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A comparative study on the efficacy of a hot herbal compress, a hot compress and topical Diclofenac in the treatment of myofascial pain syndrome in the upper trapezius: A randomized controlled trial

Jurairat Boonruab and Netraya Nimpitakpong Thammasat University, Thailand

Myofascial Pain Syndrome (MPS) is one of the most prevalent illnesses among those in the working age group caused by poor ergonomics, especially remaining in a sitting posture for an extended period of time. One alternative treatment for MPS is the application of a hot herbal compress, which helps to improve the quality of life of patients and reduce the undesirable side effects of pain relief medication. A controlled trial was conducted in which 90 participants were randomized into the hot herbal compress group (n=30), the hot compress group (n=30) and the topical Diclofenac group (n=30). The first two groups received a 20 minute hot herbal compress and hot compress treatment not exceeding the temperature of 40 °C once a week for two weeks, whereas the last was administered 2 mg of a topical Diclofenac gel three times a day for two weeks. Before and after the treatment, their level of pain intensity and quality of life was assessed using a Visual Analog Scale (VAS) and the 36 item short form health survey (SF-36), respectively. Additionally, their Cervical Range of Motion (CROM) and Pressure Pain Threshold (PPT) were also evaluated. It was found that all the three groups experienced a statistically significant decrease in the level of pain intensity (p<0.05), a statistically significant increase in CROM (p<0.05), a statistically significant increase in PPT (p<0.05) and a statistically significant improvement in the quality of life (p<0.05). However, for the last two assessment criteria, the results for the hot herbal compress group and the hot compress group were not only relatively equal but also better than those for the topical Diclofenac group.

## **Biography**

Jurairat Boonruab has completed her PhD from Chulalongkorn University, Thailand in 2015. She is currently the Deputy Head of the Academic Affairs Department and a Lecturer at the Faculty of Medicine of Thammasat University, Thailand. Her areas of specialization include applied Thai traditional medicine, alternative medicine and public health science. She has published Thai massage and Heber medicine.

salagugu@hotmail.com

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