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Neural Mobilisation Techniques: A Comprehensive Review of Methods and Applications

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ABSTRACT

Neural mobilisation treatments are specific therapeutic procedures that improve nerve mobility, reduce neural tension, and relieve symptoms caused by nerve compression or irritation. They are often used to treat upper-limb diseases like carpal tunnel syndrome, cubital tunnel syndrome, and radial tunnel syndrome.

Mobilisation treatments for the upper limb are mainly directed at the median, radial, and ulnar nerves. Median nerve mobilisation includes procedures like nerve gliding and tensioning, which target wrist, elbow, and shoulder motions to improve neural mobility. Radial nerve mobilisation addresses entrapment locations by including sliding and tensioning motions with wrist flexion, elbow extension, and forearm pronation. To reduce tension and enhance function, ulnar nerve mobilisation applies techniques like gliding and tensioning through actions of elbow flexion, wrist extension, and shoulder abduction.

Nerve flossing and oscillatory treatments are two general procedures that induce neural desensitisation and increase total nerve mobility. Functional approaches frequently include cervical motions or manual treatment to address proximal nerve involvement and improve results. Individual examination determines the approach used, which targets specific neurological pathways and efficiently addresses symptoms.

Neural mobilisations should be supervised by a certified therapist to best achieve positive effect with adequate safety measures with effectiveness. Some of these techniques greatly enhance mobility with decreased pain as well as facilitating recovery in both the functional capacities of patients that have upper-limb neuropathy. However, caution should prevail with the approach since movements done must not stir up symptoms, so adjustments accordingly should be established.

Keywords: Median nerve, Pain, Pronation, Radial neuropathy, Ulnar nerve.