

# Clinical Trial Protocol

## Iranian Registry of Clinical Trials

10 Jun 2026

### **Effectiveness of augmented tele-rehabilitation based on mobile application to routine physical therapy on pain, range of motion, disability and quality of life in patients with adhesive capsulitis: Randomized controlled trial**

#### **Protocol summary**

##### **Study aim**

Investigating the effect of adding telerehabilitation to routine physiotherapy on pain, range of motion, disability, and quality of life outcomes in frozen shoulder patients

##### **Design**

A clinical trial with a control group, with double-blind, randomized parallel groups, phase 3 was conducted on 24 patients.  
<https://www.sealedenvelope.com/simple-randomiser/v1/lists> was used for randomization

##### **Settings and conduct**

Both groups receive 12 physiotherapy sessions over 4 weeks, including hot pack, TENS, low-level laser therapy, joint mobilization, and PNF techniques. The intervention group will also use a mobile app providing guided home exercises, which adjusts difficulty based on patient feedback. The app includes instructional videos, timers, and daily questionnaires. Sessions last approximately 60 minutes. The research location are at the The special clinic of Ghaem Hospital and Comprehensive Rehabilitation Center in Mashhad, on Parastar Street.

##### **Participants/Inclusion and exclusion criteria**

Inclusion criteria: Limited active and passive shoulder range of motion, history of shoulder pain for at least 4 weeks, requirements to download and install the application  
Exclusion criteria: Bilateral involvement, history of trauma, surgery, or infection

##### **Intervention groups**

The intervention group will include patients who receive the mobile app in addition to conventional physiotherapy. The comparison group will include patients who receive conventional physiotherapy only.

##### **Main outcome variables**

Score of Shoulder Pain and Disability Index questionnaire

#### **General information**

##### **Reason for update**

##### **Acronym**

##### **IRCT registration information**

IRCT registration number: **IRCT20221030056342N7**

Registration date: **2025-12-06, 1404/09/15**

Registration timing: **registered\_while\_recruiting**

Last update: **2025-12-06, 1404/09/15**

Update count: **0**

##### **Registration date**

2025-12-06, 1404/09/15

##### **Registrant information**

##### **Name**

Afsaneh Zeinalzadeh

##### **Name of organization / entity**

##### **Country**

Iran (Islamic Republic of)

##### **Phone**

+98 51 3884 6710

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##### **Recruitment status**

**recruiting**

##### **Funding source**

##### **Expected recruitment start date**

2025-09-20, 1404/06/29

##### **Expected recruitment end date**

2026-09-20, 1405/06/29

##### **Actual recruitment start date**

empty

##### **Actual recruitment end date**

empty

##### **Trial completion date**

empty

### Scientific title

Effectiveness of augmented tele-rehabilitation based on mobile application to routine physical therapy on pain, range of motion, disability and quality of life in patients with adhesive capsulitis: Randomized controlled trial

### Public title

Investigating the effect of remote rehabilitation in physiotherapy treatment of frozen shoulder patients

### Purpose

Treatment

### Inclusion/Exclusion criteria

#### Inclusion criteria:

Limitation in both active and passive range of motion shoulder pain for at least 4 weeks access to a mobile phone capable of installing the tele-rehabilitation app

#### Exclusion criteria:

Bilateral diagnosis of frozen shoulder Frozen shoulder may be secondary to trauma (fracture or dislocation) or secondary to systemic problems (rheumatoid arthritis) cervical radiculopathy history of shoulder surgery Not able to work with the application

