



ABSTRACT

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"EFFECTIVENESS ADDITION OF MUSCLE ENERGY TECHNIQUE IN CASE OF LOW BACK PAIN MYOGENIC"

Consisting of Chapter VI, page 96, 5 pictures, 17 tables, 10 graphs, 3 Scheme, 7 Attachment

Objective : To determine of differences effectiveness addition of MET intervention in therapy US for lumbar disability in a case of LBP myogenic. **Sample :** Research consisted of 26 people with ages between 30-50 years. This research was divided into two groups, treatment's group I was given MET intervention and US therapy and treatment's group II was given US therapy. **Method :** research is a quasi-experimental and the level of disability measured by ODI to measure disability and VAS to measure pain intensity. Normality test using a statistical analysis Shapirowilk test and homogeneity test samples with T-test Independent. **Results:** Paired sample t-test in hypothesis I obtained p-value = 0.001 ($p < 0.05$) which is means the addition of MET in the treatment of US influence to decrease of waist's disability in a case of LBP myogenic. The result of paired t-test on the hypothesis II was obtained p-value = 0.001 ($p < 0.05$) which is means the addition of MET intervention in the US therapy influence to decrease pain intensity in the case of myogenic LBP. In related test t-test on the hypothesis III with p-value = 0.001 ($p < 0.05$) which is means the treatment of US influence in decrease of lumbar disability in a case of LBP myogenic. In related test t-test hypothesis IV with p-value = 0.001 ($p < 0.05$) which is the US treatment effect to the decrease in pain intensity in the case of myogenic LBP. On the hypothesis V using independent t-test showed a p-value of 0.001 ($p < 0.05$) which is means there are differences in the effect on the addition of MET intervention in US therapy with the US therapy to decrease lumbar disability in LBP myogenic cases. Then hypothesis VI using independent t-test showed a p-value of 0.018 ($p < 0.05$), then H_0 is rejected and H_a accepted, so there are differences in the effect on the addition of MET intervention in US therapy with the US therapy to decrease pain intensity in LBP myogenic cases.

Keywords : MET, US, LBP myogenic