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Purpose
In the present report we follow some main anatomic-kinesiologycal factors for providing of joint stability and complex rehabilitation strategy after operation of ventral glenohumeral instability.
Material and Methods
Literature search of articles published in the last five years concerning ventral capsulorrhaphy reconstruction and postoperative rehabilitation.
Results
Complex rehabilitation approach was structured based on the results of the contemporary trends of surgical treatment and postoperative rehabilitation of patient with ventral glenohumeral instability.
Conclusion
The application of new approaches in postoperative rehabilitation after arthroscopic capsulorrhaphy is a precondition for full recovery of glenohumeral functions.
Key words: ventral capsulorrhaphy, rehabilitation

PHYSIOTHERAPY IN VESTIBULAR DISORDERS

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Introduction
Vestibular apparatus is an organ of balance, a basic unit of equilibrium analyzer. It is closely associated with muscle analyzer. The etiology of this disease still remains unknown. The clinical observations indicate that it is a primary disease, and it is not a consequence of other pathological process.
Aim
Presentation of a modern approach to physiotherapy treatment for vestibular disorders.
Materials
The literature review was made on the topic. Meniere's disease is a socially significant disease, which is determined by the fact that patients are with reduced working capacity or impossibility to practice some specific professions.
Method
The current therapy aims to reduce the available symptoms. The optimal treatment should stop the vertigo, to reduce the noise in the ear and to improve hearing. A great part of the healing methods are directed to control of the most disturbing symptom, dizziness and dilution and seizure control.
Results
Through selected and dosed physical exercises we aim to develop better coordination between the eye analyzer and deep muscle and joint sensitivity which actively supports the biological compensation.
Discussion
Vestibular function disorders, although not threaten the patient's life, they lead to unpleasant consequences associated with impaired balance, coordination of movements, orientation in space.
Conclusion
Physiotherapy occupies a significant place in the treatment plan with their features, because of the social significance of the illness.
Key words: vestibular apparatus, physiotherapy, electrotherapy

KINESIOLOGICAL GROUND OF PHYSICAL THERAPY AFTER SHOULDER HEMIARTROPLASTY

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Functional recovery of the shoulder region after arthroplasty in cases of fractures of the proximal humerus present a great challenge because the recovery of the soft tissue tension and anatomical position of the tubercles are very difficult. The surgical intervention changes the shoulder biomechanics and put some specific demands on the development of the physical therapy program.
The **aim** of the study is to presents the kinesiological base of the special features of the physical therapy following shoulder hemiarthroplasty in cases proximal humeral fractures.
On the basis of recent publication and clinical experience, the main patobiomechanical/ pathokinesiological changes after shoulder hemiarthroplasty are determined, and the main characteristics of the postoperative physical therapy are pointed. The accent is put on the key role of the recovery of the rotator cuff for development of dynamic stabilization and complex function of the shoulder. The Main pathobiomechanical problem is reactivation of the rotator cuff muscles, since trauma, operative intervention and postoperative immobilization lead to marked inhibition and hypotrophy of these muscles. Since biomechanical changes after shoulder hemiarthroplasty for fractures could not be fully avoided, adequate physical therapy is of main importance for maximal functional recovery.
Key words: hemiarthroplasty, shoulder, pathokinesiology, kinesitherapy.

PHYSIOTHERAPY PROGRAM FOR IMPROVING THE QUALITY OF LIFE IN PATIENTS WITH COXARTHROSES

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Introduction
Coxarthrosis /CA/ not only restricts the functionality of the people, but also affects the psyche of the patient. It is among the most common diseases of modern times, lowering the quality of life of patients.
The aim is to investigate the effect of the application of the manual physiotherapeutic mobilization and myofascial techniques to improve the quality of life in patients with arthrosis.
Material and methods
36 patients with unilateral coxarthrosis (23 women and 13 men) of mean age 61.67, were divided into two groups: experimental (EG) - 19 and a control (CG) - 17 subjects. Studied are: pain (visual analogue scale - VAS); range of motion of the hip; muscle imbalance; gait; degree of disability (ODI); physical and mental status (SF-8). Treatment program for the two groups include electrotherapy and physical therapy (PT). CG is treated with classic massage and EG - with manipulative massage (MM), myofascial techniques, incl. techniques for trigger points (MFRT) and mobilization with movement on Mulligan (MWM).
Results
Statistically significant at the end of treatment ODI reduced in both groups. The percentage of disability in experimental group decreased by 10.53, and in the control group by 6.76%. The assessment of physical health status in EG increased by 103.05%, reaching 54,74 ± 4,65 points at the final examination. For CG the final result is 50,88 ± 6,09.
Discussion
Lesser degree of disability and better health status of patients in EG proves the effect of applied manual techniques through which more pronounced reduces pain, improves joint mobility and the functionality of muscles.
Conclusion
The inclusion of manipulative massage, myofascial techniques, massage trigger points and mobilization with movement by Mulligan in treatment program by patients with arthrosis leads to statistically significantly better results and improves the quality of life of respondents.
Keywords: arthrosis, physical therapy, quality of life.

MASSAGE METHODS FOR PREVENTION AND TREATMENT OF LUMBOSACRAL PAIN SYNDROME

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Introduction
Functional disorders with motor deficits of the sacroiliac joint (SIJ) is characterized by local and radiating pain. They can cause secondary occurred scoliosis, blockages and various clinical syndromes - dysmenorrhea, morbus Crohn, chronic adnexitis, and others.
Aim
The aim is to create and test Physiotherapeutic (PT) methodology, combining manual techniques and analytical exercises for patients with dysfunction of the sacroiliac joint and chronic pain syndrome in the lumbosacral area.
Material and methods
In the period 2014-2015, we treated 29 patients (18 men and 11 women) with pain syndrome and functional blocks of SIJ with an average age of 32.76 years. The patients were divided into 2 groups: control group (CG) - 14 and an experimental group (EG) - 15 patients. Before and after the treatment we assessed the intensity of pain (visual-analogue scale – VAS), SIJ mobility and muscle imbalance. The therapeutic program included classic massage, post isometric relaxation, analytical exercise and auto mobilization of SIJ. For the experimental group, classical massage was replaced by myofascial and positional release techniques.
Results
Statistically significant ($p < 0.05$) reduction of pain was registered in both groups, but it is 0.8 points higher in EG. Relaxation of shortened static muscles and improved mobility of SIJ is a prerequisite for improving the static and dynamic strength endurance of the abdominal, back and gluteal muscles, reliably more prominent in EG.
Discussion
Restoration of joint mobility and muscle balance significantly reduces symptoms of pain, which is why relapses in EG are significantly lower than those in the control - 26.7% for EG and 35.7% for CG.
Conclusion
Comprehensive methodology with co-administration of active PT, myofascial techniques and trigger points massage achieves maximum efficiency and can be reliably used by therapists in the country.
Key words: lumbosacral pain, muscle imbalance, massage

PROFESSIONAL SKILL FORMATION IN STUDENTS DURING THE TRAINEESHIPS

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Introduction
The additional traineeships are an element of innovation in the practical training of medical rehabilitation students at the Medical College. They are aimed at mobilisation of students, improvement of their practical skills, strengthening of team work and remuneration of participants.
The purpose of the present study was to perform opinion research among medical rehabilitation