### Age

From **18 years** old to **70 years** old

### Gender

Both

### Phase

3

### Groups that have been masked

- Investigator
- Outcome assessor
- Data analyser

### Sample size

Target sample size: **48**

### Randomization (investigator's opinion)

Randomized

### Randomization description

In this study, the unit block randomization method is used. For this method, the size of each block must first be determined (for example, a block of four). Then, a list of blocks is written and numbers are assigned to them (AABB(1)- ABAB(2)- ABBA(3)- BBAA(4)- BABA(5)- BAAB(6)), then random numbers between one and six are selected (for example, 1 4 5, etc.), and finally, the treatment allocation list is determined based on the previous random numbers (... AABB-BBAA-BABA-).} The randomization sequence will be prepared with the help of the website [www.sealedenvelope.com](http://www.sealedenvelope.com). The steps for allocating individuals to the groups are as follows: Preparation of Sequentially Numbered, Opaque, Sealed Envelopes (SNOSE): Each position in the allocation list (e.g., the first position, which is A; the second, which is A; the third, which is B; etc.) is placed inside an opaque, sealed envelope. Only a serial number (1, 2, 3, ...) is marked on the outside of each envelope. Randomization at the Time of Each Individual's Enrollment: After verifying the eligibility and obtaining informed consent from each participant, a researcher who is directly involved with the participant (and is typically unaware of

the envelope's contents) opens the envelope with the lowest available serial number. Group Allocation: The content inside the envelope (the letter A for the intervention group or B for the control group) determines which group that specific participant is assigned to.

### Blinding (investigator's opinion)

Triple blinded

### Blinding description

Patients will be divided into two groups, intervention and control, by the sample allocator from the set of envelopes and according to the order indicated by the number on the back of the envelopes. The sample allocator, who will be unaware of the coding method, will be blind to the outcome assessor before treatment and then in the fourth week of treatment. The therapist will also be blind.

### Placebo

Not used

### Assignment

Parallel

### Other design features

## Secondary Ids

empty

## Ethics committees

### 1

#### Ethics committee

##### Name of ethics committee

Ethics Committee of Mashhad University of Medical Sciences

##### Street address

Mashhad, at the end of Shahid Fakuri Blvd, between Shahid Al Shahidi Square and Shahid Javan Square of Mashhad Medical Sciences, Knowledge and Health Village, Central Organization of Knowledge

##### City

Mashhad

##### Province

Razavi Khorasan

##### Postal code

9177899191

#### Approval date

2025-04-26, 1404/02/06

#### Ethics committee reference number

IR.MUMS.REC.1404.052

## Health conditions studied

### 1

#### Description of health condition studied

Frozen shoulder syndrome

#### ICD-10 code

M75.0

#### ICD-10 code description

Adhesive capsulitis of shoulder

## Primary outcomes

### 1

#### Description

Score of Shoulder Pain and Disability Index Questionnaire

#### Timepoint

Immediately before and after treatment

#### Method of measurement

The SPADI questionnaire is used to assess pain and disability in patients with shoulder disorders. The questionnaire consists of 13 questions in two separate sections: pain (5 items) and disability (8 items). The total score ranges from 0 to 100, with higher scores indicating greater pain and disability.

## Secondary outcomes

### 1

#### Description

Score of Visual Analogue Scale

#### Timepoint

Immediately before and after treatment

#### Method of measurement

In this scale, there is a 10 cm horizontal line segment, the left end of which corresponds to the absence of pain and the other end corresponds to the most severe pain that the person experiences. The distance between the left side and the marker is calculated in centimeters and is calculated as the intensity of the pain.

### 2

#### Description

Range of motion

#### Timepoint

Immediately before and after treatment

#### Method of measurement

To examine the range of motion of the shoulder joint, a goniometer will be used in the supine position based on Kelley guidelines.

### 3

#### Description

Score of 12 Item Short Form Survey Quality of Life Questionnaire

#### Timepoint

Immediately before and after treatment

#### Method of measurement

It is a 12-question questionnaire and a shorter version of the 36SF- which is divided into two main sections: physical and mental health. A higher score indicates a better quality of life and a lower score indicates a lower quality of life.

### 4

#### Description

Quick Disabilities of Arm, Shoulder, and Hand Questionnaire

### Timepoint

Immediately before and after treatment

### Method of measurement

It is an 11-question questionnaire that assesses the degree of disability in daily activities, limitations in work and recreational activities, the degree of pain, and the psychological impact of the condition. Scores on this questionnaire range from 0 to 100. Higher scores indicate greater disability, and lower scores indicate less disability.

### 5

#### Description

Score of Global Rating Scale

#### Timepoint

Immediately before and after treatment

#### Method of measurement

The scale is 11 points, ranging from -5 (much worse) to 0 (no change) and +5 (much better). The patient is asked to rate the change in the shoulder following the treatment plan.

