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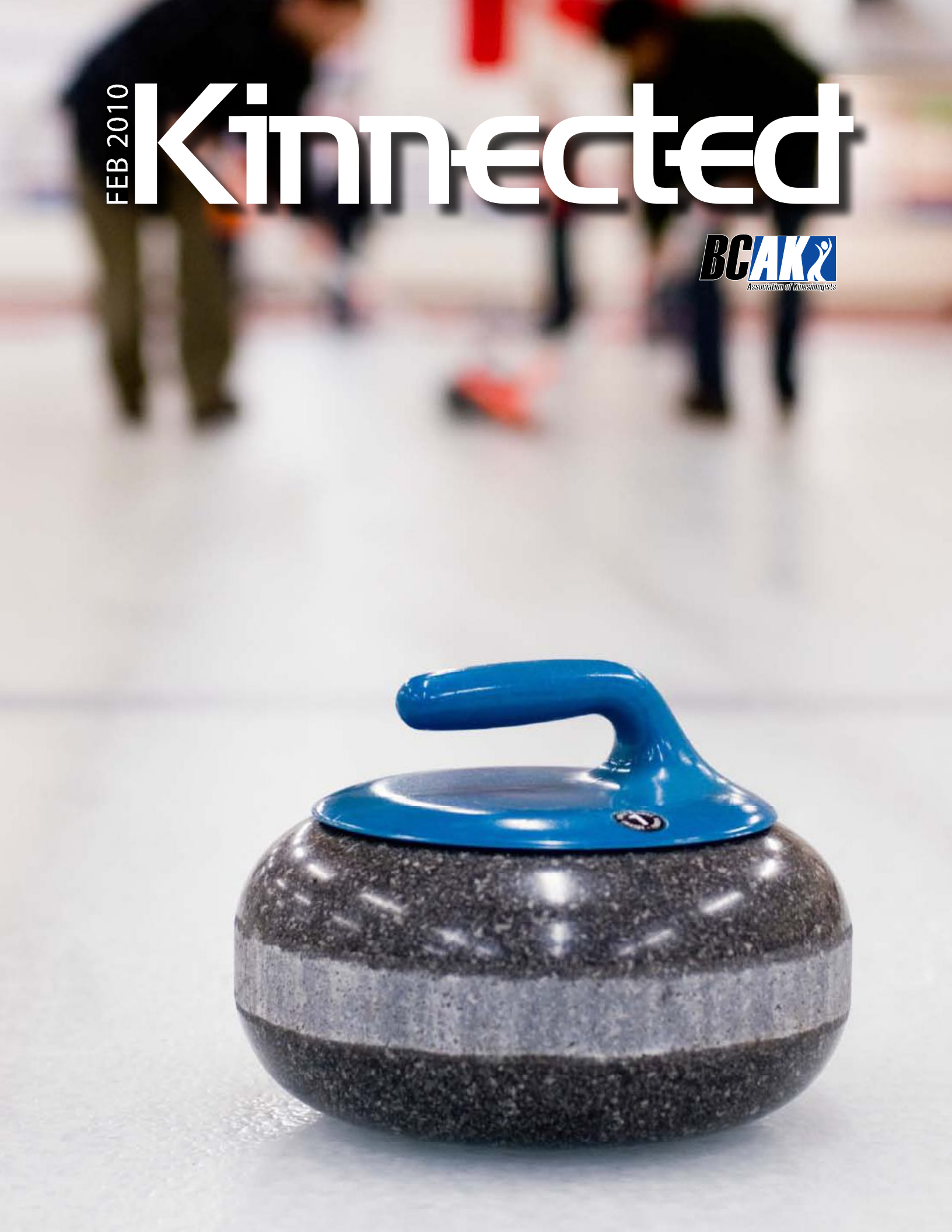

Rehabilitation of Individuals with Shoulder Impingement

Self-Stretching is More Effective than Manual Stretching of the Pectoralisis Minor Muscle

Persons experiencing shoulder impingement often have difficulties with scapular motion, and it has been suggested that the association between these individuals' scapular motion limitations and their shoulder symptoms can be linked to a decreased resting length of their pectoralis minor muscle. It is not known whether this decreased length causes scapular motion difficulties or whether the decreased length *results from* the limitations in scapular motion. Regardless, stretching of the pectoralis minor muscle is thought to be important for the rehabilitation of persons with shoulder impingement.

In 2006 researchers published the results of a study they conducted to compare the effectiveness of three different stretches for the pectoralis minor muscle. They enrolled fifty people who did not have shoulder pain or a history of shoulder trauma, who were required to complete a unilateral self-stretch, a supine manual (i.e., by an examiner) stretch, and a sitting manual stretch (in that order). **Statistical analyses showed that the unilateral self-stretch was the most effective at lengthening the pectoralis minor muscle, and the sitting manual stretch was the least effective.**

These results were contrary to the investigators' hypothesis that the manual stretches would be the most effective due to an examiner's ability to place directed pressure on the participants' coracoid processes. The researchers suggested several explanations for the superior effectiveness of the self-stretch, including increased patient control over the intensity and position of the stretch, increased patient guarding and discomfort in response to manual pressure on the coracoid process, and the possibility that the self-stretch lead to more scapular external rotation at the same time scapular posterior tipping occurred. Future work with patients and study participants who have shoulder impingement should take these findings into account when designing effective stretching programs for these individuals. Source: **JOURNAL OF SHOULDER AND ELBOW SURGERY** (15(3): 324, '06).

Rick Kaselj is a Practicing Kinesiologist who has combined his work experience and passion for research to create an extensive list of exercise rehabilitation courses and webinars for Kinesiologists. Over the past decade, Rick has given over 246 presentations to over 4800 fitness professionals and consumers across North America while continuing to work in rehabilitation centers, physiotherapy clinics, fitness clubs and personal training studios. Rick recently completed his Masters of Science degree focusing on corrective exercise and therapeutic exercise for the rotator cuff. To reach Rick or learn about his exercise rehabilitation courses please visit www.ExercisesForInjuries.com