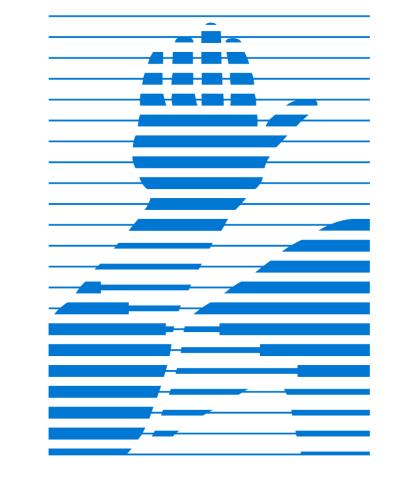


Immediate Effects of Counterforce Bracing vs. Kinesiotaping During Activity: A Randomized Crossover Trial in Patients with Lateral Elbow Tendinopathy

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INTRODUCTION

> Lateral elbow tendinopathy (LET) is common, and benefits from orthotic (splinting) intervention. No clear evidence on a superior orthoses is yet available. Many RCTs do not include activity.

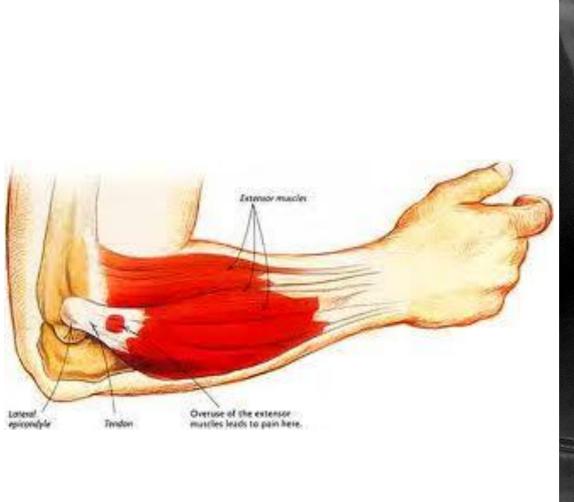
PURPOSE

> To compare the efficacy of counterforce bracing and kinesiotape (KT) immediately upon application and following five minutes of repetitive upper extremity activity in patients with LET.

SUBJECT DEMOGRAPHICS

Demographic	N = 30
Mean age	45 (range 29-61)
Gender Male: Female (%)	56:44 (%)
Duration of symptoms	24 ± 20.7
(months)	months
Worker's Compensation	(18/14)
(yes/no)	
Mean PRTEE	39 (range 5-81)
(pain & function)	







METHODS

Intervention: Counterforce brace or Kinesiotape (KT)

