

Clinical Trial Protocol

Iranian Registry of Clinical Trials

05 Aug 2026

Effect of kinesiotaping on postural control in participants with ACL reconstruction: a randomized clinical trial

Protocol summary

Study aim

The main purpose of the present work is to examine the effect kinesiotaping on postural control in patients who underwent ACL reconstruction during challenging conditions.

Design

Pragmatic, community based, parallel group, single blind, randomized controlled trial

Settings and conduct

In the present study, a series of 40 numbers including "1" and "2" will be determined. These will then be placed in a sealed envelope. The numbers will be selected from top to down by the physiotherapy ward secretary, respectively. Single blinded The participant, assessor, and statistical analyzer will be blinded from the allocation details.

Participants/Inclusion and exclusion criteria

Inclusion criteria: Participants aged between 18 and 35 years, In addition, It was included all complete and non-complete tear of anterior cruciate ligament with and without meniscal injury in the present study. Exclusion criteria subjects will be excluded if they had any serious neurological disorders, musculoskeletal disorders (except for ACLD), history of falling, narcotic usage 48 hours before data collection, alcohol usage 48 hours before data collection.

Intervention groups

Intervention group: Y-shaped tapes will be applied in origin-insertion direction to facilitate the muscles. While the patient is lying on lateral position, the tape will be placed on the rectus femoris muscle with a tension of 25-30% bringing the hip to extension and the knee to 30-35° of flexion and the tape will be placed on the hamstring muscle with a tension of 40-50% by bringing the hip to flexion and the knee to extension. A corrective kinesiotaping with a tension of 100% will be attached on anterior surface of tibia on 30 degrees of flexion and pull the tibia into backward in relation to the femur. Control group: Placebo kinesiotape will be applied without

tension on the front and back side of the knee.

Main outcome variables

Postural sway

General information

Reason for update

Acronym

IRCT registration information

IRCT registration number: **IRCT20161221031506N4**

Registration date: **2020-08-11, 1399/05/21**

Registration timing: **prospective**

Last update: **2020-08-11, 1399/05/21**

Update count: **0**

Registration date

2020-08-11, 1399/05/21

Registrant information

Name

Salman Nazary-Moghadam

Name of organization / entity

Country

Iran (Islamic Republic of)

Phone

+98 51 3884 6713

Email address

nazaryms@mums.ac.ir

Recruitment status

Recruitment complete

Funding source

Expected recruitment start date

2020-09-10, 1399/06/20

Expected recruitment end date

2021-11-21, 1400/08/30

Actual recruitment start date

empty

Actual recruitment end date

empty

Trial completion date
empty

Scientific title
Effect of kinesiotaping on postural control in participants with ACL reconstruction: a randomized clinical trial

Public title
Effect of kinesiotaping on balance in participants with ACL reconstruction

Purpose
Treatment

Inclusion/Exclusion criteria
Inclusion criteria:
 Inclusion criteria: Participants aged between 18 and 35 years, In addition, It was included all complete and non-complete tear of anterior cruciate ligament with and without meniscal injury in the present study.
Exclusion criteria:
 Exclusion criteria subjects will be excluded if they had any serious neurological disorders, musculoskeletal disorders (except for ACLD), history of falling, narcotic usage 48 hours before data collection, alcohol usage 48 hours before data collection.

Age
From **18 years** old to **35 years** old

Gender
Male

Phase
N/A

Groups that have been masked

- Participant
- Outcome assessor
- Data analyser

Sample size
Target sample size: **32**

Randomization (investigator's opinion)
Randomized

Randomization description
Simple randomization using sealed envelopes. In the present study, a series of 40 numbers including "1" and "2" will be determined using www.randomization.com. These will then be placed in a sealed envelope. The numbers will be selected from top to down by the physiotherapy ward secretary, respectively .

Blinding (investigator's opinion)
Single blinded

Blinding description
Single blinded. In the present work, placebo kinesiotaping will be used. Therefore, all the participants are unaware of which group they are in.

Placebo
Used

Assignment
Parallel

Other design features
En Online randomization

Secondary Ids

empty

Ethics committees

1

Ethics committee

Name of ethics committee

Ethical Committee of Mashhad University of Medical Sciences

Street address

Doctora Cross road, Beside hoveyzeh Cinema

City

Mashhad

Province

Razavi Khorasan

Postal code

9191111111

Approval date

2020-02-08, 1398/11/19

Ethics committee reference number

IR.MUMS.REC.1395.598

Health conditions studied

1

Description of health condition studied

Anterior Cruciate Ligament Tear

ICD-10 code

S83.5

ICD-10 code description

Sprain of cruciate ligament of knee

Primary outcomes

1

Description

Postural Sway

Timepoint

Before intervention, Immediately after intervention, 48 hours after intervention

Method of measurement

Force Platform Device

Secondary outcomes

1

Description

Disability

Timepoint

Before and two days after intervention

Method of measurement

IKDC

2

Description

Intervention group: A 5-cm-wide Kinesiotape (Ares, Korea) will be used in treatments. Few hours after shaving the area of the skin to be taped, Y-shaped tapes will be applied in origin-insertion direction to facilitate the muscles. While the patient is lying on lateral position, the tape will be placed on the rectus femoris muscle with a tension of 25–30% bringing the hip to extension and the knee to 30–35° of flexion and the tape will be placed on the hamstring muscle with a tension of 40–50% by bringing the hip to flexion and the knee to extension. A corrective kinesiotaping with a tension of 100% will be attached on anterior surface of tibia on 30 degrees of flexion and pull the tibia into backward in relation to the femur.

