

Electrotherapy:	
<u>Effects</u>	
Relaxation of muscle spasm	<u>Eliminate Disuse Atrophy</u>
<u>Muscle strengthening</u>	<u>Muscle re-education</u>
Improve range of motion	Increase local circulation
<u>Facilitate wound healing</u>	<u>Facilitate Bone Repair</u>
Decrease Edema	<u>Decrease Pain</u>
Indications	
Muscle Spasms	Facial neuropathy
Muscle weakness	Muscle atrophy
• Pain	Open wound/ulcer
Decreased ROM	Bell's Palsy
Idiopathic scoliosis	 Use with labor and delivery
Fracture	Stress Incontinence
Joint Effusion	Shoulder subluxation
Contraindications:	
Cardiac Pacemaker	Malignancy
Patient with a bladder stimulator	Use over a pregnant uterus
Use over a carotid sinus	Cardiac arrhythmia
Seizure disorders	Osteomyelitis
Phlebitis	
Parameter Types:	
Monopolar Technique:	
Active electrode over target area (Smaller	r)
Dispersive electrode another remote site	(Larger)
 Used with wounds, iontophoresis, Edema 	
Bipolar Technique:	
Two active electrodes placed over target	area (Equal in size)
Used for muscle weakness, Neuromuscula	ar facilitation, spasms and ROM
Quadripolar Technique:	
 Two electrodes from two separate stimul 	ating circuits positioned so the currents
intersect	
Interferential current	Connect a
· · · · · · · · · · · · · · · · · · ·	
Electrode Size:	
Small Electrodes	Large Electrodes
Increased current density	Decreased current density
Increased Impedance (Resistance to flow Decreased current flow	Decreased Impedance Increased current flow
	Increased current now

lectrotherapy:	
reatment Parameters	
 <u>Direct Current: (DC)</u> Galvanic Current Constant flow of electrons without interruption Iontophoresis uses direct current 	+ 1.5 V 1.5 V time →
 <u>Alternating Current: (AC)</u> Polarity changes from positive to negative Can be symmetrical or asymmetrical Used in muscle retraining, spasticity, stimulation of denervated muscle <u>Interferential Current: (IFC)</u> Combines two high frequency AC wave forms Used for deep muscle stimulation (2-50pps – 100-200msec) Used for pain control 	High Frequency Ut appear U appear UT appear Time Time Unterferential Current Out Out Out Out Out Out Out Ou
Russian Current • Medium frequency AC wave forms - (50pps – 50-200msec) • Used for strengthening over healthy muscle tissue leading to increased contraction • Type of NMES and/or FES Neuromuscular Electrical Stim (NMES) • NMES and Functional Electric Stim (FES) are the same with computer assist - FES to promote function (i.e. Dorsiflexion assist, swallowing) - Used for maintaining strength	The Target Indications • Strengthen healthy tissue (athletes) Contraindications • Over abdominal and pelvis in pregnancy • Over hemorrhage • Malignancy • Over anterior cervical area • Over electronic implants Parameters: • 20-40pps – on 6-10sec OFF 50-60sec - Avoid fatigue (1:10) • Treatment Time: 15 – 20 min
Transcutaneous Electrical Nerve Stim (TENS) • Used for pain (Acute & Chronic) • Uses Gate Control Theory - (Melzak & Wall) • Uses endogenous Opiate Theory Indications • Pain: Post-op, labor, fractures, chronic, trigeminal, phantom • For antiemetic effects • Improved blood flow Iontophoresis • Administer meds transcutaneously	 <u>Contraindications</u> Pacemakers (Relative) Epilepsy 1st trimester of pregnancy Over uterus in pregnancy Over anterior trans-cervical area <u>Parameters:</u> Monophasic pulsatile current or biphasic pulsatile current Wave forms can be spiked, rectangular or sinewave Place over nerve roots or trigger points <u>Because AC, no net polarity</u> <u>Alkaline Reaction:</u> Sclerotic – Softens skin
 Uses DC Stim Use same polarity as drug to drive into skin (Opposites attract / Same repulse) 	Buffering: decrease acidic/alkaline reactions Electrolysis: Decomposition of drug with stim Electron Exchange: DC changes electron balance Redox Reaction: Water breakdown with stim into H+ at anode & OH- at cathode

