

Macnab criteria

The MacNab [scale scores](#) were used as [indicators](#) of success in terms of pain relief. The scores were divided into the following four grades: 75–100% (excellent), 50–74% (good), 25–49% (fair) and 0–24% (poor). The “excellent” and “good” results were accepted as favorable outcomes, and the “fair” and “poor” results were considered unsatisfactory ¹⁾.

Spinal instability

Excellent

No pain; no restriction of activity

Good

Occasional pain of sufficient severity to interfere with the patient's ability to do his normal work or his capacity to enjoy himself in leisure hours

Fair

Improved functional capacity, but handicapped by intermittent pain of sufficient severity to curtail or modify work or leisure activities

Poor

No improvement or insufficient improvement to enable increase in activities; further operative intervention required

Name and Synonyms Macnab criteria, MacNab's outcome assessment of patient satisfaction. Source Article Macnab I. “negative disc exploration: an analysis of the cause of nerve root involvement in sixty-eight patients.” J Bone Joint Surg (Am) 1971 ;53:891-903

The patient is asked to rate his level of well-being, generally after surgery. The patient choose one of the four: Excellent, Good, Fair, Poor. With the the same wording with the original (source) paper, the explanations of each grade are as follows:

Excellent: No pain; no restriction of activity.

Good: Occasional back or leg pain of sufficient severity to interfere with the patient’s ability to do his normal work or his capacity to enjoy himself in his leisure hours.

Fair: Improved functional capacity, but handicapped by intermittent pain of sufficient severity to curtail or modify work or leisure activities.

Poor: No improvement or insufficient improvement to enable increase in activities; further operative intervention required. Versions

Modified Macnab Criteria

see [Modified Macnab Criteria](#),

¹⁾

Macnab I. Negative disc exploration. An analysis of the causes of nerve-root involvement in sixty-eight patients. J Bone Joint Surg Am. 1971 Jul;53(5):891-903. PMID: 4326746.

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