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A Review of Pain Management and Disability Prevention in Stage II Adhesive Capsulitis

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Abstract

Purpose: This umbrella review of systematic reviews was to analyze the literature, investigating the effects of physiotherapy and rehabilitative interventions in patients suffering from stage II adhesive capsulitis on their pain management and disability prevention.

Relevance: Adhesive capsulitis is a painful condition characterized by progressive loss of shoulder function with passive and active range of motion reduction. To date, there is still no consensus regarding its rehabilitative treatment for pain management and disability prevention.

Methodology: A review of the scientific literature was carried out from 2010 until 2022 using the following search databases: PubMed, Medline, PEDro, Scopus and Cochrane Library of Systematic Reviews. A combination of terms was used for the search: frozen shoulder OR adhesive capsulitis AND systematic review OR meta-analysis AND rehabilitation OR functional recovery AND disability prevention OR prophylaxis. We included systematic reviews that specifically dealt with stage II adhesive capsulitis, treated with physiotherapy. All the systematic reviews and meta-analyses included in the study that met the inclusion criteria were assessed using the Assessment of Multiple Systematic Reviews as a quality assessment tool.

Analysis: Qualitative analysis was used

Results: Out of 51 studies, only 23 systematic reviews respected the eligibility criteria and were included in this study. Their results showed an important heterogeneity of the studies and all of them agree on the lack of high-quality scientific work to prove unequivocally which rehabilitative treatment is better than the other. It was also found that due to this lack of gold standard criteria, there is also heterogeneity in the diagnosis of the same.

Conclusion: Physiotherapeutic and Rehabilitative interventions are undoubtedly effective in treating adhesive capsulitis, but there is no evidence that one approach is more effective than the other regarding the methods reported. Very few studies have worked on follow up disability prevention due to adhesive capsulitis. Future high-quality RCTs are needed to standardize the treatment modalities of each physiotherapy intervention to provide strong recommendations in favor.

Implications: This study will give a baseline of information in area of pain management and disability prevention in stage II adhesive capsulitis which in turn can lead to formulation of evidence-based protocols for the treatment.

Keywords: Adhesive capsulitis, frozen shoulder, pain control, pain management, rehabilitation, disability prevention, prophylaxis.