

MULLIGAN'S MOBILISATION WITH MOVEMENT (LAT)¹⁰⁷

This mobilisation is applied when the pain over the lateral elbow on gripping is worse than the pain produced by direct palpation over the lateral epicondyle. However, it is important the mobilisation technique is pain free itself. There are a number of variations of this treatment involving a belt or tape. You can also substitute gripping with wrist and hand extension if that action is more pain provocative.

Step 1

The patient lies supine on a treatment table with the affected arm relaxed by their side in forearm pronation. They are to hold a grip dynamometer.

Step 2

The practitioner stabilises the humerus just above the elbow joint. Ensure this grip does not cause pressure pain on the lateral epicondyle.

Step 3

The practitioner grasps the ulna just below the elbow joint with the other hand.

Step 4

The practitioner applies a lateral glide across the elbow joint with the non-stabilising hand and holds this position. This should not be painful.

Step 5

Test this position by asking the patient to perform a strong gripping action on the dynamometer. You can note the grip strength on the dynamometer to compare to future treatments.

If the initial grip is not painful move to step six. If it is painful alter the direction of the lateral glide by adding a slightly posterior force. If this is still painful you can try a slight anterior force or caudal force. If you cannot obtain a pain free grip then you cannot perform this mobilisation.

Step 6

Ask the patient to repeat the gripping action six to ten times while you maintain the pain-free glide (do not release the force during a grip) . If the gripping action becomes painful ask the patient to stop and end the mobilisation.

This mobilisation should only be performed if there is substantial pain relief during the treatment and no pain following the treatment.



Another version of Mulligan's mobilisation with movement involves a postero-anterior glide to the radial head using the thumbs.

