

# RESEARCH A randomised crossover trial investigating actual & perceived changes in peak knee extensor torque following Kinesio Tape® application

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## **Purpose and existing literature (KT = Kinesio tape)**

### Aktas and Baltaci (2011)

KT *does improve* peak knee extensor torque  $180^{\circ}/s (P = 0.031)$  $60^{\circ}/\text{s} \ (P = > 0.05)$ 

### Wong et al. (2012)

KT does not improve peak knee extensor torque (P = > 0.05) but does decrease time to reach (P = 0.03)

# Csapo and Alegre (2015)

Meta analysis Very small population effect (r = 0.05)

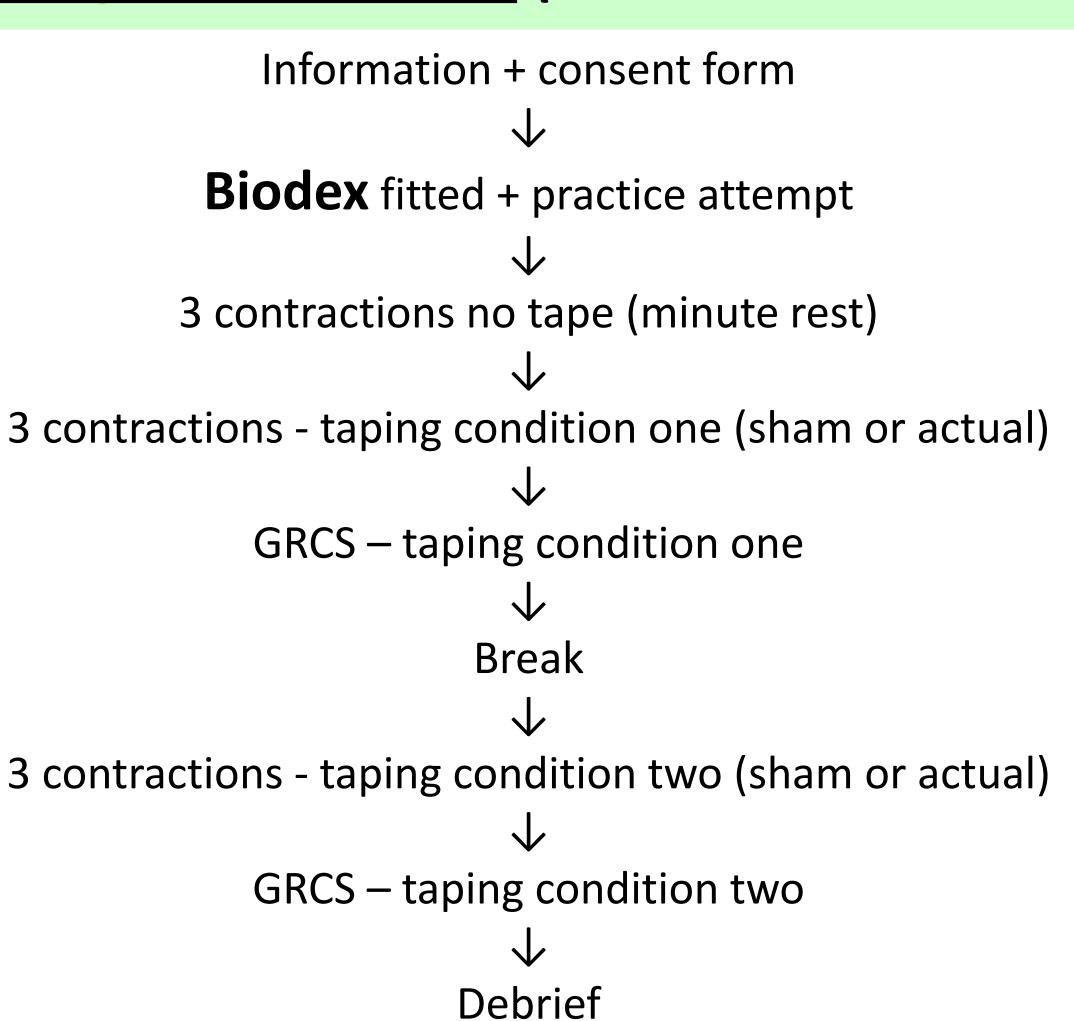
Placebo response has been specifically identified as an area that requires further investigation (Vercelli et al., 2013)

No studies comparing strength and perceived strength following KT application were found following multiple database searches

Is there a correlation between actual and perceived changes in peak knee extensor torque following Kinesio Tape® application?

