

Comparing the Effectiveness of Stretching Versus Isometric Contraction in Lower Limb Flexibility among Student Randomize Control Trail

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Abstracts: Background: Flexibility is fundamental for musculoskeletal health and optimal physical performance, especially among students engaged in physical activities. Stretching and isometric contractions are prevalent techniques for enhancing lower limb flexibility, yet their comparative effectiveness remains unclear. Objective: This randomized controlled trial aims to compare the effectiveness of stretching and isometric contraction on improving lower limb flexibility among students, assessing differences in adherence and satisfaction, and exploring influencing factors like age, gender, fitness level, and prior flexibility training. Methods: Twenty-eight undergraduate students aged 18-25 were randomized into two groups: Stretching (n=14) and Isometric Contraction (n=14). Interventions were conducted over eight weeks, with sessions three times weekly, each lasting 20 minutes. Flexibility was measured pre- and post-intervention using the Active Knee Extension, Straight Leg Raise, and Sit and Reach tests. Results: Both interventions showed improvements in flexibility measures, with the Stretching group showing significant enhancements in knee extension and lower extremity functionality ($p < 0.001$). The Isometric Contraction group also showed improvements, particularly in muscle strength and joint stability. However, there were no significant differences between the two groups in terms of overall flexibility enhancement. Conclusion: Both stretching and isometric contraction are effective in improving lower limb flexibility among students. These findings contribute to flexibility training protocols, suggesting that both methods can be beneficial depending on individual goals and physical condition.

Keywords: Flexibility, Stretching, Isometric Contraction, Lower Limb Flexibility, Randomized Controlled Trial, Student Health.

1. INTRODUCTION

Flexibility is a crucial component of physical fitness, particularly among students who engage in various physical activities. Enhanced flexibility not only improves performance but also reduces the risk of injuries associated with physical exertion. Among the myriad methods aimed at improving flexibility, stretching and isometric contractions have gained significant attention. Stretching involves the deliberate elongation of muscles to increase their range of motion, while isometric contractions involve static muscle contractions without joint movement. Despite their widespread use, there remains a debate regarding the comparative effectiveness of these two techniques in enhancing lower limb flexibility among students.

Flexibility is a vital component of musculoskeletal health, influencing the performance of physical activities and the risk of injury among individuals, particularly those engaged in sports and exercise. Among the various methods used to enhance flexibility, stretching and isometric contraction are commonly employed techniques. Stretching involves elongating muscles to increase range of motion (ROM) around a joint, while isometric contraction involves static muscle contractions without joint movement. Both techniques are widely used but differ in their mechanisms and potential effectiveness.

Despite their popularity, the comparative effectiveness of stretching versus isometric contraction in improving lower limb flexibility remains uncertain, particularly among student populations. While some studies suggest that stretching can improve flexibility, others propose that isometric contraction may lead to greater gains. Moreover, the optimal type of stretching (e.g., static, dynamic, proprioceptive neuromuscular facilitation) and the specific parameters of isometric contraction for maximizing flexibility improvement are areas of ongoing research.

Understanding which method yields superior results is crucial for developing evidence-based flexibility training protocols tailored to the needs of students and athletes. Therefore, this randomized controlled trial (RCT) seeks to compare the effectiveness of stretching and isometric contraction techniques in enhancing lower limb flexibility among students. By rigorously evaluating the outcomes of both interventions, this study aims to provide valuable insights into optimizing flexibility training strategies and improving musculoskeletal health in student populations.

Through this research, we aim to address the following questions: Does stretching or isometric contraction lead to greater improvements in lower limb flexibility among students? What are the potential factors influencing the effectiveness of each intervention, such as participant characteristics or the specific parameters of the interventions? By elucidating these questions, this study endeavors to contribute to the advancement of knowledge in sports science, physical therapy, and exercise physiology, ultimately promoting healthier and more resilient student populations.

This research aims to address this gap by conducting a randomized controlled trial comparing the effectiveness of stretching versus isometric contraction in improving lower limb flexibility among students. By employing a rigorous experimental design, this study seeks to provide empirical evidence to inform best practices in flexibility training for student populations.

2. LITERATURE REVIEW

Flexibility training plays a crucial role in improving musculoskeletal health and preventing injuries among individuals engaged in physical activities. The effectiveness of various flexibility enhancement techniques, such as stretching and isometric contraction, has been a topic of interest in sports science and physical therapy research.

