

No evidence of benefits from stretch for the treatment and prevention of contractures

Clinical Question	How effective is stretch in the treatment and prevention of contractures in people with, or at risk of developing contractures?
Bottom Line	There was high-quality evidence that stretch did not have clinically important effects on joint mobility in people with or without neurological conditions if performed for less than seven months. The effects of stretch performed for periods longer than seven months was not investigated. There was moderate- and high-quality evidence that stretch did not have clinically important short-term effects on quality of life or pain, respectively, in people with non-neurological conditions. The short-term effects of stretch on quality of life and pain in people with neurological conditions, and the short-term effects of stretch on activity limitations and participation restrictions for people with and without neurological conditions were uncertain. Some of the conditions contained in this review included people with fracture, stroke, brain injury, arthritis or burns. The outcomes of interest were joint mobility, quality of life, pain, activity limitations, participation restrictions, spasticity and adverse events. The stretch was administered in a variety of different ways including through passive stretching (self-administered, therapist-administered and device-administered), positioning, splinting and serial casting.
Caveat	The stretch dosage was highly variable, ranging from five minutes to 24 hours per day (median 420 minutes) for between two days and seven months (median 35 days). The total cumulative time that stretch was administered ranged from 23 minutes to 1456 hours (median 168 hours).
Context	Contractures are a common complication of neurological and non- neurological conditions, and are characterised by a reduction in joint mobility. Stretch is widely used for the treatment and prevention of contractures.
Cochrane Systematic Review	Harvey LA et al. Stretch for the treatment and prevention of contractures. Cochrane Reviews, 2017, Issue 2. Art. No.: CD007455.DOI: 10.1002/14651858. CD007455.pub3. This review contains 49 studies involving 2,135 participants.