

Effects of Mobilization with Movement (MWM) in Shoulder Impingement Syndrome Patients on Acromiohumeral Distance using Ultrasonography

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Setting the scene:

Shoulder Impingement Syndrome (SIS) is defined as the mechanical entrapment of the rotator cuff (mainly the supraspinatus tendon) or the subacromial bursa in the subacromial space between the humeral head and the acromion or coracohumeral ligament. The subacromial space or acromiohumeral distance could be measured using ultrasound which was found to be non-invasive, radiation free and has high validity. Mobilization with Movement (MWM) is a manual therapy technique in which a manual force, usually in the form of a joint glide is applied to a motion segment and sustained while a previously impaired action is performed. The aim of this study was to investigate the effects of MWM on acromiohumeral distance, pain and disability in patients with Shoulder Impingement Syndrome.

What did they do?

15 subjects were diagnosed with Shoulder Impingement Syndrome were selected. Pre-evaluation was done followed by treatment protocol of manual MWM posterolateral glide for shoulder with Patient seated at the edge of a chair for 6 sessions with 24 hours between sessions after which post evaluation was done. The main outcome measures included ultrasonographic measurement of the acromiohumeral distance, visual analogue scale (VAS), Shoulder Pain and Disability Index (SPADI), Disabilities of Arm, Shoulder and Hand (DASH). The results showed significant changes in acromiohumeral distance, pain and in disability.

Takeaway message:

MWM can be effective in improving shoulder impingement and decreasing pain and disability.