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Management of Upper Trapezius Trigger Points using Combined Manual Therapy Approaches

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ABSTRACT

Introduction: Upper trapezius myofascial trigger points commonly cause neck pain, restricted cervical motion, and functional limitation, particularly in individuals with prolonged postural stress and sedentary lifestyles. Physiotherapy interventions such as soft tissue mobilisation, sustained compression, cooling-assisted stretching, and muscle facilitation techniques are frequently used; however, comparative evidence for combined treatment approaches remains limited.

Aim: To compare the effectiveness of two physiotherapy intervention combinations in managing upper trapezius myofascial trigger points.

Materials and Methods: A comparative interventional study was conducted among adults with active upper trapezius trigger points. Participants were randomly allocated into two groups. One group received soft tissue release with sustained compression and conventional electrotherapy, while the second group underwent cooling-assisted stretching with muscle facilitation techniques and conventional electrotherapy. Pain, neck disability, and cervical mobility were assessed pre- and post-intervention using standardised outcome measures. Statistical analysis was performed using appropriate parametric tests with significance set at $p<0.05$.

Results: Both intervention groups demonstrated significant improvements in pain, cervical mobility, and functional performance after treatment ($p<0.05$). The soft tissue release and sustained compression group showed greater reduction in pain and disability, whereas the cooling-assisted stretching and muscle facilitation group demonstrated relatively better cervical mobility. However, intergroup differences in mobility outcomes were not statistically significant ($p>0.05$).

Conclusion: Both physiotherapy intervention combinations were effective in managing upper trapezius myofascial trigger points. However, the soft tissue release and sustained compression approach appeared more effective for pain reduction and functional improvement, while cooling-assisted stretching with muscle facilitation showed slightly better improvement in cervical mobility.

Keywords: Cervical mobility, Myofascial trigger points, Neck pain, Physiotherapy.

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