The Effect of Medical Therapeutic Yoga on Adhesive Capsulitis: A Case Report
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Introduction
- The number of Americans who practice yoga jumped to 16.5 million between 2004 and 2008 (87% increase), making it a top 10 modality in alternative medicine according to the National Institutes of Health.1
- Medical Therapeutic Yoga: the practice of yoga in medicine, rehabilitation, and wellness settings by a licensed health care professional credentialed by the Professional Yoga Therapy Institute.2
- Indications for Medical Therapeutic Yoga:
  - Heart disease
  - Diabetes mellitus
  - Chronic pain
  - Depression and anxiety
  - Fibromyalgia
  - COPD and other respiratory diagnoses
  - Woman’s health issues.2

Background & Purpose
- Shoulder pain has been found to be the third most common site of musculoskeletal pain in the community.3
- Adhesive capsulitis (AC) is a particularly disabling condition whose incidence is estimated to be between 2% and 5% of the general population and up to 38% in those with systemic diseases such as diabetes, Parkinson’s disease and thyroid disease.3,4

Case Description
- The patient was a 51-year-old female who presented to physical therapy following a referral from her primary care physician with a primary diagnosis of left shoulder AC.

Timeline
- March 2009
  - Patient diagnosed with thyroid cancer
  - Tumor excised surgically
- June 2015
  - Patient presented to orthopedic doctor; received diagnosis of adhesive capsulitis
  - Received cortisone injection & PT referral
- May 2018
  - Initial evaluation completed
  - PT diagnosis: pain, impaired strength
  - NPRS (w/ activity) 40 degrees w/ pain & 98 degrees w/ pain
- July 2018
  - NPRS: 5/10 at rest & 6/10 w/ activity
  - Shoulder flexion/abduction ROM: 140 degrees w/ pain & 150 degrees w/o pain
- August 2018
  - Re-evaluation outpatient
  - NPRS: 3/10 at rest & 5/10 w/ activity
  - Shoulder flexion/abduction ROM: 170 degrees & 150 degrees

Interventions
- Medical Therapeutic Yoga
- Manual Therapy
- Therapeutic Exercise

Tests and Measures
- NPRS: 7/10 at rest & 8/10 w/ activity

Discussion
- Previous research fails to provide strong evidence to support the use of joint mobilization, stretching exercises, modalities and patient education; all of which are among the most common physical therapy interventions for AC.6
- The patient exceeded the minimally clinically important difference on the NPRS and Quick DASH indicating improvements in pain during upper extremity tasks.7,8
- Outcomes suggest that the use of medical therapeutic yoga techniques may be useful to decrease pain and limitation in the treatment of upper extremity pathology.
- Further research is required to determine the efficacy of medical therapeutic yoga compared to traditional therapies and other medical management.

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References