Table e-2. Rehabilitation therapies with sufficient evidence to support recommendations

Intervention	Number and class of study/studies	MS type(s) studied	Outcome	Conclusion
Weekly home or outpatient PT x 8 weeks	1 Class I study (Wiles 2001)[e28]	MS type unspecified, participants able to walk ≥5m with or without an assistive device	Balance, disability and gait	Probably effective
Weekly home or outpatient PT x 8 weeks	1 Class I study (Wiles 2001)[e28]	MS type unspecified, participants able to walk ≥5 m with or without an assistive device	Upper-extremity dexterity	Probably ineffective
Comprehensive multidisciplinary outpatient rehabilitation x 6 weeks	1 Class II study (Patti 2003)[e12]	SPMS, PPMS, EDSS 4.0–8.0	Disability/function	Possibly effective
Individual inpatient rehabilitation x 3 weeks followed by home exercise program for 15 weeks	1 Class II study (Solari 1999)[e33]	RRMS, SPMS, PPMS, EDSS 3–6.5	Disability	Possibly effective
Breathing-enhanced upper-extremity exercises for 6 weeks	1 Class II study (Mutluay 2007)[e77]	RRMS, PPMS, SPMS, mean EDSS 4.51±1.55	Timed gait, FEV_1	Possibly effective*
Breathing-enhanced upper-extremity exercises for 6 weeks	1 Class II study (Mutluay 2007)[e77]	RRMS, PPMS, SPMS, mean EDSS 4.51±1.55	Disability	Possibly ineffective
Inspiratory muscle training for 10 weeks	1 Class II study (Fry 2007)[e79]	RRMS, PPMS, SPMS, EDSS 2–6.5	PI_{max}	Possibly effective
Motor and sensory balance training or	1 Class II study (Catteneo 2007)[e65]	RRMS, SPMS, PPMS	Static and dynamic balance	Possibly effective

motor balance training for 3 weeks				
Motor balance training for 3 weeks	1 Class II study (Catteneo 2007)[e65]	RRMS, SPMS, PPMS	Static balance	Possibly effective

Abbreviations: EDSS = Expanded Disability Status Scale; FEV_1 = forced expiratory volume in 1 second; PI_{max} = maximal inspiratory pressure; PPMS = primary progressive MS, RRMS = relapsing-remitting MS; SPMS = secondary progressive MS.

*Clinical significance uncertain.
Note. Citations found in complete guideline, published as an online data supplement to the main article.