Introduction

Rotator cu injuries are prevalent among both athletes and non-athletes, o en leading to pain, reduced range of motion, and functional impairment. E ective rehabilitation strategies are crucial for restoring shoulder function and alleviating symptoms. Scapular mobilization has emerged as a signi cant component of rehabilitative care, with promising evidence supporting its role in improving outcomes for individuals with rotator cu injuries. is article explores the mechanisms, bene ts, and practical applications of scapular mobilization in the context of rotator cu rehabilitation [1].

Rotator cu injuries, encompassing tendinitis, partial tears and full-thickness tears, present signi cant challenges in orthopedic and sports medicine. e rotator cu , comprising four muscles supraspinatus, infraspinatus, teres minor and subscapularis plays a critical role in shoulder stability and movement. Disruptions to this complex structure can lead to pain, weakness, and impaired function. Rehabilitation strategies o en focus on restoring strength, exibility, and functional control. Among these strategies, scapular mobilization has gained attention for its potential to enhance rehabilitation outcomes.

Description

Scapular mobilization: an overview

Scapular mobilization refers to a series of therapeutic techniques aimed at improving the movement and alignment of the scapula (shoulder blade). e scapula's proper movement is essential for optimal rotator cu function and overall shoulder health [2]. Dysfunctional scapular mechanics can contribute to impingement, altered kinematics, and increased stress on the rotator cu muscles. Scapular mobilization techniques typically include manual therapy, exercises to enhance scapular stability, and interventions to improve coordination and control of scapular motion.

Mechanisms and bene ts

- 1. Improved scapular kinematics: Scapular mobilization
- 3. **Reduction in pain and disability:** Clinical studies have demonstrated that scapular mobilization can lead to signi cant reductions in shoulder pain and disability. By addressing underlying scapular dysfunctions, patients o en experience improved symptoms and greater overall shoulder function.

Acknowledgement

None

Con ict of Interest

None

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