

## ⌘10 Pause and Practice:

# Opening a Tight Hand

This practice lab is an example of putting muscles on length in order to help regulate tone.

### Starting Position

- Begin with your patient in sitting; feet flat on the floor and pelvis in a neutral position.

### Handling

- Prepare the upper extremity with scapular mobilization in elevation/ depression and protraction.
- Work proximal to distal; from the shoulder to the hand.
- Move your hand from the scapular down to the epicondyles, keeping the shoulder forward. Do not allow the arm to pull into retraction.
- Slide your other hand from the patient's forearm to their hand.
- Both of your hands will maintain scapular protraction.



- Maintaining protraction of the scapula, place both of your hands on the patient's hand. One hand is firmly placed at the thenar eminence, along the base of the thumb. The other hand is placed firmly on the hyperthenar eminence. Your thumbs are aligned on the dorsum of the wrist, over the lunate. The position of your thumbs is very important. They help stabilize the lunate as the wrist is brought into extension, allowing proper alignment of the carpals.



- Next, bring the wrist up into extension. Move slowly but firmly. Do not force any structures. The higher the tone, the slower your movements will be.
- Now, with your hands firmly supporting the thenar and hyperthenar eminence slowly spread the palm, helping to release the fingers and move the thumb away from the hand.



- Slide your hand down the thumb, maintaining support at the base of the thumb. Bring the thumb away from the hand. You will often feel the tightness “release” at this point.



- Slide your other hand into theirs, supporting at the base of the MCP joints.



- Slowly open the hand, extending the fingers while supporting the base of the MCP joints. Never hang on the fingers or the thumb without giving support.



- Open the hand completely.



**Tips**

- Determine if the hand is tight due to tone or due to soft-tissue tightness. If it is due to tone, the method described above works well in nearly all cases. Go slowly and firmly. With an extremely tight hand it may take five minutes or more to get it open. Be patient. Once the hand is open, continue to inhibit tone with weight bearing methods.
- If your patient's hand is unable to open due to soft tissue tightness, treatment methods used to reduce tone are not as effective. The underlying factor or impairment is more orthopedically based and appropriate treatment will be determined by the soft-tissue structures that are limited.

**Notes**

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