

## Product reviews

### PhysioRoom Kinesiology Tape

PhysioRoom Ltd, Burnley, Lancashire, UK,  
£4.99 (discounts for bulk orders)  
www.physioroom.com



### Gripit Active Tape

Strapit Medical & Sports Supplies Pty Ltd,  
Thomastown, Victoria, Australia, £11.99  
www.gripitktape.com



Taping is now a popular treatment modality throughout both the ante- and postnatal periods. It is a useful adjunct therapy for conditions

ranging from pelvic girdle pain (PGP) to carpal tunnel syndrome. The use of tape is advocated because it has a stabilizing effect, and also stimulates muscle activation by influencing the soft-tissue structures beneath the areas where it is applied. When it is applied with a light stretch, tape lifts up the skin, decompressing the underlying structures. This reduces nociceptive responses, and allows the fascia and muscle tissue to glide more easily. It is also thought to promote fluid circulation, including both blood flow and lymphatic drainage, which optimizes tissue health in turn. Following the lines of kinetic action, the application of tape over specific parts of the body creates a flow of information that helps to improve and correct the patterns of these structures (Kaplan *et al.* 2016).

Taping is a flexible and adaptable treatment modality during pregnancy and postnatal rehabilitation. The ability to apply tape to cater to a patient's specific needs and have it *in situ* for multiple days, if it is tolerated by her skin, is invaluable. In contrast, a support belt needs to be removed for activities such as washing, swimming or prolonged sitting. On a practical note, pregnant patients who require pelvic support during the hot summer months often appreciate having an alternative to the former. This is because some women report that they dislike using a support belt because of the sensation of wearing an additional layer and/or its unattractive appearance, both of which may reduce compliance.

Some recommended application techniques have been provided by RockTape (2018).

Patients in our clinic often ask why we don't use functional multidirectional tape (FM-tape), which is a very good question. According to the manufacturers' claims, both traditional kinesiology tape (K-tape) with two-way stretch and FM-tape have similar effects. The latter is supposed to make movements more efficient because of the multidirectional range that it provides, which allows feedback without restriction, reducing the load on the underlying structures. For this review, I compared two different products: I continued to use the PhysioRoom K-tape stocked by our clinic, and introduced Gripit FM-tape. I chose the latter on the basis of a balance of cost, customer reviews and availability.

I trialled Griplit FM-tape on six different clients for a month. Four of these patients had previously received the same treatment with K-tape.

PhysioRoom K-tape is very elastic, and its pliability makes it easy to apply it in way that suits each individual. All the patients involved in this trial felt that it had better elasticity and provided more support. This may have been a result of the direction of “pull” that they had on their tape. Although K-tape did result in more cases of skin irritation during the trial, the patients reported that it had slightly greater longevity. From the perspective of clinical sustainability, K-tape is widely used and easily sourced, and the price per roll is considerably lower than other products.

The surface of Griplit FM-tape is smoother than PhysioRoom K-tape, which has the texture of a soft fabric. I found that both tapes were similar with regard to the ease of application. However, because FM-tape has four-way stretch, this means that it has comparatively less elasticity lengthways, and thus, requires longer strips to be used than K-tape. Other than increasing the quantity used, this is not a problem in itself, and may reduce the incidence of patients overstretching the tape when they apply it at home. My expectation was that FM-tape was going to be more elastic, and potentially helpful for women who were very active or had to endure prolonged periods of standing during their day-to-day lives. My patients reported a reduced sense of dynamic support, but much less irritation to their skin. When sourcing FM-tape, I found it to be more expensive with less choice of brands.

Overall, I would stock Griplit FM-tape, but use it only for patients who experienced greater skin sensitivity. Otherwise, I did not see a significantly greater benefit that would justify the additional cost per client of this product.