## Intervention groups

### 1

#### Description

Individuals in the control group will receive 12 one-hour sessions of treatment as follows: 1. Low-power laser will be applied for 30 seconds to 8 painful points of the shoulder joint capsule with an energy of 1.8 Joules per point. 2. After that, in the second stage, electrical skin stimulation with a frequency of 150 and a current intensity of 25 to 35 mA (at a level of comfort determined by the patient) will be applied for 15 minutes. 3. Before performing mobilization and stretching exercises, a hot pack is applied for 15 minutes to increase the flexibility of collagen. 4. The second diagonal flexion pattern in the upper limb in the involved hand along with the Hold-Relax technique will be performed as a 10-second contraction of the antagonist muscle, 5 times per session. 5. At the end of each session, individuals in both groups are taught the necessary exercises to exercise at home at least once a day, observing the precautions for each stage of the exercise.

#### Category

Treatment - Other

### 2

#### Description

Individuals in the Intervention group will receive 12 one-hour sessions of treatment as follows: 1. Low-power laser will be applied for 30 seconds to 8 painful points of the shoulder joint capsule with an energy of 1.8 Joules per point. 2. After that, in the second stage, electrical skin stimulation with a frequency of 150 and a current intensity of 25 to 35 mA (at a level of comfort determined by the patient) will be applied for 15 minutes. 3. Before performing mobilization and stretching

exercises, a hot pack is applied for 15 minutes to increase the flexibility of collagen. 4. The second diagonal flexion pattern in the upper limb in the involved hand along with the Hold-Relax technique will be performed as a 10-second contraction of the antagonist muscle, 5 times per session.5. At the end of each session, individuals in both groups are taught the necessary exercises to exercise at home at least once a day, observing the precautions for each stage of the exercise. The intervention group receives the same exercises and care recommendations in the form of a mobile application.

**Category**

Treatment - Other

**Recruitment centers****1****Recruitment center****Name of recruitment center**

Special Physiotherapy Clinic of Ghaem Hospital

**Full name of responsible person**

Mr Mohammad Javad Zarandi

**Street address**

Narjes building, first floor, Physiotherapy Department, Qaem Hospital, Nurse Street

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**Sponsors / Funding sources****1****Sponsor****Name of organization / entity**

Mashhad University of Medical Sciences

**Full name of responsible person**

Dr Mohsen Tafaghodi

**Street address**

Mashhad, University street, University of Medical Sciences, 3rd Floor, deputy of Science and Technology

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**Grant name****Grant code / Reference number****Is the source of funding the same sponsor organization/entity?**

Yes

**Title of funding source**

Mashhad University of Medical Sciences

**Proportion provided by this source**

100

**Public or private sector**

Public

**Domestic or foreign origin**

Domestic

**Category of foreign source of funding**

*empty*

**Country of origin****Type of organization providing the funding**

Academic

**Person responsible for general inquiries****Contact****Name of organization / entity**

Mashhad University of Medical Sciences

**Full name of responsible person**

Afsaneh Zeinalzadeh

**Position**

Associate Professor, Department of Physiotherapy, Mashhad University of Medical Sciences

**Latest degree**

Ph.D.

**Other areas of specialty/work**

Physiotherapy

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**Person responsible for scientific inquiries****Contact****Name of organization / entity**

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**Other areas of specialty/work**

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**Person responsible for updating data**

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**Position**

Associate Professor of Mashhad University of Medical Sciences

**Latest degree**

Ph.D.

**Other areas of specialty/work**

Physiotherapy

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**Sharing plan**

**Deidentified Individual Participant Data Set (IPD)**

Undecided - It is not yet known if there will be a plan to make this available

**Study Protocol**

Undecided - It is not yet known if there will be a plan to make this available

**Statistical Analysis Plan**

Undecided - It is not yet known if there will be a plan to make this available

**Informed Consent Form**

Undecided - It is not yet known if there will be a plan to make this available

**Clinical Study Report**

Undecided - It is not yet known if there will be a plan to make this available

**Analytic Code**

Undecided - It is not yet known if there will be a plan to make this available

**Data Dictionary**

Undecided - It is not yet known if there will be a plan to make this available