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**Kinesio taping treatments in shoulder impingement syndrome:
A systematic literature review**

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Abstract

Background: Shoulder impingement syndrome is a musculoskeletal condition that often causes pain and limitation of motion in the shoulder, which is generally caused by pressure on the soft tissue structures around the shoulder joint. Kinesiology tape, as one of the relatively new physical therapy methods, has attracted attention in the context of sports rehabilitation and pain management.

Purpose: To evaluate the effectiveness of using kinesiology tape in the management of shoulder impingement syndrome through a systematic literature review.

Method: Using a systematic approach, this study identified the strengths and weaknesses of the existing findings and assessed the methodological quality of the published studies. This study collected and analyzed various relevant studies to determine the effects of kinesiology tape on reducing symptoms of shoulder impingement syndrome, improving joint function, and accelerating the recovery process.

Results: The review showed that while some studies reported significant benefits from the use of kinesiology tape, the quality of existing evidence was variable and required further research for confirmation.

Conclusion: This study provides valuable insight into the role of kinesiology tape in the therapy of shoulder impingement syndrome and suggests future research directions to clarify its effectiveness and mechanism of action.

Keywords: Health; Kinesiology Tape; Shoulder Impingement Syndrome.

INTRODUCTION

Kinesiology tape, or better known as kinesio tape, is a tool that has become popular among athletes and physical therapy practitioners to aid in injury treatment and muscle recovery. The tape is made of a stretchy material and is designed to mimic the elasticity of human skin, allowing for a wider range of motion compared to traditional bandages. Kinesio tape was first developed by Dr. Kenzo Kase, a Japanese chiropractor, in the 1970s. The basic idea is that the tape not only supports muscles and joints without restricting movement but also increases blood and lymphatic fluid flow to speed up the healing process (Setiawati, Rahardjo, & Hartono,

2014). One of the main uses of kinesiology tape is to reduce pain and inflammation. When the tape is applied to an injured area, it lifts the skin slightly, creating additional space between the skin layer and the underlying tissue. This helps to increase blood circulation and lymphatic flow, which in turn reduces the fluid build-up that often occurs after an injury. This reduction in swelling can help reduce pressure on the nerve receptors that are often the main cause of pain. In addition, these bands also stimulate skin receptors that can alter pain sensations and increase proprioceptive awareness (Lee & Choi, 2019).

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In addition to reducing pain and inflammation, kinesiology tape is also often used to provide additional support to muscles and joints without restricting movement (Shih, Lee, & Chen, 2018). This is especially beneficial for athletes who need to stay active despite a minor injury. The tape can help stabilize the injured area, reduce the risk of further injury, and allow athletes to continue training or competing. Due to its high elasticity, kinesio tape allows muscles and joints to move freely, so it does not interfere with the athlete's performance. Many coaches and physiotherapists rely on this tape as part of their injury prevention and recovery strategy. The application of kinesiology tapes requires specialized knowledge and skills to ensure their effectiveness. There are various application techniques depending on the purpose of its use, such as for muscle support, joint stabilization, or pain reduction. For example, the "I-tape" technique is used for linear support, while the "Y-tape" technique is more commonly used to cover larger areas or for more complex muscle support. Specialized training is required to apply these tapes correctly, as errors in application can reduce their effectiveness or even cause additional discomfort to the user (Santausa, 2018). Kinesiology tapes are also used in various medical conditions apart from sports injuries. For example, people with chronic conditions such as arthritis or tendinitis can often benefit from the support and pain reduction offered by these bands. Proper use can help them go about their daily activities more comfortably. Also, in post-operative rehabilitation, kinesiology bands can help reduce swelling and speed up the healing process. Its flexibility and effectiveness in a variety of situations make it a valuable tool in the medical and sports worlds, supporting patients and athletes to achieve optimal recovery and maximum performance (Biben, 2021).