Electrothera	Electrotherapy:											
					NN	IES PAR		RS	_			
Goal	Pı	ulse Freq	P Du	ulse ration	Amp (Stre	litude ength)	Duty C On/R tim	Cycle est e	Ramp Time		Treatment Time	Times per day
Muscle Strength	35 No	150 35-80 pps mice Sma Note:		150-200 microseconds Small Muscles		D% of n J	6-10 sec on 50-20 sec off		2 sec or m	ore	10-20 min	Every 2-3 hours
Muscle Reeducation	35	1pps = 1 Hz 35-50 pps 200 mic Lar		350 oseconds	uninjured Sufficient to activity		To activity when exerting effort-of	ty-on f with	y-on with on 1 sec or more relax		Activity Dependent	NA – as tolerated (avoid fatigue)
Muscle Spasm Reduction Edema				To contrac		ction	To contract then off/ to create pumping action	ion /relax g			10-30 min 30 min	Every 2-3 hours 2X/day
					E	Eor Dai	n Control	•				
Parameter Settings:		Pulse Frequence	y	Pulse Duratio	n	Amplit	ude	Mod (Frec Dura	ulation 1 or 1tion)	Tre Tin	eatment ne	Mechanism of Action
Conventional TENS		100 - 150 (1pps = 1)	ops nz)	50-80 m	IS	To the productingling	ction of	Use i avail	f able	Cai hr/	n wear 24 'day	Gaiting at the spinal cord
Low Rate (Acupuncture- like)	•	2 – 10 pps	5	200 – 300 ms		To Visil contra	ble None ction		2	20 – 30 min		Endorphin Release
Burst	irst 10 bursts (usually preset)			100 – 300 ms		To Visi contra	ble None		20-3		- 30 min	Endorphin Release
					ES f	or Tissu	e Healir	ng:				
Parameter		Wavefor	m	Polarit	y Pulse			Pulse		Am	plitude	Treatment
settings/goa	ls					Frequ	ency Durat		ation			Time
Tissue Healin Phase: Inflammatory Infected	ssue Healing nase: High Volt Pulsed flammatory Current		I	Negative 6		60-125 pps		Usually preset for 40-100ms		Pro cor ting	Produce a comfortable tingling	45-60min
Tissue Healin Phase:	ıg			Positive	9							
Proliferation Clean	bliferation ean											
					ES	for lont	ophores	is:				
Goal		Wavefor	m	Puls Freque	e ency	Pu Dura	lse ation	Am	plitude		Polarity	Treatment Time
lontophoresi to deliver drug	S	DC		NA		NA		To pa tolera great 4mA	atient ance no er than	Saı dru	me as Jg ion	To produce a total of 40mA-min
Positively Charged Drugs: (Driven by Anode) Lidocaine Hydrocortisone Histamine Lithium Magnesium				Negatively Charged Drugs: (Driven by Cathode) Acetate Dexamethasone Salicylate Iodine Chlorine								
Zinc Ta						Tap water (Can be either + or -)						

Electrotherapy: High-Voltage Pulsed Current (HVPC)

- High-Volt is a twin-peak, monophasic (Direct) pulsed current
- No concern with ionic build-up because it is very brief duration
- Phase duration is set in most machines at 5 20 microseconds and a pulse duration between 100-200 microseconds



- There is one large dispersive pad with 1, two, or 4 active electrodes (can be Positive or Negative depending on treatment goals.

<u>Effects</u>

- Wound Healing due to Increase blood flow
- Increase in strength (muscle contraction)
- Decreased pain
- pressure in tissues to exchange fluids between capillaries and tissues.

