Effectiveness Of Bowen Therapy on Pain Relief and Functional Improvement in Patients with Tennis Elbow: A Randomized Controlled Trial

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INTRODUCTION

Tennis Elbow (TE)

• The most prevalent work-related musculoskeletal disorder at the elbow
• In PWH Occupational Therapy Department, there are more than 250 new TE cases every year during 2014-2016. Most of them are treated with TE band and resting splint.

Bowen Therapy

• A non-invasive, dynamic fascial release modality developed by an Australian Thomas Bowen (1916-1982) in 1950s.
• Gentle cross-fibre moves are applied in precise sequences to specific muscles, tendons and ligaments to improve blood flow, lymph and energy.
• It can lessen pain and tension and subsequently alleviate emotional and psychological stress associated with the pain. It is becoming more popular in managing wide range of pain complaints.
OBJECTIVE

To investigate the effectiveness of incorporating Bowen Therapy in treating TE as an alternative modality, in terms of its efficacy in pain relief, increase in grip strength and functional improvement.
**METHODOLOGY**

*Inclusion criteria:*
- Onset duration: 6 weeks to 6 months
- Cumulative cause
- Able to comply with treatment provided. For Bowen Therapy group, they need to attend weekly treatment in the first 6 weeks
- Able to attend follow up assessment

*Exclusion criteria:*
- Currently on alternative treatment
- Traumatic cause
- Has other type(s) of cumulative traumatic disorder e.g. cubital tunnel syndrome, carpal tunnel syndrome

*Outcome measures:*
1. Chinese version of Patient-rated Forearm Evaluation Questionnaire (PRFEQ)
2. Maximal grip strength at elbow flexed and extended position
3. Compliance to TE band (in hours/day)

Assessment was conducted at baseline, weeks 6 and 12.
RESULTS

- 10 patients were randomized into Bowen Therapy and control groups. (5:5)

- Both groups showed similar progress at weeks 6 and 12 in terms of pain intensity, ADL function and grip strength with no significant statistical difference found between two groups.

- However, patients reported Bowen Therapy reduced resting and exertion pain with 42% decrease of median PRFEQ pain score from 31/50 to 18/50.

- Bowen Therapy also improved functional performance with 38% decrease in PRFEQ function score from 40/100 to 25/100. As pain reduced, patient reported improved function in wide range of daily tasks e.g. wringing towel, turning door knob, mopping floor, sorting files and lifting or carrying objects.


DISCUSSION

This report aims to inspire further studies on fascial intervention with supporting literature pointing out it can reduce pain, improve blood circulation and facilitate tissue healing for tendinopathy. It does not only heal the pain sensitive tissue but also the nearby tissues because of fascial continuity. Bowen Therapy is a gentle fascial intervention that is now commonly applied to relieve pain.

Moreover, Bowen Therapy helps resolving the active myofascial trigger points which cause pain symptoms on the affected extremity of TE, and the latent trigger points on the unaffected side so as to prevent development of bilateral TE.

Despite lack of significant statistical difference, patient perceived functional improvement by Bowen Therapy. Based on this RCT and the underlying mechanisms, further structured studies are suggested to prove the efficacy of Bowen Therapy.