The utilization of kinesiology tapes in Indonesian healthcare has grown rapidly in recent years, along with the increasing awareness of the importance of more comprehensive and non-invasive healthcare. Kinesiology tape, first developed by Japanese chiropractor Dr. Kenzo Kase in the 1970s, has found its place in medical and physiotherapy practices in Indonesia. It is made of skin-like elastic material and is designed to provide support and stability to muscles and joints without restricting body movement. The main advantage of kinesiology tape is its ability to improve

blood and lymphatic fluid circulation, reduce pain, and speed up the injury recovery process (Keenan, Akins, Varnell, Abt, Lovalekar, Lephart, & Sell, 2017).

In the context of sports, kinesiology tapes have become an invaluable tool for athletes in Indonesia. Many professional and amateur athletes with muscle or joint injuries use these bands as part of their rehabilitation program (Sasalbela & Wahyono, 2024). Not only does this tape help reduce pain, but it also allows athletes to remain active in training despite minor injuries. In addition, kinesiology tape can be used as a preventative measure to reduce the risk of injury by providing additional support to vulnerable areas of the body. Improved athlete performance is also often attributed to the use of kinesiology tape due to its effect on improving proprioception, which is the body's awareness of its position in space (Abshenas, Ardakani, & Shalamzari, 2021).

RESEARCH METHOD

Qualitative research is a research method that aims to understand social phenomena or human behavior in a particular context. This approach emphasizes a deep understanding of individual and group experiences rather than objective and quantitative measurements.

The study began with a comprehensive literature search using scientific databases such as PubMed, Scopus, and Google Scholar. The keywords used in the search included "kinesiology band," "shoulder impingement syndrome," and "systematic literature review." We then screened the search results based on predetermined inclusion and exclusion criteria, such as studies published within the last ten years, using qualitative or quantitative methods, and articles available in English or Indonesian. This stage ensured that only relevant, high-quality studies were included in the analysis. After screening and selecting the relevant literature, the researchers then conducted an in-depth analysis of the findings from each selected study. This process involved identifying the main themes, methods used, and results reported in each study. The researcher also evaluated the quality and validity of each study using appropriate critical appraisal tools. This analysis enabled the researcher to develop a comprehensive picture of the effectiveness and mechanism of action of kinesiology tapes in treating shoulder impingement syndrome.

