

# PILOT EXPERIMENTAL STUDY OF A NEUTRACEUTICAL IN THE IMPROVEMENT OF THE EVOLUTION OF ROTATOR CUFF TENDINOPATHY

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## Introduction:

Rotator cuff tendinopathy or subacromial shoulder pain is one of the most frequent pathologies of the musculoskeletal system, being one of the main causes of painful shoulder characterized by pain and inflammation. It is an evolutionary process where it could appear small tendon tears of degenerative origin making difficult the recovery. Therefore, it is important to add to the conservative treatment, the use of food supplements that help in tendon regeneration.

## Objective:

To assess **Tenflex**<sup>®</sup>'s efficacy in rotator cuff tendinopathy (RCT) associated with a protocolized rehabilitation treatment (RHB) in the improvement of pain progression, using the Visual Analogue Scale (VAS), and also in the improvement of functional capacity by the use of the Constant Scale.

## Methods and materials:

Pilot, randomized and blinded experimental study in patients with rotator cuff tendinopathy.

Sixty patients who met the following criteria were included: adults (40-80 years) with RCT confirmed by ultrasound and more than 3 months of evolution. The patients were divided into two groups: RHB group (submitted to 10 rehabilitation sessions) and RHB + **Tenflex**<sup>®</sup> group (submitted to 10 rehabilitation sessions plus 1 sachet / day of **Tenflex**<sup>®</sup> for 3 months).

Monitoring visits were made at 2, 6 and 12 weeks where a descriptive study of the variables age, gender, pain (VAS) and functionality (Constant Scale) was carried out. A non parametric comparison (Mann-Whitney U), was made between the average of both groups, of the difference of the VAS and Constant scales between baseline and final time.

## Results:

Of the total of 60 recruited patients, 59 completed the study; 29 in the RHB group and 30 in the RHB + **Tenflex**<sup>®</sup> group. The average age of the patients included was 58.44 years, being 45.87% female sex.

Regarding the evolution of pain (Figure 1), in the RHB group the initial and final VAS scale values were 6.21 (SD 1.92) and 4.40 (SD 2.74) respectively.

In the RHB + **Tenflex**<sup>®</sup> group, the initial value was 5.82 (SD 1.99) and at the end of the study the value was 2.84 (SD 2.06) , obtaining a decrease of almost three points.

Statistically significant differences ( $p = 0.05$ ) were observed in the difference in pain between baseline and end.

With regard to functional capacity (Figure 2), in the RHB group, the values at the beginning and the end of the study were 69.49 (SD 13.71) and 79.83 (SD 15.39), while in the RHB + **Tenflex**<sup>®</sup> group were 72.45 (SD 13.00) and 87.17 (SD 12.83). The score on the Constant Scale improved in both groups, being higher in the (RHB + **Tenflex**<sup>®</sup>) group with a difference of 4.39 points compared to the RHB group.

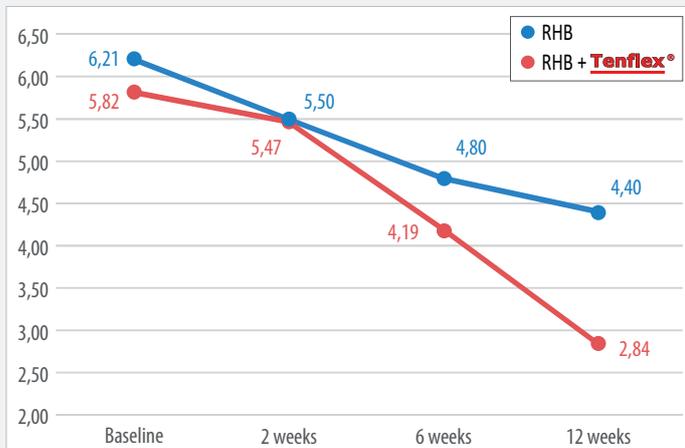


Figure 1. Pain reduction (VAS).

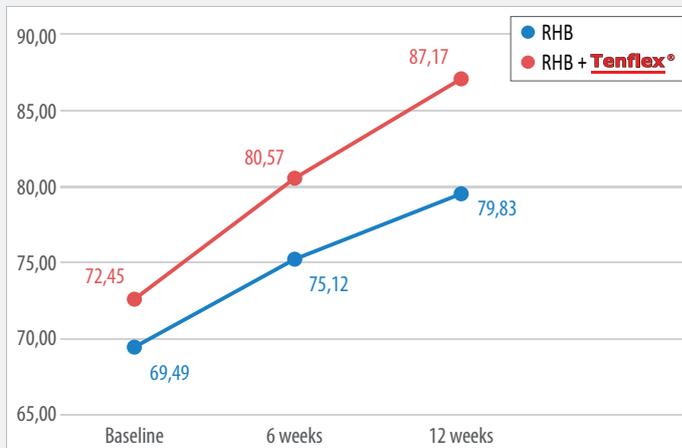


Figure 2. Functional capacity evolution.

## Conclusion:

The use of **Tenflex**<sup>®</sup> associated with rehabilitation (**Tenflex**<sup>®</sup> + RHB) in patients with rotator cuff tendinopathy reduces pain statistically significantly compared to those who only perform rehabilitation (RHB).

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