

Assess the effectiveness of McConnell tape for the treatment of SIJ dysfunction.

USE OF McCONNELL TAPING FOR SI JOINT DYSFUNCTION

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Introduction: Sacroiliac joint (SIJ) dysfunction is a common and frustrating condition that often leaves patients disabled. Most treatment has been directed towards the low back, intervertebral discs, or Piriformis syndrome. The purpose of this study was to examine the effectiveness of McConnell tape for the treatment of SIJ dysfunction.

Methodology: 5 acute low back pain patients were utilized in this study. All subjects were evaluated by a physician, underwent lumbar and pelvic radiographs, and a back evaluation assessing VAS scores, ROM, strength, posture, lumbar-peMc-sacral joint mobility, and functional level. Subjects were x-rayed, taped in neutral using the McConnell tape, and x-rayed immediately post-taping. Subjects wore the tape 5 days. After 5 days and were x-rayed pre and post tape removal. Changes in VAS scores, functional level, an1 Iliac crest-sacral ala height (ISA), obturator height (OB), and synphysis pubis height (SP) changes (pre and post taping) were recorded from Day 1 to Day 5.

Results: Analysis of the data revealed all subjects reported decreased VAS scores and improved functional levels. Radiograph results revealed 50-60% of subjects demonstrated ISA, OB, and SP alignment changes from Day 1 pre-post taping; no significant changes in alignment from Day 1-5; 60% demonstrated OB changes from Day 5 pre-post taping; and 60% demonstrated changes in ISA, OB, and SP height from Day 1 pre-tape to Day 5 post-tape alignment.

Discussion: The results indicate that use of McConnell taping for acute SIJ dysfunction may be an effective clinical treatment approach. While the continuous 5 day taping did not appear to have any significant anatomical effect, subjects reported reduced pain and improvements in function. Subjects also reported increased pain and decreased function after the tape was removed. Interestingly, both the clinician applying the tape and subjects noted that the direction or pull of tape application could affect the results.

Future Studies should investigate the length of tape effectiveness, effect of directional pull, corsetting vs. taping, taping with/without an exercise regime, and a 1 month follow-up post tape removal.