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RESEARCH RESULTS

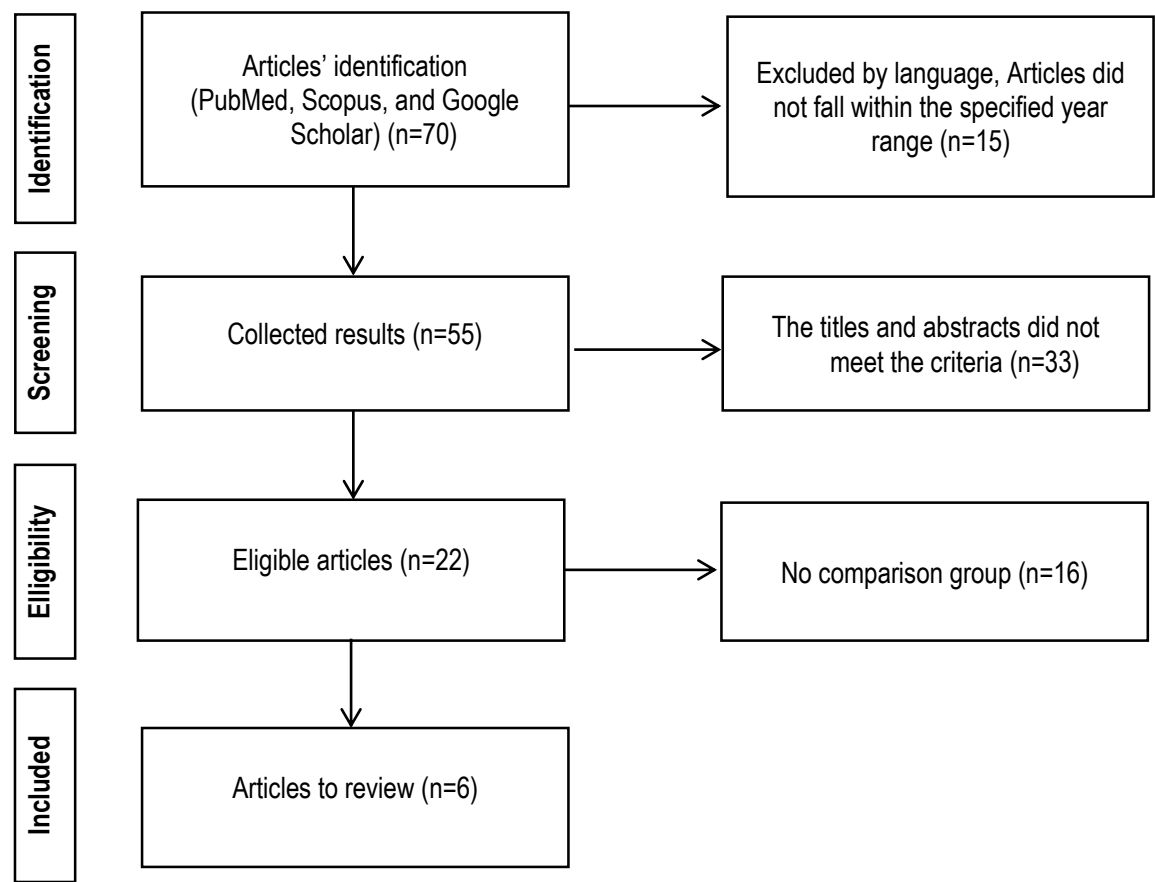


Figure. Diagram Prisma Flow

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Table Main Characteristics of Included Studies

(Author, Year) (Country)	Purpose	Method	Results
(Lee & Choi, 2019) (South Korea)	To investigate the effect of the combined application of balance taping using kinesiology tape and cross taping on a part-time worker with SIS.	Case study	Concurrent use of balance taping and cross taping as an effective treatment for part-time workers with SIS.
(Abshenas et al., 2021) (Pakistan)	To investigate the short-and long-term effects of KT on shoulder pain and functional stability in swimmers with SIS.	Case study	KT can provide a basis for reducing pain and improving functional stability of the shoulder girdle of swimmers with SIS. KT can be used as a complementary treatment technique in people with shoulder impingement syndrome and prevent possible injuries in the area.
(Agustyaningsih et al., 2022) (Indonesia)	To analyze the effect of providing Kinesiotaping with Frozen Shoulder conditions on increasing the range of motion of the shoulder joint.	Pre experimental	There is a significant difference between before and after giving ultra sound and kinestesiotaing 12 times. Thus ultra sound and kinesiotaping can be useful for reducing pain and increasing the functional activity of frozen shoulder sufferers, $p = 0.000$ ($p < 0.05$).
(Ananda et al., 2017) (Indonesia)	To see the effectiveness of Kinesio Taping on SIS using the Kaze technique or a modification of the technique.	Pre and post trial design without a control group in subjects with SIS	Kinesio taping may be a useful adjunctive therapy in the management of SIS. The results of this study may challenge the proposed mechanism for the effectiveness of Kinesio Taping.

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(Author, Year) (Country)	Purpose	Method	Results
(Biben, 2021) (Indonesia)	To evaluate the effects of KT application on the severity of pain, shoulder mobilization, and functional ability of the upper limb in leisure basketball players.	Quantitative method with quasi-experimental design	KT application showed benefits in reducing shoulder pain as well as improving mobilization and functional ability of the upper limbs during application from day 3 to day 5.
(Polie et al., 2020) (Indonesia)	To determine the effect of shoulder pain during passive and active movements on the hemiplegic side after stroke without direct contact with trauma or injury.	Experimental study with a one-group pretest-posttest design.	All 17 subjects, after 7 times of kinesio taping, functional improvement in hemiplegic shoulder pain was obtained ($p < 0.0001$). Kinesio taping therapy reduces pain and improves function in hemiplegic shoulder pain.

