

Oktober 2020

Dit is de nieuwsbrief van de commissie journal club van Schoudernetwerk Amsterdam.

Spinal Manipulation and Electrical Dry Needling in Patients With Subacromial Pain Syndrome: A Multicenter Randomized Clinical Trial.

OBJECTIVES: To compare the effects of spinal thrust manipulation and electrical dry needling (TMEDN group) to those of nonthrust peripheral joint/soft tissue mobilization, exercise, and interferential current (NTMEX group) on pain experienced greater reductions in shoulder pain and disability (P<.001) compared to the NTMEX group. At 3 months, a greater proportion of patients within the TMEDN group achieved a successful outcome and stopped taking medication (P<.001). **CONCLUSION:** Cervicothoracic and upper-rib thrust manipulation combined with electrical dry needling resulted in greater reductions in pain, disability, and medication intake than nonthrust peripheral joint/soft tissue mobilization, exercise, and interferential current in patients with SAPS. The effects were maintained at 3 months.

Deltoid muscle contribution to shoulder flexion and abduction strength - An experimental approach

Conclusion: The deltoid shows a linear contribution to maximal shoulder strength depending on the abduction or flexion angle, ranging from 24% in 0° to 75% in 120° of abduction and from 11% in 0° to 70% in 120° of flexion, respectively. The overall contribution to abduction strength is higher than to flexion strength. The combination of deltoid muscle and teres minor contributes about 50% to external rotation strength in 90° of abduction. The internal rotation strength is not influenced by a deltoid paralysis. This study highlights the position-dependent contribution of the shoulder muscles to strength development and thereby provides a new empirical approach to better understand human shoulder kinematics.

Effects of adding scapular stabilization exercises to a periscapular strengthening exercise program in patients with subacromial pain syndrome: A randomized controlled trial

OBJECTIVES: To investigate the effect of adding scapular stabilization exercises, emphasizing retraction, and depression of the scapula, to a progressive periscapular strengthening protocol on disability, pain, muscle strength, and ROM in patients with SAPS.

Conclusion: The inclusion of the isolated scapular stabilization exercises, emphasizing retraction and depression of the scapula, to a progressive general periscapular strengthening protocol did not add benefits to self-reported shoulder pain and disability, muscle strength, and ROM in patients with SAPS.

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Filip Struyf: Webinar: revalidatie na schouderprothese: 3 december 2020: 19.30 - 22.00 (online)

Adam Meakins: Complex doesn't have to be complicated: 22 - 23 januari 2021 (online)

Ben Kibler: The scapula: function, dysfunction, evaluation and treatment: 16-17 maart 2021 (Nijmegen), 18-19 maart 2021 (Herentals)

Jo Gibson: The shoulder: Steps to success: 9 - 10 september 2021 (Nijmegen)

Podcast tip:

https://podcasts.apple.com
Jo Gibson: The BioPsychoSocial Model