

EFEK PENAMBAHAN APLIKASI *ELASTIC TAPING* PADA TERAPI REHABILITASI KONVENSIONAL TERHADAP PERBAIKAN SUBLUKSASI BAHU PASIEN STROK FASE SUBAKUT

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Abstrak

Objektif: Strok menyebabkan GHS. Gangguan anggota gerak dialami 85% pasien strok, dengan insidensi GHS 17-81% pada populasi pasien strok akut dan kronis. Kelemahan otot bahu menyebabkan subluksasi bahu dan peradangan tendon. Subluksasi bahu bisa menghambat fungsi motorik dan pemulihan fungsional anggota gerak atas. Mencegah GHS melalui latihan rentang gerak bahu dan posisi *alignment* bahu yang benar serta penggunaan *elastic taping* akan meningkatkan fungsi motorik dan meningkatkan penyembuhan jaringan.

Metode: Subjek penelitian yang memenuhi kriteria inklusi direkrut dari pasien-pasien poliklinik Rehabilitasi Medik RSUD Dr. Soetomo. Total subjek penelitian adalah 20 orang (10 kelompok perlakuan dan 10 kontrol). Kedua kelompok mendapatkan terapi rehabilitasi konvensional 60 menit sehari, 3 kali seminggu, selama 3 minggu. Kelompok perlakuan ditambah pemberian *taping* selama 3 minggu dengan pergantian *taping* setiap 3 hari sekali. Parameter evaluasi dilakukan dua kali, yaitu pada awal dan akhir penelitian, dengan mengukur jarak *acromion* dan *head of humerus* pada foto X-ray bahu sisi paresis.

Hasil: uji statistik menunjukkan terdapat perbedaan bermakna dalam jarak antara *acromion* dan *head of humerus* dengan foto X-ray bahu pada kelompok perlakuan (nilai $p = 0,002$) dan tidak terdapat perbedaan bermakna pada kelompok kontrol (nilai $p = 0,07$), serta tidak terdapat perbedaan bermakna dalam perbandingan selisih pengurangan jarak antara *acromion* dan *head of humerus* antara kelompok perlakuan dan kontrol (nilai $p = 1,00$) sebelum dan sesudah terapi selama 3 minggu.

Kesimpulan: Terdapat perbaikan subluksasi bahu yang dinilai dengan pengurangan jarak antara akromion dan humerus (JAH) dari foto X-ray bahu pada kelompok perlakuan (terapi rehabilitasi konvensional dan pemasangan *elastic taping* pada bahu) dan tidak terdapat perbaikan subluksasi bahu pada kelompok kontrol (terapi rehabilitasi konvensional saja) sebelum dan sesudah terapi selama 3 minggu; kelompok perlakuan dan kontrol memberikan hasil yang sama terhadap perbaikan subluksasi bahu sebelum dan sesudah terapi selama 3 minggu.

Kata Kunci: *Glenohumeral subluxation* (GHS), *elastic taping*, terapi rehabilitasi konvensional.

EFFECT OF ADDITIONAL ON OF ELASTIC TAPING APPLICATION IN CONVENTIONAL REHABILITATION THERAPY ON IMPROVEMENT OF SHOULDER SUBLUXATION FOR SUBACUTE PHASE STROKE PATIENTS

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Abstract

Objective: Stroke may cause GHS. Limb disorders were experienced by 85% of stroke patients, with incidence of GHS 17-81% in acute and chronic stroke patients population. Weakness of the shoulder muscles causes shoulder subluxation and tendon inflammation. Shoulder subluxation can inhibit motor function and functional recovery of the upper limbs. Preventing GHS by exercising shoulder range of motion and correct shoulder alignment position and the use of elastic taping will improve motor function and increase tissue healing.

Methods: Research subjects who met the inclusion criteria were recruited from Medical Rehabilitation Clinic in RSUD Dr, Soetomo. The total research subjects were 20 people (10 in treatment group and 10 in control group). Both groups received conventional rehabilitation therapy 60 minutes a day, 3 times a week, for 3 weeks. The treatment group received additional taping application for 3 weeks with tape changed every 3 days. The evaluations of parameters were carried out at the beginning and the end of the study, by measuring the distance of the acromion and head of humerus on the X-ray photograph of the shoulder of the paresis.

Results: Statistical tests showed significant differences in the distance between acromion and head of humerus with shoulder X-ray images in the treatment group (p value = 0.002) and there were no significant differences in the control group (p value = 0.07), and did not there was a significant difference in the difference between the reduction in the distance between acromion and head of humerus between the treatment and control groups (p = 1.00) before and after therapy for 3 weeks.

Conclusion: There was an improvement in shoulder subluxation which was assessed by a reduction in accromion humeral distance (AHD) from shoulder X-ray photographs in the treatment group (conventional rehabilitation therapy and installation of elastic taping on the shoulder) and there was no improvement in shoulder subluxation in the control group (conventional rehabilitation therapy only) before and after therapy for 3 weeks; the treatment and control groups gave the same results to the improvement of shoulder subluxation before and after therapy for 3 weeks.

Keywords: Glenohumeral subluxation (GHS), elastic taping, conventional rehabilitation therapy.