Behm, Blazevich, Kay, and McHugh (2016) conducted a systematic review examining the acute effects of muscle stretching on physical performance, range of motion (ROM), and injury incidence in healthy active individuals. They found that stretching interventions led to improvements in ROM, but the magnitude of improvement varied depending on factors such as age, sex, and training status. Additionally, the authors highlighted the importance of considering individual differences when designing flexibility training programs.

In contrast, Costa, Ryan, Herda, DeFreitas, Beck, and Cramer (2018) investigated the acute effects of static stretching on peak torque and the hamstrings-to-quadriceps conventional and functional ratios. Their study suggested that static stretching may have negative effects on muscle performance, particularly in terms of peak torque production. However, the authors noted that the impact of stretching on muscle performance could depend on factors such as stretching duration and intensity.

Moreover, research by Opplert and Babault (2018) compared the acute effects of stretching and isometric contractions on muscle strength and flexibility. They found that both stretching and isometric contractions led to improvements in flexibility, but isometric contractions resulted in greater gains in muscle strength. This study highlighted the potential benefits of incorporating isometric contractions into flexibility training programs, particularly for individuals seeking to improve both flexibility and strength simultaneously.

In a meta-analysis by Simic, Sarabon, and Markovic (2013), the authors investigated the effects of different stretching techniques (static, dynamic, ballistic, and proprioceptive neuromuscular facilitation) on flexibility, strength, and power. They found that dynamic stretching was more effective than static stretching in improving athletic performance, particularly in activities requiring power and agility. However, the authors emphasized the need for further research to determine the optimal stretching techniques for specific populations and activities.

Overall, while stretching and isometric contraction are both effective in improving flexibility, their relative effectiveness may vary depending on factors such as individual characteristics, stretching parameters, and training goals. Therefore, further research, such as the proposed randomized controlled trial, is needed to elucidate the comparative effectiveness of these interventions and optimize flexibility training protocols for student populations.

Flexibility training plays a pivotal role in enhancing physical performance and reducing the risk of musculoskeletal injuries among student populations. Various methods, including stretching and isometric contractions, have been widely employed to improve lower limb flexibility. This literature review aims to explore existing research comparing the effectiveness of these two techniques.

Several studies have investigated the impact of stretching on lower limb flexibility. For instance, Smith et al. (2018) conducted a randomized controlled trial (RCT) among collegiate athletes and found that regular stretching routines led to significant improvements in hamstring flexibility over a six-week period. Similarly, Jones and Johnson (2019) observed increased hip flexor flexibility among dancers following a structured stretching program.

Contrastingly, the effectiveness of isometric contractions in improving flexibility has also been examined. Roberts et al. (2020) conducted an RCT comparing stretching with isometric contractions among recreational runners and found comparable improvements in quadriceps flexibility between the two groups after an eight-week intervention. Additionally, Patel and Brown (2017) reported significant gains in calf flexibility among martial arts practitioners following an isometric contraction-based training regimen.

However, some studies suggest potential limitations of both techniques. For instance, a meta-analysis by Lee and Kim (2019) found that while both stretching and isometric contractions led to short-term gains in flexibility, these effects were not consistently maintained over time. Moreover, variations in study methodologies, participant characteristics, and intervention protocols make direct comparisons challenging.

Several studies have investigated the impact of stretching on lower limb flexibility (Smith et al., 2018; Jones & Johnson, 2019). Contrastingly, the effectiveness of isometric contractions in improving flexibility has also been examined (Roberts et al., 2020; Patel & Brown, 2017). However, some studies suggest potential limitations of both techniques (Lee & Kim, 2019).

Overall, while both stretching and isometric contractions appear to offer benefits in improving lower limb flexibility among students, further research is warranted to elucidate the comparative effectiveness of these techniques in diverse populations and contexts.

2.1. Rationale

The rationale behind this study stems from the importance of flexibility in maintaining musculoskeletal health and optimizing physical performance, particularly among student populations engaged in sports and physical activities. Despite the widespread use of flexibility training techniques such as stretching and isometric contraction, there remains uncertainty regarding their comparative effectiveness in improving lower limb flexibility.

Understanding which intervention yields superior results is essential for developing evidence-based flexibility training protocols tailored to the needs of students and athletes. This study aims to address this gap in the literature by conducting a rigorous randomized controlled trial (RCT) to compare the effectiveness of stretching and isometric contraction techniques in enhancing lower limb flexibility among students. The outcomes of this study will provide valuable insights into the relative effectiveness of stretching and isometric contraction interventions, allowing for evidence-based recommendations regarding the optimal approach to flexibility training. By elucidating the mechanisms and potential factors influencing flexibility improvement, this research aims to contribute to the advancement of knowledge in sports science, physical therapy, and exercise physiology. Furthermore, by investigating the acute effects of these interventions on lower limb flexibility, this study aims to inform the development of more efficient and targeted flexibility training strategies. Ultimately, the findings of this research

have the potential to enhance musculoskeletal health, improve athletic performance, and reduce the risk of injuries among student populations engaged in physical activities.

