

Table 1. Indications and contraindications for manual therapy in select forms of arthritis*

Diagnosis	Indications	Contraindications	Comments
	Decreased ROM (with or without pain) with joint accessory motion or limitation of the involved joint or distant joints that effects the condition	Osteoporosis, nonhealed fracture or dislocation, bone tumor, bone infection or septic arthritis, instability, and severe joint deformity; vertebrobasilar insufficiency is contraindication for cervical spine	Often joint restrictions proximal or distal to the involved joint contribute to abnormal stress and require manual therapy treatment to correct the dysfunction.
	Same as OA; early disease without joint destruction, joint accessory motion limitation	Same as OA; cervical spine (especially with instability), joint destruction with instability Same as OA; pain of psychological origin	Low grades of mobilization are sometimes helpful for pain control, emphasizing the neurophysiologic effects. Painful stimuli from joint dysfunction might increase the fibromyalgia pain response. Manual therapy treatment could help decrease this condition. Repeated manipulation for short-term pain relief is not recommended in long-term management.
Spinal stenosis	Same as OA	Same as OA	Improving lower extremity joint and muscle limitations could decrease abnormal stress to the lumbar spine.

* OA = osteoarthritis; RA = rheumatoid arthritis.