Abstract

Objective: To determine if soft tissue mobilization (STM) will reduce chronic pain and improve function and mobility resulting from C-section surgery.

Study Design: Multi-Center Randomized Clinical Trial

Background: Over 1.27 million C-sections are performed annually in the US.¹ 6-18% of those will result in significant chronic pain.² Minimal research has been published regarding treatment for this condition.

Methods and Measures: 28 subjects reporting chronic pain following C-section underwent 4 treatment sessions. Subjects were randomly assigned to one of two groups. Group 1 received superficial abdomen and lumbo/thoracic massage and superficial skin rolling of the painful scar. Group 2 received the same treatment plus, abdominal myofascial release, and direct deep scar mobilizations. Outcomes included pressure pain threshold (PPT), scar mobility, Oswestry Disability Index (ODI), Global rating of Change (GROC), and Numeric Pain Rating Scale. Two measures were collected at baseline four weeks apart to serve as a control group then at 2 weeks post intervention and again at 10 weeks.

Results: Pain, PPT, ODI, and scar mobility all showed statistically significant improvements (p<.002) in both groups. There were no significant differences between treatment groups on any
outcome measure with both showing improvement. There was no change in any outcome during the control period. GROC was 5.06/7 (results >2.0 indicate Minimal Clinically Important Difference).

**Conclusions:** This study demonstrates that time alone did not account for a change in outcomes and that four sessions of STM techniques are effective in reducing chronic pain following C-section. The positive findings from this study supports the use of physical therapy STM interventions as a valuable and cost-effective treatment for the many sufferers of chronic C-Section related pain.

**References:**


**Key Words:** Cesarean Section, myofascial release, scar, adhesions