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Clinical Application of the Mulligan Concept for Rapid Improvements in Patient-Rated Outcomes in an Athletic Training Clinic

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Background: This case series presents utilization of the Mulligan Concept (MC) for the effective treatment of three student-athletes with three diverse musculoskeletal dysfunctions in the athletic training clinic. Patient one was a 21-year-old female soccer player with a chief-complaint of insidious posterior ankle pain that limited participation in soccer and activities of daily living. Patient two was a 20-year-old male baseball pitcher that presented with a traumatic grade III acromioclavicular sprain following a snowboarding accident. Patient three was a 20-year-old female out-of-season soccer player that presented with a chief complaint of knee pain related to an apparent meniscal derangement following a lower extremity weight room session.

Treatment: Each patient was evaluated for perceived pain using the numerical rating scale (NRS), disablement using the Disablement in the Physically Active Scale (DPA), and function using the Patient Specific Functional Scale (PSFS), and regionally specific patient-rated outcomes (PROs) were completed. Additionally, the patients were evaluated using the MC for a PILL effect (**P**ain-free mobilization, **I**mmEDIATE effects, **L**ong-**L**asting). All patients experienced a PILL effect and were subsequently treated using the appropriate MC

mobilization with movement. All patients received between 3-5 treatment sessions before discharge.

Results: Minimal clinically important differences (MCID) were reported on PROs by all patients for pain, disablement, and function. An MCID (2pts) improvement in NRS scores were reported after initial treatment and after one week. An MCID (6pts acute, 9 pts chronic) improvement on the DPA scale were reported after one week and at two weeks/discharge. An MCID (2pts for averaged scores) on the PSFS were reported after initial treatment and one week. All average improvements were maintained below MCID levels through discharge and follow-up at one-week and one-month.

Uniqueness: Through the utilization of the MC, which is not widely integrated currently in athletic training clinics, the clinician rapidly and effectively treated three diverse musculoskeletal conditions.

Conclusion: Effective utilization of the MC improved patient-reported pain and function in three diverse musculoskeletal conditions. Clinicians should consider integration of the MC into clinical practice. Clinical inquiry into the effectiveness of the MC for a wide-variety of musculoskeletal conditions in the athletic training clinic is warranted.

Key Words: *Mulligan Concept, mobilization with movement, clinical outcomes*