

PELAKSANAAN FISIOTERAPI PADA KONDISI *FROZEN SHOULDER (ADHESIVE CAPSULITIS)* DENGAN MODALITAS *ULTRASOUND, TOWEL STRECH* DAN *FINGER WALK*

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Abstrak

Latar belakang: *Frozen Shoulder* melibatkan peradangan, nyeri, *adhesive*, *atrofi*, dan pemendekan kapsul sendi, yang menyebabkan gerakan terbatas. Kapsul sendi *Glenohumeral* pada *Frozen Shoulder* tampak tebal dan padat secara *mikroskopis*, terutama di sekitar *interval rotator* dan kapsul *anterior inferior*, karena penebalan *coracohumeral ligament* dan *glenohumeral*. Penebalan ini membatasi gerakan bahu dalam *fleksi*, *abduksi*, dan *rotasi*. **Tujuan:** untuk mengetahui pelaksanaan fisioterapi pada kondisi *Frozen Shoulder* dengan pemberian *Ultrasound, Towel Stretch* dan *Finger Walk* dalam mengurangi nyeri, meningkatkan lingkup gerak sendi *shoulder*, serta meningkatkan MMT *shoulder*. **Metode:** penelitian ini menggunakan metode studi kasus dengan satu sampel pasien *frozen shoulder (adhesive capsulitis)*. Treatment dilakukan sebanyak 4 kali dalam waktu 3 minggu. Alat ukur yang digunakan adalah NPRS, Goniometer dan MMT. **Hasil:** hasil dari evaluasi yang didapatkan setelah diberikan intervensi *Ultrasound, Towel Stretch* dan *Finger Walk* berdasarkan hasil evaluasi setelah 4 kali terapi terdapat penurunan nyeri dan spasme namun untuk kekuatan otot dan lingkup gerak sendi tidak terdapat perubahan. **Kesimpulan:** untuk mencapai tujuan yang diinginkan diperlukan konsistensi dalam pemberian intervensi dan melakukan *home program*.

Kata Kunci: Fisioterapi, *Frozen Shoulder Adhesive Capsulitis, Ultrasound, Towel Stretch, Finger Walk*

**IMPLEMENTATION OF PHYSIOTHERAPY IN
FROZEN SHOULDER CONDITIONS (ADHESIVE CAPSULITIS) USING
ULTRASOUND, TOWEL STRECH AND FINGER WALK MODALITY**

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Abstract

Background: Frozen Shoulder involves inflammation, pain, adhesiveness, atrophy, and shortening of the joint capsule, which causes limited movement. The Glenohumeral joint capsule of Frozen Shoulder appears thick and dense microscopically, especially around the rotator interval and anterior inferior capsule, due to coracohumeral ligament and glenohumeral thickening. This thickening limits shoulder movement in flexion, abduction, and rotation. **Objective:** to determine the implementation of physiotherapy in Frozen Shoulder conditions by providing Ultrasound, Towel Stretch and Finger Walk in reducing pain, increasing the range of motion of the shoulder joint, and increasing shoulder MMT. **Method:** This research uses a case study method with one sample of frozen shoulder (adhesive capelusitis) patients. Treatment was carried out 4 times within 3 weeks. The measuring instruments used are NPRS, Goniometer and MMT. **Results:** The results of the evaluation obtained after being given Ultrasound, Towel Stretch and Finger Walk interventions based on the evaluation results after 4 treatments showed a decrease in pain and spasm, but there was no change in muscle strength and joint range of motion. **Conclusion:** to achieve the desired goals, consistency is needed in providing interventions and carrying out home programs.

Keywords: Physiotherapy, Frozen Shoulder Adhesive Capsulitis, Ultrasound, Towel Stretch, Finger Walk