- Primary aim
  - to determine whether there is a correlation between actual and perceived changes in peak knee extensor torque following kinesio taping ®
- Secondary aim
  - to determine the extent to which kinesio taping improves peak knee extensor torque

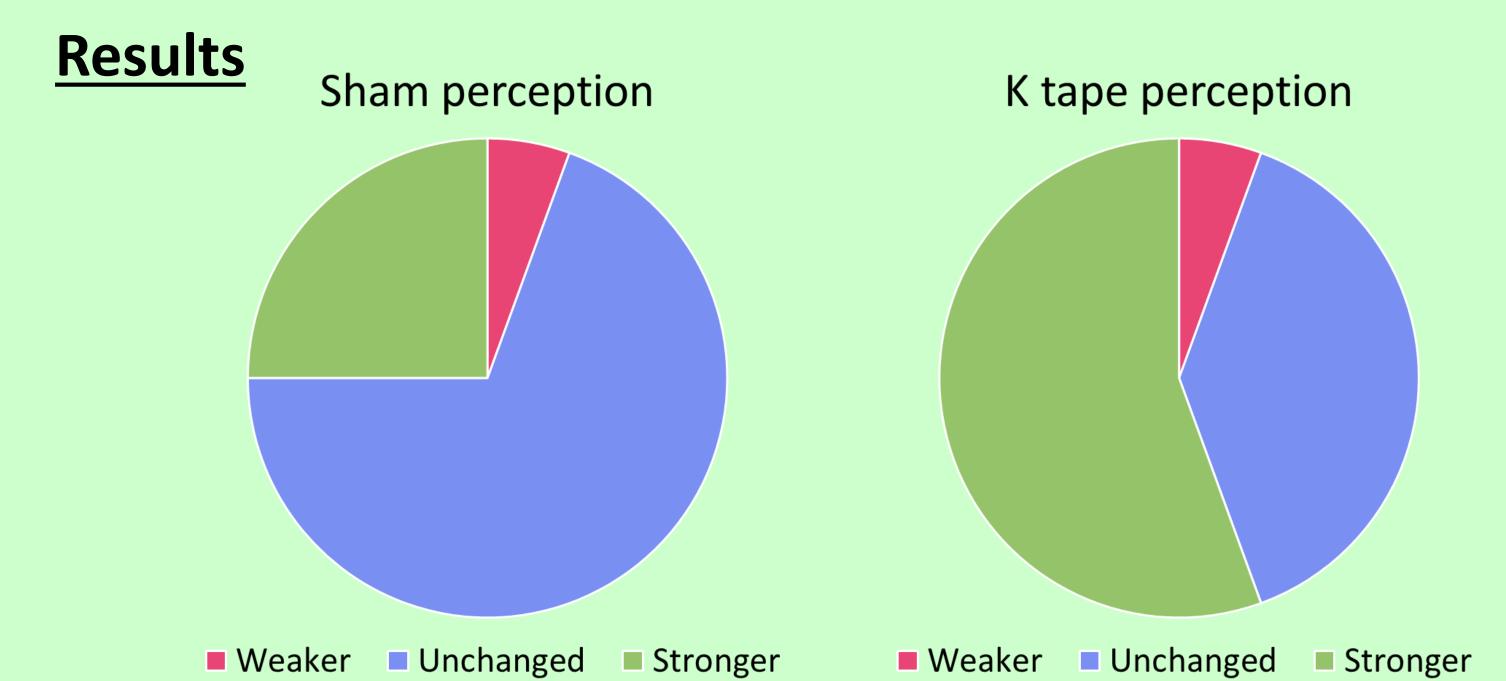
### **Design and methods (GRCS = Global Rating of Change Scale)**

