REHABILITATION USING MANUAL MOBILIZATION FOR THORACIC KYPHOSIS IN ELDERLY POSTMENOPAUSAL PATIENTS WITH OSTEOPOROSIS.

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ABSTRACT

OBJECTIVE: To explore the feasibility and effects of rehabilitation using manual mobilization of the thoracic spine in elderly female patients with osteoporosis.

METHODS: Forty-eight postmenopausal patients with osteoporosis (age 76 +/- 7 years) were randomly assigned to 3 months rehabilitation (18 sessions including manual mobilization, taping and exercises, n = 29) or control (wait-list, n = 19). The primary outcome was thoracic kyphosis degree (Spinal-Mouse). Secondary outcomes were back pain (visual analogue scale) and quality of life (Qualeffo-41). Explanatory outcomes were compliance with rehabilitation, complications, and patients' and therapists' perceptions regarding the rehabilitation programme.

RESULTS: Thoracic kyphosis improved significantly following rehabilitation compared with controls (intention-to-treat analysis, p = 0.017); and in patients who were compliant with rehabilitation (n = 15) compared with those who were non-compliant (p = 0.002) and controls (p = 0.001). Mental health worsened slightly in the rehabilitation group (p = 0.029), but not significantly compared with controls. Neither patients nor physical therapists reported serious adverse effects.

CONCLUSION: Three months of rehabilitation with manual mobilization can attenuate thoracic kyphosis in elderly patients with osteoporosis. Its impact on back pain and quality of life remains unclear and needs further investigation.

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