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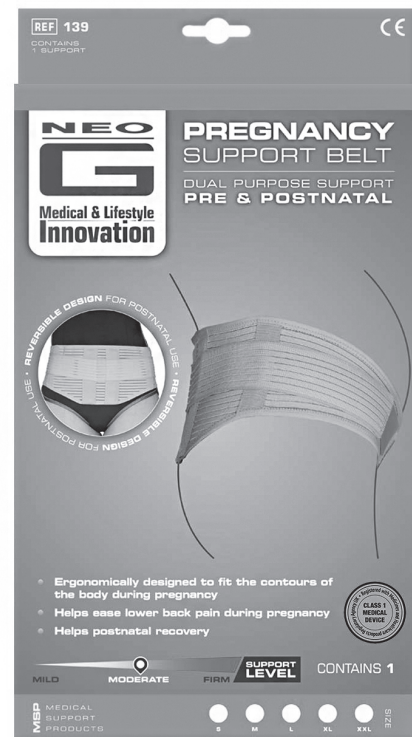
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## Neo G Pregnancy Support Belt

Neo G, Killinghall, Harrogate, UK, £29.99

[www.neo-g.co.uk](http://www.neo-g.co.uk)



The incidences of PGP and low back pain (LBP) during pregnancy are 20–45% and nearly 50%, respectively (Gjestland *et al.* 2013; Pennick & Liddle 2013). Directing clients with PGP to use a support belt is common practice, and recommended as a treatment option in the POGP guidance for health professionals (POGP 2015).

A systemic review by van Benten *et al.* (2014) found that wearing a support belt had a positive effect on pain intensity, and a recent study concluded that:

“The belts appear to be interesting tools to reduce pelvic pain and improve [the] comfort of pregnant women. This effect might be explained by an analgesic effect with [a] proprioceptive and biomechanical effect.” (Bertuit *et al.* 2018, p. e219)

However, there is no substantial evidence for the isolated use of material support or a support belt in the literature, and this is consistent with the recommendation of the European guidelines for the treatment of PGP (Vleeming *et al.* 2008). These state that a pelvic belt may be fitted for symptomatic relief, but should only be applied for short periods.

The Neo G Pregnancy Support Belt was designed to provide a moderately adjustable

dual-purpose support system during and after pregnancy. The manufacturer claims that the material allows the skin to breathe, and users will be able to wear the slimline product discreetly under their clothing. The belt has metal inserts that are removed during the postnatal period, and adjustable support straps on either side of the pelvis. It can be handwashed in cold water once the metal inserts have been removed. The belt is beige in colour, and made of polyamide, polyester, elastane, polyurethane, elastane, cotton and aloe vera.

The product comes folded in a plastic wrapper inside the cardboard packaging. The user-friendly instructions relating to fitting it for pre- and postnatal use are printed with illustrations on the box. Clear sizing instructions are also printed on the packaging, and five belt sizes covering a pelvic circumference of 60–130 cm are available.

Neo G state on the box that prenatal use of the belt will:

- relieve LBP during pregnancy;
- support the lower back during pregnancy; and
- maintain a comfortable position during pregnancy.

It is convenient that women have direct access to this product without the need for a prescription. Waiting lists for National Health Service physiotherapists can be lengthy, and private treatment can be too expensive or out of reach for many patients. Therefore, the belt may provide many pre- and postnatal women with a useful tool for managing their symptoms.

There are an array of belts with varying prices on the market, ranging from ones made of Tubigrip-style material to others with adjustable support straps that are similar to those provided by Neo G. The products with support straps are similarly priced, but the Neo G belt has the additional feature of being suitable for postnatal use.

However, the packaging does state that users should “always consult a physician before use”, but given the lack of substantial evidence for the isolated application of the belt, it would be a welcome addition for Neo G to provide further information on support groups (e.g. POGP or the Pelvic Partnership) so that patients can be educated about additional treatment modalities that could help to manage their symptoms. This would be useful given that the research has also identified that PGP is associated with pelvic floor dysfunction.

This support belt is also designed for use after pregnancy, and the manufacturer states on the box that it can be worn:

- during postnatal recovery;
- as a postnatal support; and
- for postnatal muscle and ligament laxity.

Within the physiotherapy profession and many cultures, it is accepted that a belt may provide some support for the lower back and pelvis during the postnatal period. Long-term support belts are not recommended in research into the management of LBP. Again, it would be a positive addition for Neo G to direct clients to educational resources, and recommend that they seek the help and support that they require for their condition. It is convenient that the belt can also be used in the postnatal period, and this is obviously more cost-effective in comparison to similarly priced belts without this advantage.

Overall, the Neo G Pregnancy Support Belt is averagely priced for a product with adjustable straps that has the added value of being multi-purpose. The instructions are user-friendly, and its benefits are clearly explained. Further information for users would be welcome in order to educate consumers on other treatment modalities for their symptoms.

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