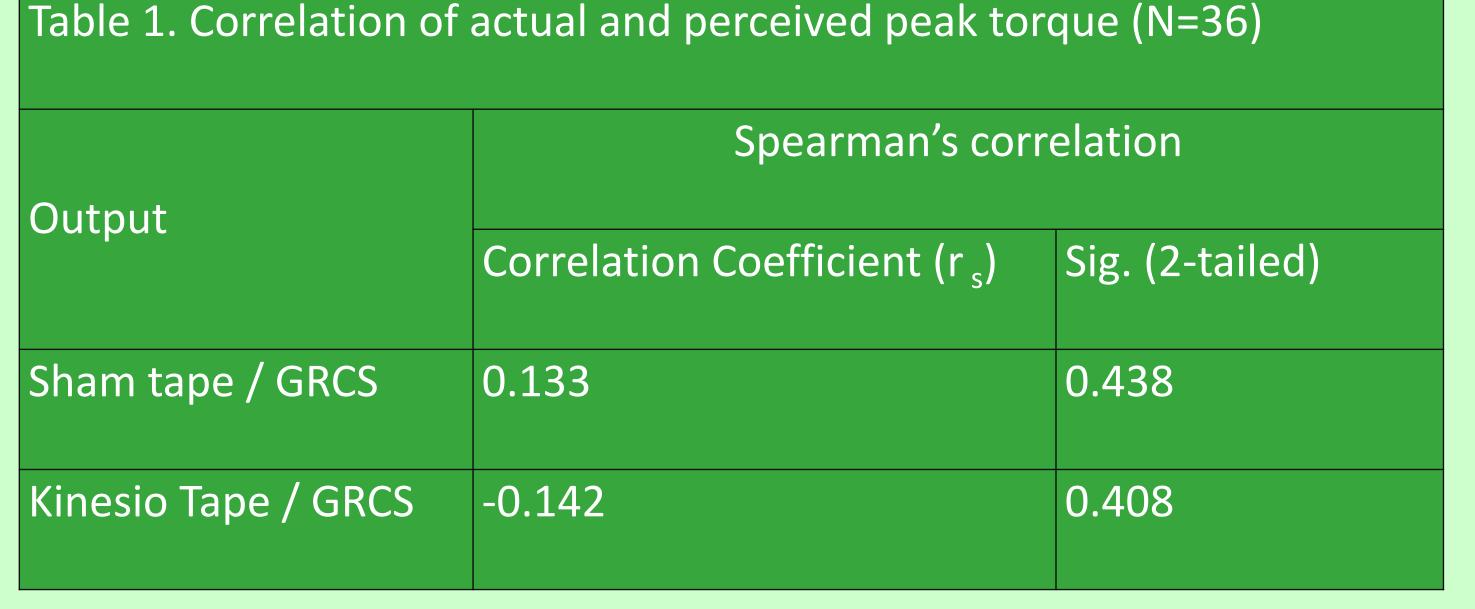




"With respect to trials performed **GRCS**: without tape, how would you describe your leg when the tape was applied?" Much Much Slightly Unchanged Weaker Stronger Stronger