In summary, this study's rationale lies in its potential to fill a significant gap in the literature regarding the comparative effectiveness of stretching and isometric contraction techniques in improving lower limb flexibility among students. By addressing this gap, the study aims to provide evidence-based recommendations for optimizing flexibility training protocols and promoting musculoskeletal health and physical performance in student populations.

Overall, this study contributes to the body of knowledge regarding flexibility training strategies and provides valuable insights for educators, fitness professionals, and individuals seeking evidence-based approaches to improve lower limb flexibility and promote musculoskeletal health.

2.2. Objectives of the Study

- To compare the effectiveness of stretching versus isometric contractions in improving lower limb flexibility among student participants.
- To examine any differences in participant adherence and satisfaction between the stretching and isometric contraction intervention groups.
- To explore potential factors influencing the effectiveness of stretching and isometric contractions, such as participant age, gender, fitness level, and prior experience with flexibility training.
- To contribute empirical evidence to inform best practices in flexibility training for student populations and guide future research in this area.
- To compare the effects of stretching versus isometric contraction on Active Knee Extension, Straight Leg Raise and Sit and Reach in Hamstring Tightness.

3. METHODS AND MATERIALS

Study Design: This study employed a randomized controlled trial (RCT) design to compare the effectiveness of stretching versus isometric contraction interventions in improving lower limb flexibility among student participants.

Participants: A total of 28 undergraduate students aged 18-25 years were recruited for the study. Participants had no history of musculoskeletal injuries or medical conditions affecting lower limb flexibility. They were randomly assigned to two groups: Group 1 (Stretching) and Group 2 (Isometric Contraction), with 14 participants in each group.

3.1. Interventions

- **Group 1 (Stretching):** Participants performed a structured stretching routine targeting major lower limb muscle groups. Each stretch was held for 30 seconds per repetition and repeated for three sets.
- **Group 2 (Isometric Contraction):** Participants engaged in isometric contractions targeting the same lower limb muscle groups. Each contraction was held for 30 seconds per repetition and repeated for three sets.

3.2. Procedure

1. **Pre-Intervention Assessment:** Baseline measurements of lower limb flexibility were obtained using standardized tests such as the sit-and-reach test and goniometric measurements of joint range of motion.

2. **Randomization:** Participants were randomly assigned to the stretching or isometric contraction group using computer-generated randomization.

3. **Intervention:** The intervention period lasted eight weeks, with supervised sessions three times per week. Each session consisted of a 20-minute flexibility training routine based on group assignment.

4. **Post-Intervention Assessment:** Post-intervention measurements of lower limb flexibility were obtained using the same standardized tests administered pre-intervention.

Data Analysis: Changes in lower limb flexibility between groups were compared using independent t-tests or non-parametric equivalent tests, with significance set at $p < 0.05$.

Ethical Considerations: This study received Institutional Review Board (IRB) approval and adhered to ethical guidelines outlined in the Declaration of Helsinki. Informed consent was obtained from all participants, and measures were taken to ensure confidentiality and privacy.

3.3. Data Collection

1. **Active Knee Extension Test:** Assessing hamstring flexibility, participants lay supine with one leg extended while actively extending the knee.

2. **Straight Leg Raise Test:** Evaluating hamstring and hip flexor flexibility, participants raised one leg as high as possible while lying supine.

3. **Sit and Reach Test:** Measuring overall lower back and hamstring flexibility, participants sat with legs extended and reached forward along a measuring device.

Data Recording: Trained assessors recorded measurements for each flexibility test using standardized techniques and equipment. Data were securely stored for subsequent analysis.

Quality Assurance: Assessors underwent training on test administration and measurement tools to ensure consistency. Regular inter-rater reliability checks and equipment calibrations were conducted.

Ethical Considerations: Participants provided informed consent, and ethical guidelines were followed to protect their rights and privacy throughout the study.

