

# MOBILIZATION/MANIPULATIONS



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# DEFINITIONS

- are **passive, skilled** manual therapy techniques
- applied to **joints and related soft** tissues
- at **varying speeds and amplitudes**
- using **physiological or accessory motions** for therapeutic purposes.
- The varying speeds and amplitudes can range from a **small-amplitude force applied at fast velocity to a large-amplitude force applied at slow velocity**



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# ***Thrust manipulation/high-velocity thrust (HVT)***

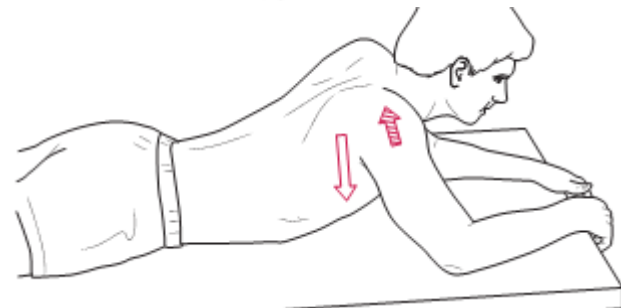
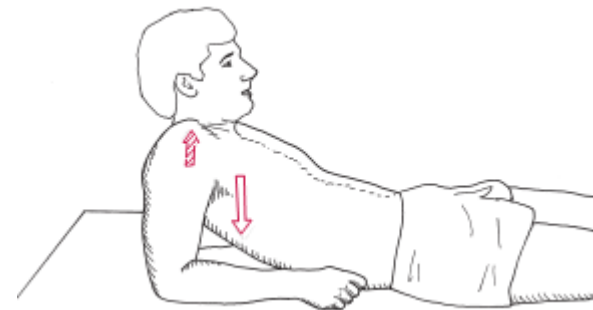
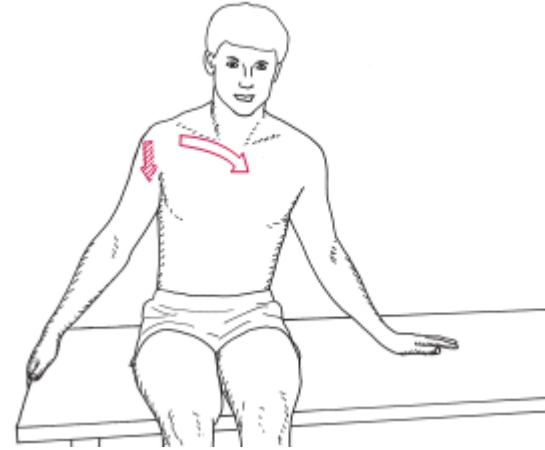
- Thrust refers to **high-velocity, short-amplitude** techniques.
- The thrust is performed **at the end of the pathological limit** of the joint and is intended to alter **positional relationships, snap adhesions, or stimulate joint receptors**.
- **Pathological limit** means the end of the available ROM when there is restriction.



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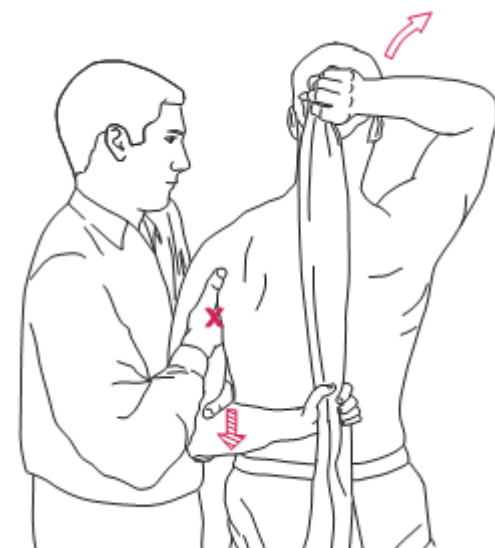
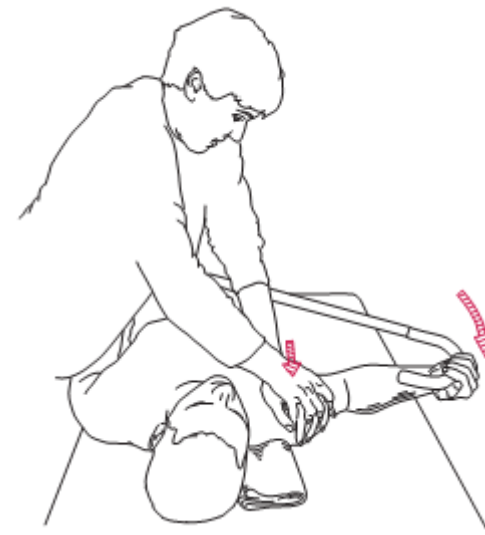
# Self-Mobilization (Auto-Mobilization)

- Self-mobilization refers to self-stretching techniques that specifically use **joint traction or glides** that direct the stretch force to the joint capsule.



# Mobilization with Movement

- Mobilization with movement (MWM) is the concurrent application of sustained **accessory mobilization applied by a therapist** and an active **physiological movement to end-range applied by the patient**.
- Passive end-of-range overpressure, or stretching, is then delivered without **pain as a barrier**.
- The techniques are always applied in a **pain-free direction**



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# Physiological Movements

- Physiological movements are movements the **patient can do voluntarily** (e.g., the classic or traditional movements, such as flexion, abduction, and rotation).
- The term ***osteokinematics*** is used when these motions of the bones are described

# Accessory Movements

- Accessory movements are movements in the joint and surrounding tissues that are necessary for normal ROM but that **cannot be actively performed by the patient.**
- Terms that relate to accessory movements are *component motions* and *joint play*.



# *component motions*

- These are motions that accompany active motion but are not under voluntary control. The term is often used **synonymously with accessory movement**
- example, motions such as upward rotation of the scapula and rotation of the clavicle, which occur with shoulder flexion, and rotation of the fibula, which occurs with ankle motions, are component motions

# *Joint play*

- Joint play describes the motions that occur **between the joint surfaces** and also the **distensibility or “give”** in the joint capsule, which allows the bones to move. The movements are **necessary for normal joint functioning** through the ROM and can be **demonstrated passively**, but they cannot be performed actively by the patient.
- The movements include **distraction, sliding, compression rolling, and spinning of the joint surfaces**.
- The term *arthrokinematics* is used when these motions of the bone surfaces within the joint are described.

# Manipulation Under Anesthesia

- Manipulation under anesthesia is a procedure used to restore **full ROM by breaking adhesions** around a joint while the patient is anesthetized.
- The technique may be a **rapid thrust or a passive stretch** using physiological or accessory movements

# Muscle Energy

- Muscle energy techniques **use active contraction of deep muscles** that **attach near the joint** and whose line of pull can cause the desired accessory motion.
- The technique requires the therapist to provide stabilization to the segment on which the distal aspect of the muscle attaches.
- A command for an isometric contraction of the muscle is given that causes accessory movement of the joint

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**Best of luck**

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**ENOUGH FOR TODAY  
THANK YOU CLASS  
ANY QUESTION????**