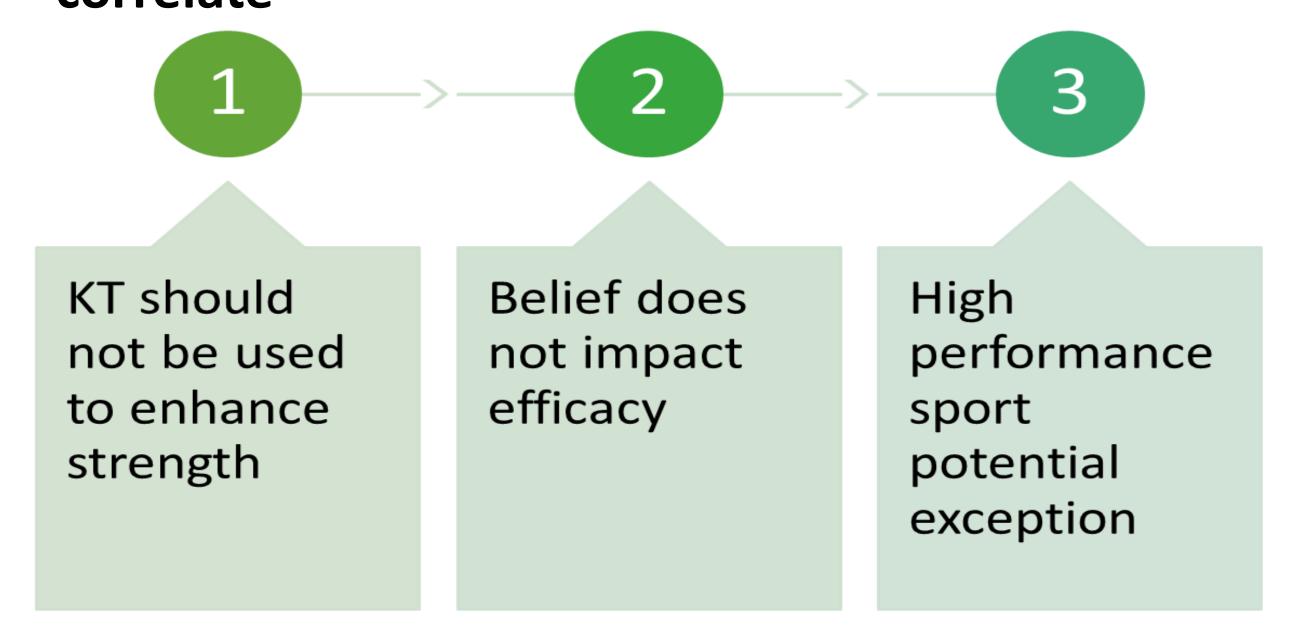
Inclusion Criteria	Exclusion Criteria
<ul> <li>Participate in at least an hour of sporting activity per week</li> <li>Aged 18-30</li> </ul>	<ul> <li>History of traumatic injury or surgery in the lower limb</li> <li>Sensory deficit of the lower limbs</li> <li>Current lower limb pain</li> <li>Allergy to tape/adhesive material</li> </ul>





### **Conclusions:**

- KT improves perceived knee extensor torque
- KT does not improve actual peak knee extensor torque
- Changes in perceived and actual torque do not correlate



## **Considerations and Implications**

Psychological benefits may play a greater role in affecting actual strength output when applying it to more functional movement within the context of real life competition.

Although it appears any such effect is small, the slimmest of margins can make a difference in elite, high performance sport.

It is also unclear whether changes in perception may benefit performance when combined with other treatments.

#### **References:**

Aktas, G. and Baltaci, G. (2011) 'Does kinesiotaping increase knee muscles strength and functional performance', Isokinetics and exercise science, 19(3) pp. 1-7.

Csapo, R. and Alegre, L. (2015) 'Effects of Kinesio(®) taping on skeletal muscle strength-A meta-analysis of current evidence',

Journal of Science and Medicine in Sport, 18(4) pp. 450-6. Vercelli, S., Sartorio, F., Foti, C., Colletto, L., Virton, D., Ronconi, G. and Ferriero, G. (2012) 'Immediate Effects of Kinesiotaping on

Quadriceps Muscle Strength: A Single-Blind, Placebo-Controlled Crossover Trial', Clinical Journal of Sports Medicine, 22 pp. 319-

326. Wong, O., Cheung, R., and Li, R. (2012) 'Isokinetic knee function in healthy subjects with and without Kinesio taping', Physical *Therapy in Sport,* 13(4) pp. 255-8