Timepoint

Before and two days after intervention

Method of measurement

IKDC

Intervention groups

1

Description

Intervention group: A 5-cm-wide Kinesiotape (Ares, Korea) will be used in treatments. Few hours after shaving the area of the skin to be taped, Y-shaped tapes will be applied in origin-insertion direction to facilitate the muscles. While the patient is lying on lateral position, the tape will be placed on the rectus femoris muscle with a tension of 25–30% bringing the hip to extension and the knee to 30–35° of flexion and the tape will be placed on the hamstring muscle with a tension of 40–50% by bringing the hip to flexion and the knee to extension. A corrective kinesiotaping with a tension of 100% will be attached on anterior surface of tibia on 30 degrees of flexion and pull the tibia into backward in relation to the femur.

Category

Rehabilitation

2

Description

Control group: Placebo kinesiotape will be applied without tension on the front and back side of the knee.

Category

Placebo

Recruitment centers

1

Recruitment center

Name of recruitment center

Ghaem Hospital, Balance Laboratory

Full name of responsible person

Mr Javad Zarandi

Street address

Balance Laboratory, Physiotherapy Department,
Ghaem Hospital, Mashhad, Iran

City

Mashhad

Province

Razavi Khorasan

Postal code

9199171111

Phone

+98 51 3878 5445

Email

zarandimj1@mums.ac.ir

Sponsors / Funding sources

1

Sponsor

Name of organization / entity

Mashhad University of Medical Sciences

Full name of responsible person

Dr Mohsen Tafaghodi

Street address

Vice chancellor for research, Mashhad University of
Medical Sciences

City

Mashhad

Province

Razavi Khorasan

Postal code

9199171111

Phone

+98 51 3878 5445

Email

TafaghodiM@mums.ac.ir

Grant name

Grant code / Reference number

950879

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

Mashhad University of Medical Sciences

Position

Assistant Professor

Latest degree

Ph.D.

Other areas of specialty/work

Physiotherapy

Street address

Emam Khomeini 93, Number 89

City

Mashhad

Province

Razavi Khorasan

Postal code

9199171111

Phone

+98 51 3878 5445

Email

nazaryms@mums.ac.ir

Person responsible for scientific inquiries

Contact

Name of organization / entity

Mashhad University of Medical Sciences

Full name of responsible person

Dr Salman Nazary-Moghadam

Position

Assistant Professor

Latest degree

Ph.D.

Other areas of specialty/work

Physiotherapy

Street address

School of Paramedical Sciences

City

Mashhad

Province

Razavi Khorasan

Postal code

9199171111

Phone

+98 87 85445

Email

nazaryms@mums.ac.ir

Person responsible for updating data

Contact

Name of organization / entity

Mashhad University of Medical Sciences

Full name of responsible person

Salman Nazary-Moghadam

Position

Assistant Professor of Physiotherapy

Latest degree

Ph.D.

Other areas of specialty/work

Physiotherapy

Street address

Faculty of Paramedical Sciences, Vakilabad Blvd,
Bahonar Blvd, Pardis Campus, Mashhad, Iran

City

Mashhad

Province

Razavi Khorasan

Postal code

9199171111

Phone

+98 915 301 0870

Email

nazary_salman@yahoo.com

Web page address

Sharing plan

Deidentified Individual Participant Data Set (IPD)

Yes - There is a plan to make this available

Study Protocol

Yes - There is a plan to make this available

Statistical Analysis Plan

Yes - There is a plan to make this available

Informed Consent Form

Yes - There is a plan to make this available

Clinical Study Report

Yes - There is a plan to make this available

Analytic Code

Yes - There is a plan to make this available

Data Dictionary

Yes - There is a plan to make this available

Title and more details about the data/document

The effect of kinesiotaping on postural control and
functional disability at challenging conditions in patients
with ACL reconstruction

When the data will become available and for how long

2022-2023

To whom data/document is available

Salman Nazary-Moghadam

Under which criteria data/document could be used

Salman Nazary-Moghadam

From where data/document is obtainable

Nazary_salman@yahoo.com

What processes are involved for a request to access data/document

The effect of kinesiotaping on ACL reconstruction

Comments