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DISCUSSION

Kinesiology tape is a medical device made of elastic material designed to support and stabilize muscles and joints without interfering with body movement. It was first introduced by Dr. Kenzo Kase, a Japanese chiropractor, in the 1970s, with the primary purpose of aiding the recovery process and preventing injuries in athletes. Made from cotton that can stretch up to 140% of its original length, kinesiology tape has a heat-activated acrylic adhesive, allowing it to adhere to the skin tightly yet comfortably (Safa'Nabila, Naufal, & Belinda, 2024). Its unique adhesive technology allows the skin to breathe, reducing the risk of skin irritation or allergies. Another uniqueness lies in the way the tape can be customized to suit individual needs, whether for muscle support, pain reduction, or improved blood circulation. Kinesiology tape works by microscopically lifting the skin, thus creating additional space between the skin and muscles. This mechanism helps to increase blood and lymph flow, which in turn can speed up the healing process and reduce swelling. In addition, this skin lifting effect also reduces pressure on pain receptors located under the skin, which can help reduce the pain felt by the user. This is especially beneficial for athletes who frequently experience muscle or joint injuries, as kinesiology tape allows them to remain active while providing the necessary support for recovery. In addition, the use of these bands is also often combined with other physical therapies for more optimal results (Letafatkar, Rabiei, Kazempour, & Alaei, 2021).

In its practical application, kinesiology tape can be used on various parts of the body, such as the shoulders, knees, back, wrists and feet. Its use is not limited to athletes alone, but it is also very effective for individuals who have sustained injuries from daily activities or physically demanding jobs. Fitting these bands requires specialized skills and is often done by medical professionals such as physiotherapists or sports trainers. However, many users also learn how to fit it themselves by following available guides or tutorials. The band can be worn for several days without needing to be removed, even in the shower, as the material and adhesive are waterproof.

Another benefit of kinesiology tape is its ability to provide sensory feedback to closed muscles and

joints (Biben, 2021). This feedback helps improve body awareness and movement coordination, which is crucial in the rehabilitation process and prevention of further injury. By providing additional support without restricting range of motion, these bands help users maintain correct posture and technique while performing physical activities. In addition, kinesiology bands are also often used to correct poor posture and reduce muscle tension caused by incorrect sitting or standing positions. As such, it plays an important role in maintaining overall musculoskeletal health (Prasetyo, Yulisa, Ilyas, & Prihartono, 2007).

Despite its various benefits, it is important to understand that kinesiology tape is not a magic solution to all musculoskeletal problems. Its use should be considered as part of a comprehensive therapeutic approach, involving proper diagnosis and appropriate treatment from a healthcare professional. The effectiveness of these bands may also vary between individuals, depending on the type and severity of the injury sustained. Therefore, consultation with a medical professional before embarking on the use of kinesiology tape is highly recommended. With proper and judicious use, kinesiology tapes can be a highly effective tool in supporting recovery and improving physical performance (Kul & Ugur, 2018).

Shoulder impingement syndrome is a medical condition that involves inflammation and compression of the structures within the shoulder joint. The condition occurs when the rotator cuff tendons and bursa around the shoulder joint are pinched or rubbed by the surrounding bones, especially the acromion bone (Ananda, Tamin, & Murdana, 2017). The most common symptoms of the syndrome include shoulder pain, especially when raising the arm or moving the shoulder upward, and is often accompanied by decreased muscle strength and limitation of movement. The syndrome can develop due to overuse or repetitive use of the shoulder joint, injury, or even aging that causes degenerative changes in the shoulder structures. Diagnosis of shoulder impingement syndrome often involves clinical evaluation and imaging tests such as MRI or ultrasound to assess damage to the tendons and bursa. The main causes of shoulder impingement syndrome are related to activities that

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involve repetitive movements of the shoulder, such as sports or occupations that demand intensive use of the hands above the head. For example, athletes such as tennis players, swimmers or construction workers are at a higher risk of developing this condition. Acute injuries, such as falls or direct blows to the shoulder, can also cause this syndrome. In older people, natural degeneration of the tendons and bursa may increase the risk of impingement syndrome. Other factors such as poor posture, muscle imbalance or rotator cuff muscle weakness may also contribute to the development of this syndrome (Kocyigit, Acar, Turkmen, Kose, Guldane, & Kuyucu, 2016).

