

Research Summary – 2-Minute Walk Test (2MWT) – Lower Limb and Walking

Author Year Country Research Design Setting	Demographics and Injury Characteristics of Sample	Validity	Reliability	Responsiveness Interpretability	
Willi et al. 2023 Multicentre- observational study to assess construct validity, test-rest reliability, and influence of walking performance on sensitivity to change of the 2mWT in individuals with SCI. Swiss Paraplegic Center Nottwil, Switzerland; Balgrist University Hospital, Zürich, Switzerland	N = 50 participants with SCI 33M, 17F Mean (SD) age 52.6 (16.3) years Neurological level of injury: Tetraplegic (n = 24), Paraplegic (n = 26) AIS Grade: AIS A (n = 2), AIS B (n = 0), AIS C (n = 7), and AIS D (n = 41) Type of injury: Traumatic (n = 28), non-traumatic (n = 22) Mean (SD) time since injury 6.11 (9.8) years	Construct validity: The 2mWT showed very strong correlations with the 6mWT (r = 0.992) and the 10MWT (r = 0.964) and a moderate relationship with the ordinal score of the WISCI II (r = 0.571) (Table 1). The dimension of the correlations for the 2mWT and the 6mWT with the other assessments were comparable.	Test-retest reliability: The walking distance of the 2mWT on the first and second test day showed a very high ICC (ICC = 0.980, p < 0.001).	SEM: - Overall = 7.5 m - Slow walkers = 8.5 m - Fast walkers = 7.3 m MDC: - Overall = 20.9 m - Slow walkers = 23.6 m - Fast walkers = 20.3 m	
Table 1. Walk test correlations with other functional measures:					
		6mWt	Self 10MWT	Max 10MWT	WISCI II
Overall	2mWT	0.992 (0.986– 0.995)	0.964 (0.941– 0.986)	0.974 (0.956–0.988)	0.571 (0.356– 0.784)

Values in parentheses are 95% CIs.