

Table 17. Whole-Body Vibration (WVB)

Author Year Country Research Design Score Total Sample Size	Methods	Outcome
<p>In et al. (2018); Republic of Korea RCT PEDro=7 Level 1 N=28</p>	<p>Population: 28 participants with cervical (level C6 or C7) SCI; 19 males and 9 females; mean age 48 years; AIS D; and mean time since injury 14 months.</p> <p>Treatment: All patients were randomly assigned to two groups:</p> <ul style="list-style-type: none"> • WBV group (n=14): Participants received 16 min of WBV training, twice a day, 5 days a week for 8 weeks. The frequency was set at 30 Hz, and a vertical displacement was 2–4 mm. Patients were required to stand on the platform and were instructed to hold a semi-squatting position. WBV training consisted of four sets of 45 s of stimulation, and a minute break between each session. • Control group (n=14): Participants received the same WBV procedure but without vibration (placebo). <p>Both groups were treated with a conventional physical therapy protocol consisting of range of motion and mat exercises, and gait training for 30 min per day.</p> <p>Outcome Measures: Postural imbalance (analyzed based on PS length using a force plate device) and walking ability (by TUG and 10MWT) were assessed at baseline and at post training.</p>	<ol style="list-style-type: none"> 1. Both groups showed significant improvements in balance and walking ability. 2. There were significant differences between the WBV and control groups for the changes in postural sway length (p=0.045 with eyes open and p=0.014 with eyes closed), TUG (p=0.016), and 10MWT (p=0.005); which were bigger in the experimental group than in the control group.