W1Health

Room 503/5th Floor, Linen Hall, 162-168 Regent Street, London, W1B 5TF

TAPING OR STRAPPING INFORMATION LEAFLET

What is strapping or taping?

Therapists commonly use taping and strapping techniques when treating an injury/condition. Taping/strapping is the application of a sticky material to the skin appropriate to and dependent upon the injury being treated. Many different types of tape/strapping are used. The three main types used are zinc oxide tape, elastic adhesive bandage and elastic cohesive bandage.

How does it work?

Strapping/taping may work in 3 ways:

1) It supports the relevant body part and may maintain stability/alignment
2) It provides sensory feedback and may facilitate improved posture.
3) It offloads a damaged or irritated structure and may decrease pain.

For what conditions is taping/strapping commonly used in?

Taping/strapping is used in many common conditions including:

- Knee ligament sprains
- Ankle ligaments sprains
- Shoulder impingement
- Postural syndromes
- Acute lower back pain, with or without leg symptoms
- Muscular strains
- Kneecap/patella maltracking

What should I be aware of if being strapped/taped?

- Use the tape as advised by your Therapist.
- Discontinue use if local skin irritation (redness, itching, blisters) occurs.
- You may shower with the taping/strapping, but try to avoid baths as it soaks the tape.
- The taping/strapping can generally be kept on for 2-4 days but this is dependent on each person. Usually by 3-4 days, you will feel that it is no longer beneficial.
- On removal of the taping/strapping, a matching local redness of the skin may be visible. This is normal and will disappear.
- On removal of the taping/strapping, a skin blister may be noticed. Do not apply any ointments or lotions as this may aggravate the blister. Let the blister heal naturally.

If you have any queries, then please discuss it with your Therapist