Symptoms of shoulder impingement syndrome usually develop gradually, starting with mild pain that is often ignored. This pain tends to get worse when the shoulder is used in certain activities, especially those involving overhead movements. In addition to pain, sufferers often report stiffness, limitation of movement and sometimes a sensation of weakness in the affected shoulder. In some cases, the pain may extend to the upper arm or neck, interfering with sleep and daily activities. If left untreated, this condition can develop into more serious problems such as rotator cuff tendon tears. Treatment of shoulder impingement syndrome usually starts with a conservative approach, including rest, ice, and non-steroidal anti-inflammatory drugs (NSAIDs) to reduce inflammation and pain. Physiotherapy also plays an important role in recovery, focusing on strengthening the shoulder muscles and improving posture and movement techniques (Yuliawan & Setiawan, 2019). In more severe cases or when conservative treatment is ineffective, surgical intervention may be required to relieve compression on the tendons and bursa. These procedures may include subacromial decompression or rotator cuff repair. After surgery, an intensive rehabilitation and physiotherapy program is essential to restore optimal shoulder function (Shakeri, Keshavarz, Arab, & Ebrahimi, 2013).

Prevention of shoulder impingement syndrome involves maintaining shoulder health through regular strengthening and stretching exercises, as well as avoiding repetitive movements that can cause injury. Using the correct technique when performing certain physical activities or jobs is also very important to

prevent excessive stress on the shoulder joint (Setiawan, Saputra, & Muzafar, 2023). For those at high risk, such as athletes and manual workers, prevention programs involving specialized training and professional supervision can help reduce risk. Addressing postural issues and strengthening the muscles that support the shoulder can provide additional protection. With a proactive approach, the risk of developing shoulder impingement syndrome can be minimized, allowing individuals to remain active and pain-free.

A kinesiology taping scheme in shoulder impingement syndrome is a therapeutic approach designed to relieve symptoms and improve function of the affected shoulder. Shoulder impingement syndrome occurs when the rotator cuff tendons experience excessive pressure or friction under the acromion, causing pain and inflammation. Kinesiology tape is used to reduce pressure on these structures, optimize muscle function, and improve blood and lymphatic circulation in the affected area. Applying the tape appropriately is expected to improve the position of the shoulder and reduce the discomfort felt by the patient. This method, which usually involves specific application techniques, aims to facilitate healing and speed up the rehabilitation process.

The application of kinesiology tape in shoulder impingement syndrome begins with the selection of an appropriate tape type and proper application technique. Kinesiology tapes generally have elastic properties that allow for movement and can conform to changes in muscle and skin shape. This application technique often involves placing the tape in a specific pattern, such as taping in a "Y" or "I" shape, which is expected to reduce tension on tendons and ligaments and improve shoulder mobility (Polie, Sengkey, & Marpaung, 2020). The strategic placement of the tape is also designed to reduce pressure on specific points, which can reduce pain and improve overall shoulder function. Each application pattern has a specific purpose that is tailored to the individual needs of the patient and the intensity of their symptoms (Kaya, Zinnuroglu, & Tugcu, 2011).

During the process of kinesiology tape therapy, it is important to pay attention to how the tape is applied and whether or not the patient experiences

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improvement. Incorrect application techniques or inappropriate use of the tape can reduce the effectiveness of the therapy and even worsen the shoulder condition. Therefore, supervision by an experienced physical therapist or healthcare professional is essential to ensure that the band is applied correctly and provides maximum benefit. Periodic evaluations are required to assess the patient's response to treatment and make adjustments to the application technique if needed. The success of this therapy often depends on careful monitoring and proper adjustments during the rehabilitation process.

