# STATIC PROGRESSIVE STRETCH IMPROVES RANGE OF MOTION IN

## ARTHROFIBROSIS FOLLOWING TOTAL KNEE ARTHROPLASTY

Full Study appeared in Knee Surgery, Sports Traumotology, Arthroscopy. Feb 2010, Vol 18(2) 194 - 199. Peter M. Bonutti, German A. Marulanda, Mike S. McGrath, Michael A. Mont, Michael G. Zywiel.

Arthrofibrosis is a relatively common complication after total knee arthroplasty (TKA) that significantly impacts function and quality of life. Static progressive stretch (SPS) is a technique that has shown results in treatment of stiffness of the elbow, ankle, wrist, and knee. This study evaluated use of a SPS device for patients with refractory knee stiffness after TKA.

25 patients with knee stiffness and unsatisfactory improvement following manipulation and conventional physical therapy were evaluated following a course of SPS device therapy. Authors conclude that SPS therapy may be an effective method for increasing knee joint ROM when arthrofibrosis develops following TKA.

#### Materials and Methods

- 25 consecutive patients with knee stiffness after TKA were treated with a bidirectional SPS orthosis.
- Knee stiffness was defined as less than 90° active flexion and / or limited knee extension that negatively impacted patient function
- All patients had undergone manipulation under anesthesia without satisfactory improvement in knee ROM.
- All patients had also undergone a standard course of physical therapy.
- Patients used a Knee SPS orthosis (Joint Active Systems Inc, Effingham, IL), and followed a 30-minute treatment protocol up to three times per day per direction of ROM loss.
- SPS treatment was continued until no further ROM improvement was measured for at least one week.
- Gains in active knee extension and flexion ROM, duration of treatment, patient satisfaction, and incidence of complications were evaluated.

#### Results

- All patients experienced an increase in knee flexion, extension and total arc of motion following SPS knee orthosis use.
- Median gain in total knee ROM was 25° (range, 2° 60°).
- Median gain in active knee flexion was 19°, median gain in active extension was 7°.
- Median duration of device use was 7 weeks.
- Median satisfaction score was 9 points (range 1 10);
  92% reported satisfaction scores of 6 or higher.
- No injuries, skin compromise, nerve palsies or other complications associated with use of the SPS orthosis were reported.

### **Discussion and Conclusion**

- Results demonstrate that the use of an SPS orthosis increases total knee ROM in patients following TKA when arthrofibrosis is present.
- SPS orthosis use may be an excellent first choice of treat- ment in patients with persistent knee stiffness following TKA, prior to manipulation under anesthesia or lysis of adhesions.