

Effectiveness of Spencer Technique versus Capsular Stretching Along with Tens in Patients with Adhesive Capsulitis: A Narrative Review

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ABSTRACT

Introduction: Frozen shoulder also known as adhesive capsulitis is a common shoulder condition marked by pain and a gradual loss of shoulder movement. Three overlapping stages are seen by frozen shoulder patients: Stage I is inflammation, Stage II is frozen, and Stage III is thawing. The Spencer approach is a widely used set of standardised shoulder treatments that can be applied to diagnosis, prognosis, and treatment. Capsular stretching can ease intra-articular pressure and promote articular surface separation, while Transcutaneous Electrical Nerve Stimulation (TENS) therapy involves electrical stimulation to relieve pain and tension in muscles. This study aims to compare the efficacy of the Spencer technique with capsular stretching in combination with TENS therapy in treating patients with adhesive capsulitis.

Aim: To assess the existing literature on the effectiveness of Spencer technique versus Capsular stretching along with TENS in patients with adhesive capsulitis, identify the limitation of previous studies, and justify the need for further research.

Materials and Methods: All the related literature were incorporated that was published from the year 2010 to 2024 and collected from various search databases like Google Scholar, PubMed, Scopus,

etc., by using keywords “Adhesive Capsulitis”, “TENS”, “Capsular Stretching”. In this review we have included various parameters such as clinical diagnosis of adhesive capsulitis (frozen shoulder) stage 1 & stage 2, duration of symptoms for at least three months, and no previous shoulder surgery or recent trauma. Systemic conditions affecting the shoulder & recent fractures were excluded. The articles were checked thoroughly and only full text articles were included for this review. These articles were reviewed in a narrative way.

Results: As a result, this review appears to show significant improvement in the pain, Range of Motion (ROM), functional mobility, and Quality of Life (QOL).

Conclusion: In patients with adhesive capsulitis, Spencer technique and capsular stretching did significantly improve rehabilitation results. Recommendations should be directed towards the development of rehabilitation programmes that encompass these interventions to achieve superior clinical outcomes and patient satisfaction.

Implications: This research highlights a novel approach to physiotherapy that is effective, economical and has a positive impact on saving recovery time and increasing satisfaction rates.

Keywords: Quality of life, Range of motion, Transcutaneous electrical nerve stimulation

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