Type of Trial: Randomized; Crossover

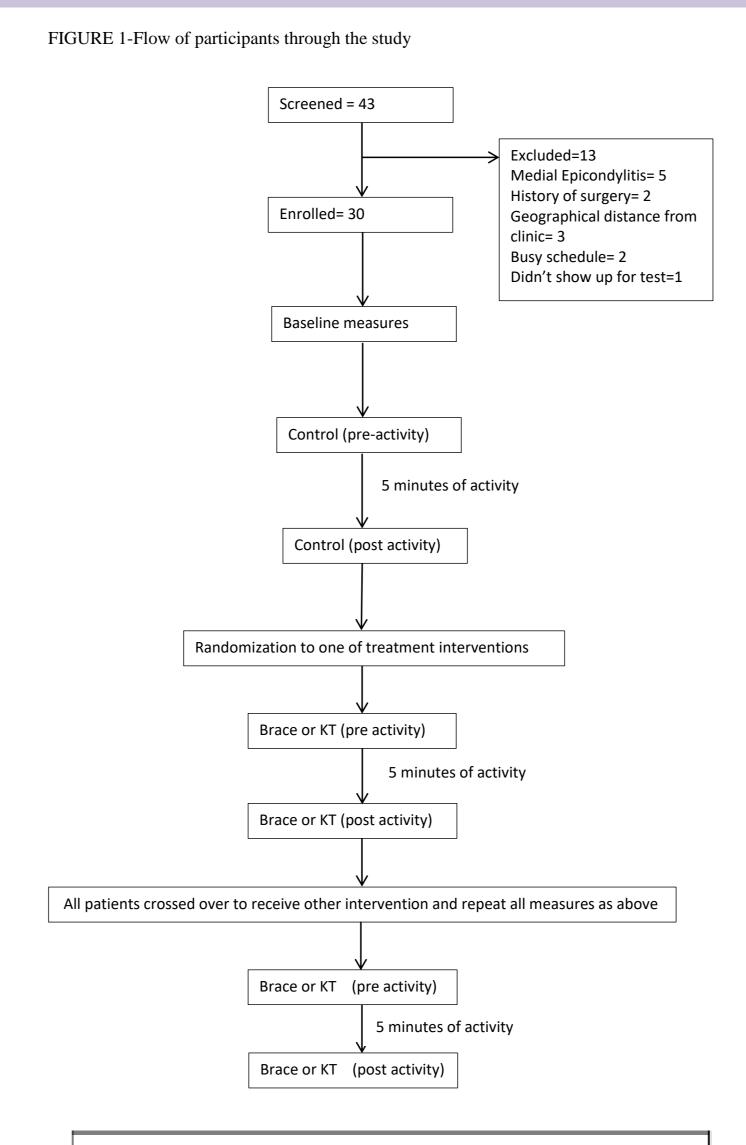
Exposure: Fit-HaNSA activity task

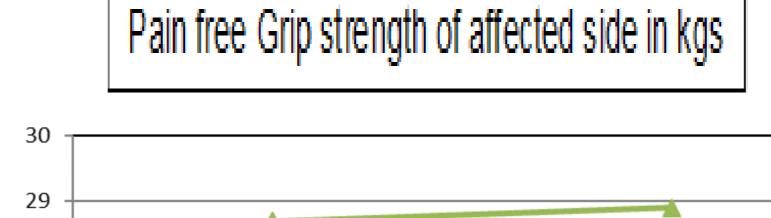
Outcomes and Outcome Measures

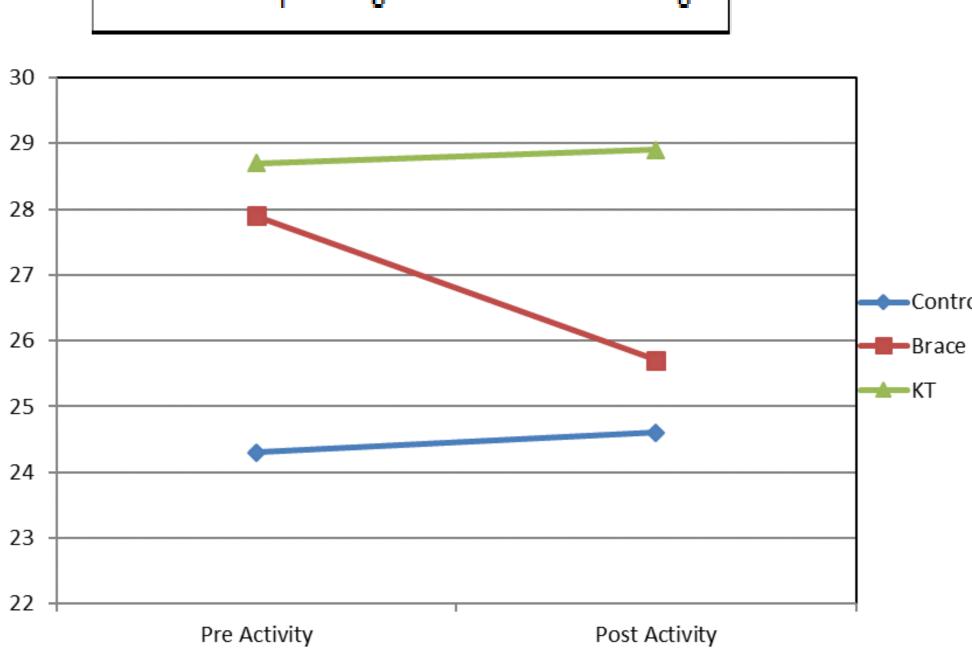
- 1.Pain-free grip strength (PFGS)
- 2. Pressure Pain Threshold (PPT)
- 3. Numeric Pain Rating

Analysis: GLM

RESULTS

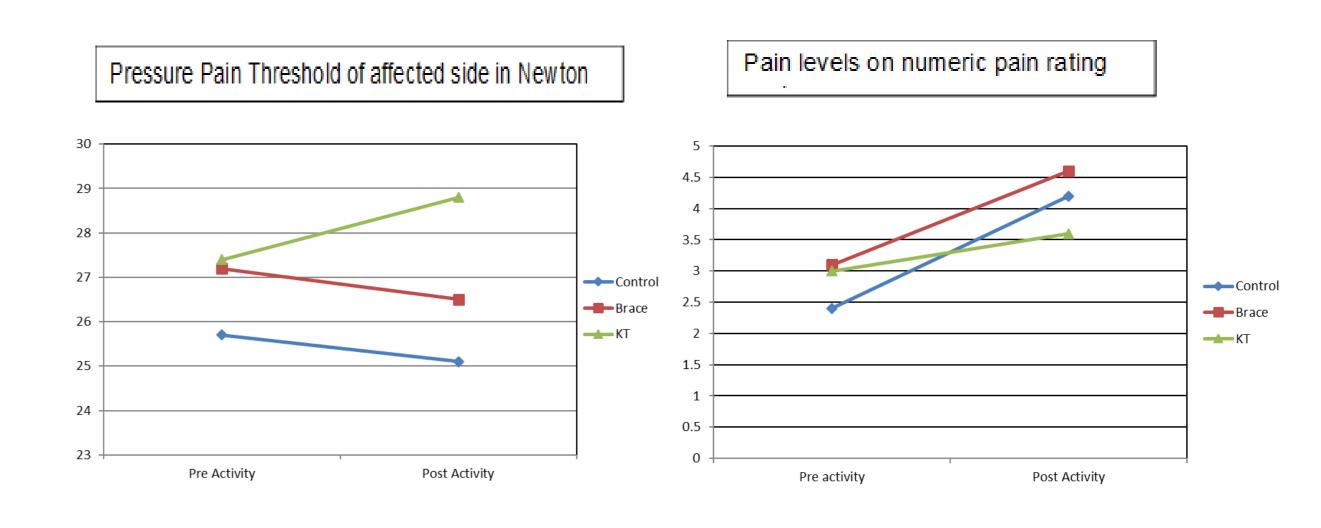






RESULTS

- > Improvement in PFGS with both bracing (2.3 kgs) and KT (4.3 kg) (p<0.01) immediately upon application.
- > Decline in PFGS (2.2kg) and a concurrent increase in pain level following the activity with brace (p=0.001).
- > No significant worsening after activity with KT.
- > No change in PPT across all treatment and time conditions (p>0.05).
- >Increase in pain levels with activity (p<0.05).
- >60% (n=18) of patients preferred KT over bracing.



CONCLUSION

>While both bracing and kinesiotape reduced symptoms of LET at rest; only kinesiotape maintained pain-free grip strength strength after a repetitive standardized activity. Studies comparing these 2 interventions over longer periods of use are needed.

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