

Efficacy of Neural Mobilisation in Sciatica

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Abstract

The study was conducted on 30 patients, between age group of 40-65 years who were diagnosed cases of radiating low back pain. Subjects were randomly allocated to either group A or B. The patients of group A (n = 15) were treated with neural mobilization along with conventional treatment whereas group B (n = 15) was administered only conventional treatment. ROM and pain were assessed using goniometer and Visual Analog Scale (VAS). Neural mobilization along with conventional treatment was found to be more effective in relieving low back pain (t = 7.643) as well as improving the range of SLR (t = 5.848) than conventional treatment alone.

Key Words: Neural Mobilization, Low Back Pain, ROM, VAS

Introduction

Sciatica is a symptom not a diagnosis. It is a non-specific term commonly used to describe symptoms of pain radiating downward from the buttock over the posterior or lateral side of the lower limb. It is usually assumed to be caused by compression of nerve. Due to the dynamics of the human spine, lumbar disc syndrome and accompanying complaints of sciatica are long standing afflictions of our species (*Ionnis Karampelas et al, 2004*). It was not until 1943, with land mark publication of *Mixer and Barr* that the herniated lumbar disc was shown to be a major cause of sciatica (*Ionnis Karampelas et al 2004*). At some time, up to 40 percent of people experience sciatic pain, which occurs, when sciatic nerve is trapped or inflamed (*Harvey Simon, 2003*). Prevalence of sciatic symptoms did not differ between males and females (*Kelsey & Ostfeld, 1975*). It was 5.1% for men and 3.7% for women aged 30 years or over (*Heliövaara et al., 1987* and *AHCPR, 1994*). It is occupation related also (*Magora, 1973, Videman Battie, 1999*). Traditional exercise therapy program for sciatica

primarily focuses on pain relief. *Butler (1991)* recommends that neural mobilization be viewed as another form of manual therapy similar to joint mobilization. In order to pay heed to it manual methods should be used in order to restore the mechanical function of impaired neural tissue (intra-and extra neural impairment) in the lumbar-pelvic-lower limb complex. The focus of this study is to see the effectiveness of neural mobilization on individuals with sciatica and to judge its superiority over the conventional treatment.

Materials and Methods

Once the subjects registered themselves in the Out Patient Department with the complaint of radiating low back pain, they were assessed according to format given by *Andersson & Deyo (1996)*. Differential diagnosis with other back conditions mimicking sciatica was established. If the subjects were found to have sciatica, all inclusion and exclusion criteria were checked. The subjects were included in the study if all the inclusion criteria were met and no exclusion criteria were found. 30 subjects were selected between the age group 40 to 65 years, of