

Effects of unilateral posteroanterior mobilization in subjects with sacralized lumbosacral transitional vertebrae.

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Setting the scene:

In this RCT, they aimed to find out the efficacy of **unilateral posteroanterior (PA) mobilization** over **type IA and type IIA sacralized lumbosacral** transitional vertebrae in patients with low back pain with or without leg pain.

What did they do?

They get **30 subject** and they randomly allocate them into two groups Group A treated with self-lumbar mobility and stretching exercises p Unilateral PA mobilization p hot pack. And group B treated with self-lumbar mobility and stretching exercises p hot pack and before initiating treatment, subjects were assessed for dependent variables: Pain intensity by **VAS**, **Forward bending and side bending ROM** by modified finger to floor method with the help of an inch-tape and functions by **Modified Oswestry Functional Disability Questionnaires**. Post-test measurements were taken after completion 2 weeks of therapy.

improvement in Side flexion range of motion on non sacralized side, was improvement in flexion range of motion over time in both the groups but to a greater extent in experimental group patients than patients in control group, there was reduction of pain over time to a greater extent in experimental group patients than patients in control group, and improvement in Modified Oswestry low back pain disability score over time to a greater extent in experimental group patients than patients in control group.

Takeaway message:

PA pressure is an effective mobilization method in PA mobilization reducing low back pain, improving ROM and related disability as compared to impairment based exercises alone in patients with low back pain with or without radiation to lower limbs having abnormally large transverse processes and hypomobile type IA and IIA lumbo- sacral transitional vertebrae.