

Efficacy of training lumbosacral stability for patellofemoral pain syndrome

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Is exercise therapy of the lumbosacral stability more effective than exercise therapy of the m. quadriceps?

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Tendon, ligament and cartilage disorders
Study type	Interventional

Summary

ID

NL-OMON32101

Source

ToetsingOnline

Brief title

Efficacy of training lumbosacral stability for patellofemoral pain syndrome

Condition

- Tendon, ligament and cartilage disorders

Synonym

Anterior knee pain. frictionsyndrome

Research involving

Human

Sponsors and support

Primary sponsor: Canisius Wilhelmina Ziekenhuis

Source(s) of monetary or material Support: Ministerie van OC&W

Intervention

Keyword: anterior knee pain, core-stability, exercise therapy, patellofemoral pain syndrome

Outcome measures

Primary outcome

VISA-score (questionnaire), dynamic and static quadricepspower and lumbosacral stability.

Secondary outcome

Not applicable.

Study description

Background summary

The patellofemoral pain syndrome is an entity with a spectrum of patellofemoral joint disorders. One of these disorders is the medial traction syndrome, where the medial retinaculum and/or medial edge of the patella is painful. The cause of this pain is traction on the medial retinaculum with inadequate activity of the patellofemoral joint. Good posture and stability of the femur are essential for stability and function of the patellofemoral joint. Stability of the femur primarily requires lumbosacral/core stability and is eventually stabilised by the m. quadriceps. Inadequate lumbosacral stability can give an unstable patellofemoral joint and therefore patellofemoral pain. Through training of the lumbosacral stability the patellofemoral joint will have more stability. Improvement of lumbosacral stability will reduce pain and improve function of the patellofemoral joint

Study objective

Is exercise therapy of the lumbosacral stability more effective than exercise therapy of the m. quadriceps?

Study design

Randomised prospective trial. Patients recruited within sports and orthopaedic medical practice, diagnosed patellofemoral pain syndrome, will be treated in one of two groups.

One group will receive exercise therapy focused on lumbosacral stability. The other group will receive exercise therapy focused on the m. quadriceps. Both groups will receive exercise therapy during 8 weeks, 2 times a week.

Intervention

both groups will be receiving exercise therapy during 8 weeks. One group will train de m. quadriceps, the other group will train the lumbosacral stability.

Study burden and risks

the patient will receive exercise therapy during 8 weeks. This burden will be the same as standard treatment. The only risk is that training of the lumbosacral stability is an unproven treatment. But it will do no harm for this condition.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

anterior knee pain
pressure pain medial retinaculum

Exclusion criteria

cartillair damage
bursitis
instability ankle or foot

Study design

Design

Study type: Interventional

Masking: Single blinded (masking used)

Control: Uncontrolled

Primary purpose: Treatment

Recruitment

NL
Recruitment status: Recruitment stopped

Start date (anticipated): 26-11-2007

Enrollment: 30

Type: Anticipated

Ethics review

Approved WMO

Application type: First submission

Review commission: CMO regio Arnhem-Nijmegen (Nijmegen)

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
CCMO	NL20653.091.07