In addition to the direct benefits on pain reduction and improved mobility, the use of kinesiology tape can also provide psychological support for patients. By reducing pain and improving mobility, patients may feel more optimistic and motivated to engage in more extensive rehabilitation programs (Agustyaningsih, Fazrina, & Rizal, 2022). This can speed up the recovery process and help patients return to their daily activities more quickly. The use of the tape can also serve as a physical reminder for patients to maintain proper shoulder posture and movement, which is important in preventing recurrence or worsening of the condition in the future.

In the overall treatment of shoulder impingement syndrome, kinesiology tape is one component of a broader therapeutic approach. Often, the use of kinesiology tape is combined with physiotherapy exercises, lifestyle changes, and other pain management techniques. This holistic approach aims to address all aspects of shoulder impingement syndrome and ensure a comprehensive recovery. It is not just about reducing symptoms but also about improving the patient's quality of life and preventing similar problems from occurring in the future. With proper management and continuous monitoring, kinesiology tape can be a very useful tool in the therapy of shoulder impingement syndrome (Göksu, Tuncay, & Borman, 2016).

Kinesiology tape is an increasingly popular tool in the management of various musculoskeletal conditions, including shoulder impingement syndrome. One of the main advantages of using kinesiology tape in shoulder impingement syndrome is its ability to provide dynamic support without

restricting range of motion. The band is designed to work with the body's natural movements, allowing patients to perform daily activities while reducing pain and discomfort. In this way, users can continue rehabilitation exercises and other physical activities without being hampered by the stiffness often caused by other treatment methods such as static bracing or bandaging.

In addition, kinesiology taping can improve blood circulation in the affected area by lifting the skin from the underlying tissues. This process helps in edema reduction and accelerates tissue healing by increasing lymph and blood flow. The use of this tape can also improve posture and body mechanics by providing proprioceptive feedback to the user (Saputro, 2023). This feedback serves as a visual and sensory reminder to maintain proper shoulder position, thereby reducing stress on the shoulder structures involved in impingement syndrome. However, despite its many benefits, the use of kinesiology tapes also has some drawbacks that need to be considered. One of the main drawbacks is the lack of consistent scientific support regarding its effectiveness in the long term. Many studies still show mixed results regarding the actual benefits of the band in the management of shoulder impingement syndrome, leading to debate about the extent to which the band can replace or complement physical therapy and other treatment methods. In addition, improper kinesiology tape insertion techniques or errors in tape size selection may lead to suboptimal results and even worsen the condition.

In addition, kinesiology bands require specialized knowledge and skills in their application. Users often need to undergo training or guidance from a healthcare professional to ensure that the band is applied correctly and effectively. Failure to apply the band correctly can result in additional discomfort and a negative impact on the healing process. This requires patients to commit to the learning process and may have to incur additional costs for training or consultation sessions. Lastly, although kinesiology tapes are relatively affordable compared to some other treatment methods, the additional cost of long-term use could be a factor of consideration. If the bands have to be replaced periodically or used in combination with other therapies, the cumulative cost may increase. This may be a burden for some

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patients, especially if they require the band for a long time as part of their treatment plan. Therefore, it is important to consider the benefits and costs thoroughly before deciding to rely on kinesiology tapes as the primary method of treating shoulder impingement syndrome.

CONCLUSION

Kinesiology tape works by providing mechanical support to muscle and joint structures, while stimulating the body's natural healing process through proprioceptive stimulation. The results of the literature review show that various studies that have been conducted have shown improvements in pain measurement scales, mobility, and shoulder muscle strength after the application of kinesiology tape. However, this research also highlighted some limitations that need to be considered. Many of the analyzed studies showed variations in kinesiology tape application methodology and technique, which may affect the final results and generalizability of the findings. For example, differences in tape application technique, duration of application, as well as frequency of use may result in different outcomes in terms of pain reduction and improved function. In addition, there were shortcomings in sample size and duration of intervention in some studies, which may limit the ability to draw strong conclusions about the long-term effectiveness of kinesiology tape in the management of shoulder impingement syndrome. From this literature review, it is clear that although the use of kinesiology tape shows promising results, there is still a need for further research with a more rigorous design and consistent standards.

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