

شبكة المعلومات الجامعية







شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم



شبكة المعلومات الجامعية

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التوثيق الالكتروني والميكروفيلم

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# DYNAMIC LUMBAR STABILIZATION PROGRAM VERSUS CONVENTIONAL REHABILITATION PROGRAM AFTER DISCECTOMY

#### **A THESIS**

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Dynamic lumbar stabilization program versus conventional rehabilitation program after discectomy, Sara Ahmed Amin Abd Elrahman\*. Supervisors: Prof. Dr. Ahmed Hassan Hussien \*\*, Prof. Dr. Nadia Abd El-Azim Fayaz\*\*, Prof. Dr. Mohammed Omar Soliman \*\*\*, and Dr. Lilian Albert Zaky \*\*. M.Sc thesis; Physical Therapy for Musculoskeletal Disorders and its surgeries, 2011.

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#### **Abstract**

The purpose of this study was to compare between the effect of dynamic lumbar stabilization program and the effect of a conventional rehabilitation program on the sagittal segmental lumbar motion and the functional disability in patients with lumbar discectomy. Thirty male patients with L4-L5 open discectomy participated in this study in two groups; group (A) and group (B) with mean age of 32.40 (± 5.70) years, mean weight of 67.93 ( $\pm 8.31$ ) Kg, mean height of 170.93 ( $\pm$  6.36) cm, the patients were referred from the Neurosurgery and the Orthopedic surgery departments, at Kasr El ainy hospital, faculty of Medicine, Cairo University, they were assessed twice at the 4th week from the surgery (before starting the rehabilitation the 8<sup>th</sup> week from the surgery (after finishing the programs) and rehabilitation programs), group (A) received dynamic lumbar stabilization program for 12 sessions while group (B) received a conventional rehabilitation program for 12 sessions. Spinal Mouse device was used in this study to measure the sagittal segmental motion of the lumbar spine at level L4-L5 segment and Modified Oswestry Low Back Pain Disability Scale

(OSW) was also used in this study to measure the functional disability of these patients. The results of this study revealed that: at the 4<sup>th</sup> week from the surgery there was no significant difference in the sagittal segmental lumbar motion and the functional disability between group (A) and group (B), a significant difference in the sagittal segmental lumbar motion and the functional disability between before and after receiving dynamic lumbar stabilization program at group (A), a significant difference in the sagittal segmental lumbar motion and the functional disability between before and after receiving the conventional rehabilitation program at group (B), at the 8<sup>th</sup> week from the surgery there was a significant difference in the sagittal segmental lumbar motion and the functional disability between group (A) and group (B). These results showed that the sagittal segmental lumbar motion at L4-L5 segment improved and the functional disability reduced after receiving dynamic lumbar stabilization program and after receiving the conventional rehabilitation program at the 8<sup>th</sup> week from the surgery, but the results after dynamic lumbar stabilization program were greater than after the conventional rehabilitation program.

**Key Words:** Discectomy, segmental lumbar motion, functional disability, Spinal Mouse, Modified Oswestry Scale.

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#### **List of Abbreviations**

Abbreviations	Meaning	
CT	Computed Tomography	
EMG	Electromyography	
MRI	Magnetic Resonance Imaging	
3D	Three-Dimensional Analysis Device	
ROM	Range Of Motion	
LBP	Low Back Pain	
LDH	Lumbar Disc Herniation	
NSAIDS	Nonsteroidal Antiinflammatory Drugs	
OSW	Oswestry Low Back Pain Disability Scale	
Min	Minute	
Sec	Second	
Kg	Kilogram	
M	Meter	
mm	Millimeter	
cm	Centimeter	
Hz	Hertz	
MHz	Megahertz	
L3	Third Lumbar Vertebra	
L4	Forth Lumbar Vertebra	
L5	Fifth Lumbar Vertebra	
C7	Seventh Cervical Vertebra	
S2	Second Sacral Vertebra	

S3	Third Sacral Vertebra	
T1	First Thoracic Vertebra	
Т6	Sixth Thoracic Vertebra	
T12	Twelfth Thoracic Vertebra	
SD	Standard Deviation	

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