Indications:

- Wound management
- Pain management
- Soft tissue edema
- Levator ani syndrome
- Muscle spasm
- Muscle weakness
- Bell's Palsy

Contraindications:

- Cardiac Pacemakers (Relative contraindication)
- Over heavy scarring
- Malignancy
- Over lower abdomen during pregnancy
- Over anterior transcervical area
- Over osteomyelitis

Parameters:

- One electrode over the wound with other over health tissue >5 cm away
- Polarity in reversal mode
 - Leads to 50% treatment in positive/50% of treatment in negative (no ion build-up)
- Frequency 30-200 pps, Amplitude 1-500V, 10-60 minutes of treatment

Electromyography (EMG)

- Used to evaluate motor units
 - Anterior horn cell, axion, neuromuscular junction and muscle fibers
- Can be surface (Surface EMG) or intramuscular needles
- Muscles at rest should display electrical silence

Abnormal potentials

Spontaneous

- Fibrillation Potential: Indicative of Lower Motor Neuron dysfunction
- Positive Sharp Wave: Denervated muscle at rest, primary muscle disease (MD)
- Fasciculations: Injury/irritation/degeneration of:
 - 1. Anterior horn cell
 - 2. nerve root compression
 - 3. muscle spasm
- Repetitive discharges: Lesions of anterior horn cell or peripheral nerves *Voluntary*
- Polyphasic potentials: Myopathies, muscle or peripheral nerve involvement

Biofeedback

- Used to provide visual and/or Auditory Feedback to performance
- Increase motor, kinesthetic, or physiological response

MEASURES:

Muscle Activity	Heart Rate/Blood Pressure	Skin Temperature
Balance	Posture	Abnormal/Normal Movement

Types:

EMG – Biofeedback (BF)	Position BF	Electroencephalographic BF
Respiratory BF	Sphincter control BF	BP/Temperature/Blood Flow BF
Therapeutic Effects:		
Muscle Relaxation	Neuromuscular Control	Increase Strength
Decrease Spasm	Decrease accessory use	Decrease Pain

Indications:

Spasm	Weakness	Pain
Hemiplegia	SCI	СР
Relaxation	Impaired control	Incontinence (bowel/bladder)

Contraindications:

When Contraction is Detrimental	Skin Irritation or wound
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Parameters/Directions:

1	Apply electrodes parallel to muscle fibers (if there is a ground it can be anywhere)
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- 2. Request a maximal muscle contraction
- 3. Adjust sensitivity to point where patient can perform 6-10 reps (60% of 1RM)
- 4. Treatment 10-15 min

ECTROTHERAPY TERMS:					
Accommodation	Threshold for excitability increases (get "use to" stimulation)				
Alternating Current	Ionic movement shifts between positive and negative (no ion build-up)				
(AC or biphasic)					
Ampere	Measures RATE OF CURRENT				
Amplitude	Magnitude of current (Voltage or Intensity)				
Anode	Positive (+) Electrode - Attracts Negative (-) ions or Anions				
Biphasic	AC current Types:				
	- Symmetrical: Positive identical to negative phase				
	- Asymmetrical:				
	- Balanced: + Charge is = to - Charge				
	- Unbalanced:				
Burst	A "Burst" of charges delivered at one time				
Capacitance	Insulator that "HOLDS CHARGES" like a short-term battery				
Cathode	Negative (-) Electrode - Attracts + ions or Cations				
Chronaxie	Measure of time to develop muscle contraction at any intensity				
Conductance Ease of electric movement					
Current	Flow of electrons (Amplitude) urrent Ionic movement in one direction (ion build-up)				
Direct Current					
(DC or galvanic)					
Duration of	On Time/to/Off Time Ratio - Ratio changes change fatigue				
Stim/Rest					
Duty Cycle	On Time as related to whole treatment - 66% is on 2/3 of treatment				
Impedance	Resistance to current flow				
Frequency	Rate of pulses per second (also called rate)				
High-Volt	>150V with short pulse duration – INTERMITTENT and DEEP				
	PENETRATION - Used for PAIN				
Low-Volt	<15V Used for muscle stim				
Ohm's Law	Voltage = Current x Resistance (V = IR)				
Ramp	Rate of increase in current strength or amplitude				
Resistance	Resist current flow				
Rheobase	Minimal current to create current flow over resistance				
Volt	Electrical Power				