

Abstract

The goal of this master's thesis was to determine if there is a correlation between subjective, objective, and clinical examinations of patients with low back pain (LBP). For subjective assessment, the Oswestry Disability Index and the Short-Form McGill Pain Questionnaire 2 (SF-MPQ-2) were used. Clinical examinations were performed by a physical therapist certified in the Dynamic Neuromuscular Stabilization (DNS) method, using the DNS examination protocol. Additionally, goniometry measurements of hip joint range of motion and spine mobility evaluations were conducted using Schober, Stibor, and Thomayer mobility tests. For objective assessment, posturography was used to evaluate the patients' postural stability. The outcomes of these measurements were statistically analysed, and correlations were determined. The main hypothesis was that a positive correlation exists between the performed examinations. The study included the evaluation of 28 patients with LBP who had no other serious health issues. A moderate correlation, according to the Spearman correlation coefficient, was identified between the Schober test and postural sway in the anteroposterior direction, as well as between the Stibor test and continuous pain analyzed via SF-MPQ-2, at a 1% level of statistical significance.