Low back pain: A case report.

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Functional Fascial Taping®
fft.net.au

Background

Functional Fascial Taping® (FFT®) is a simple drug free method of pain management. FFT can immediately decrease pain and increase range of motion, creating a pain free environment for rehabilitation.

FFT® is applied in a functional range, the direction and tension/load of the tape is determined by systematically assessing symptomatic responses[1]. The procedure is customised for each patient/athlete for an extended and predetermined period.

Case study

This study examined the effectiveness of FFT® in a young female with chronic low back pain for 14 years. She had a decompression and discectomy (L4 and L5) for back and leg pain. Despite this, she had persistent pain and restricted range of trunk flexion (15°). Other treatments had not improved her symptoms.

Treatment

FFT® was applied to determine the optimal position of functional release [2]. The first treatment resulted in an immediate decrease in pain and an increase in range of movement (ROM) to 35°.

The patient was given graduated flexion exercises to perform regularly at home. She received five FFT® treatments to modify the tape as needed. Clinical Pilates was commenced at three weeks.

Figure 1. FFT applied for this patient.

Results

Symptoms resolved and range of movement improved in the first week.

Patient was discharged pain free at six weeks with full flexion ROM.

At six month and three year follow up the patient remained pain free and was able to exercise and maintain muscle strength in the lumbar area.

She had returned to work and had managed a full term, pain free pregnancy in the lumbar region.

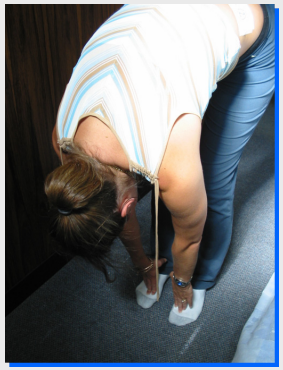

Figure 2. Photo taken 1 week after treatment commenced.

FFT® is an effective treatment for LBP

This case study demonstrates that FFT® is effective in chronic LBP with significant pathology. The long duration of symptoms prior to treatment and the significant pathology did not affect the outcome.

FFT® for other conditions

FFT® has been used effectively in many other conditions to reduce pain and increase ROM, by proprioceptively encouraging muscle firing whilst offering sustained load. This procedure normalizes movement patterns which allows for pain controlled rehabilitation.

References

[1]Alexander R. 1999. Proceedings, International Olympic Committee World Congress, Sydney Australia.

[2]Alexander R. 1996. Proceedings, Soft Tissue Injury Forum Melbourne University.

Acknowledgments

Dr Jill Cook PhD Physiotherapist. Associate Professor in Musculoskeletal Health Deakin University.

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