N = N/S	<p>Population: <i>Control Group:</i> Mean Age: 52.2 yr; Gender: male=75%, female=25%; <i>Treatment Group:</i> Mean Age: 31.5 yr; Gender: male=80%, female=20%; Level of injury: cervical; Severity of injury: complete =100%; AIS A.</p> <p>Intervention: The patients were randomized to receive either mechanical insufflation/exsufflation in addition to manual kinesitherapy, or kinesitherapy only.</p> <p>Outcome Measures: Forced vital capacity (FVC), FEV₁, peak expiratory flow (PEF), (FEV₁/FVC), arterious pressure of O₂ (Pa O₂), arterious pressure of CO₂ (Pa CO₂), (pH), saturation of oxygen (SaO₂).</p> <p>Chronicity: Time since injury not specified.</p>	<ol style="list-style-type: none"> 1. Among patients who received mechanical insufflation/exsufflation, FVC and FEV₁ was significantly higher at the end of treatment compared to the beginning (p=0.0001). 2. Among patients who received mechanical insufflation/exsufflation, PEF was significantly higher at the end of treatment compared to the beginning (p=0.0093). 3. Among patients in the control group, there was no significant improvement in FVC, FEV₁, or PEF (p>0.05) between the end of treatment and the beginning. 4. There were no significant differences in FEV₁/FVC, Pa O₂, Pa CO₂, pH, and SaO₂ in either of the groups (p>0.05 in all cases).
Garstang et al. 2000 USA Pre-post Level 4 N = 18	<p>Population: 18 patients with SCI (C1-T3), 88% were C5 or higher.</p> <p>Methods: Surveyed preference for: suctioning or maximal in/exsufflation (MI-E).</p> <p>Outcome Measures: Not Specified.</p> <p>Chronicity: Time since injury was up to 3 years post-injury; patients originated from several different acute care hospitals.</p>	<ol style="list-style-type: none"> 1. MI-E was less irritating, less painful, less tiring, less uncomfortable. All were clinically significant changes (except less tiring). 2. 16 of 18 patients preferred MI-E and one preferred suctioning; 1 patient had no preference. 3. When surveyed, average time from MI-E was 146 days and from suctioning was 253 days.