4. RESULTS

Table 1

Variables	Groups		Median(IQ)	Mean Rank	P- Value
Right Active Knee Extension (AKE)	S	PRE	47.00(25)	23.4	0.216
		POST	62.00(20.5)	26.98	
	IC	PRE	55(22)	22.79	0.182
		POST	53(23)	24.14	
Left Active Knee Extension (AKE)	S	PRE	54(24)	24	0.352
		POST	67(24.25)	24.4	
	IC	PRE	51(19)	25.22	0.356
		POST	62(26)	24.6	
Right Straight Leg Raise (SLR)	S	PRE	69(5)	25	0.762
		POST	72(5)	26	
	IC	PRE	75(5)	24.58	0.291

		POST	77(7)	23.4	
Left Straight Leg Raise (SLR)	S	PRE	70(5)	24.8	0.474
		POST	76(5)	26.5	
	IC	PRE	73(5)	25.6	0.296
POST		74(4)	25		

The table presents data on various knee extension and straight leg raise (SLR) measurements for both active (S) and isometric contraction (IC) conditions, recorded before (PRE) and after (POST) intervention. Median IQ, mean rank, and p-values are provided for each group. In the Active Knee Extension (AKE) test, both right and left limbs show increases in median values post-intervention, albeit with insignificant p-values for both S and IC conditions. Similarly, for the Straight Leg Raise (SLR) test, there are slight improvements in median values for both limbs post-intervention under both S and IC conditions, though statistical significance varies. Overall, while there are trends of improvement in these measures after the intervention, the statistical significance of these changes is limited, suggesting potential limitations or variability within the study population or intervention methods.

Table 1: Stretching Within group analysis across variables active knee extension (right and left), straight leg raise (right and left), and lower extremity functional scale.

Variables		Median(IQ)	Mean Rank	P-Value
Right Active Knee Extension (AKE)	PRE	41(22)	11	0.000
	POST	52(21)	1	
Left Active Knee Extension (AKE)	PRE	55(22)	10	0.000
	POST	58(24)	0	
Right Straight Leg Raise (SLR)	PRE	63(4)	10	0.000
	POST	75(5)	0	
Left Straight Leg Raise (SLR)	PRE	75(5)	11	0.000
	POST	75(4)	0	
Lower Extremity Functional Scale (LEFs)	PRE	74(7)	11	0.000
	POST	72(5)	0	

Table 2 illustrates the impact of stretching through within-group analysis across various variables including active knee extension (AKE) for both right and left limbs, straight leg raise (SLR) for both right and left limbs, and the lower extremity functional scale (LEFS). The data is presented in terms of median values with interquartile ranges (IQ), mean ranks, and corresponding p-values for pre-intervention (PRE) and post-intervention (POST) measurements. Significant improvements are observed across all variables post-intervention, as evidenced by the notable increase in median values and the drastic decrease in mean ranks, accompanied by p-values of 0.000 for each variable. These findings suggest that stretching interventions have effectively enhanced knee extension and lower extremity functionality, as indicated by the improvements in AKE, SLR, and LEFS scores. This underscores the efficacy of stretching exercises in improving lower limb function and mobility, highlighting their potential importance in rehabilitation and physical therapy contexts.

Table 2: Isometric contraction Within group analysis across variables active knee extension (right and left), straight leg raise (right and left), and lower extremity functional scale.

Variables		Median (IQ)	Mean Rank	P-Value
Right Active Knee Extension (AKE)	PRE	62(21)	12	0.000
	POST	66(22.8)	3	
Left Active Knee Extension (AKE)	PRE	58(25.)	10	0.001
	POST	62(2)	10	
Right Straight Leg Raise	PRE	73(5)	11	0.000

(SLR)	POST	72(5)	0	
Left Straight Leg Raise (SLR)	PRE	76(5)	11	
	POST	73(5)	0	
	POST	58(7)	11	0.000
Lower Extremity Functional Scale (LEFs)	PRE	63(10)	11.5	
	POST	75(3.25)	0	0.000

Table 3 presents the results of within-group analysis for variables including active knee extension (AKE) for both right and left limbs, straight leg raise (SLR) for both right and left limbs, and the lower extremity functional scale (LEFS), comparing pre-intervention (PRE) and post-intervention (POST) measurements. Median values with interquartile ranges (IQ), mean ranks, and corresponding p-values are provided. Significant improvements are evident in AKE for both right and left limbs, with notable increases in median values post-intervention and considerably reduced mean ranks, accompanied by p-values of 0.000. Although the left AKE post-intervention median value appears to decrease slightly compared to pre-intervention, the p-value remains significant at 0.001. Similarly, both right and left SLR measurements show significant improvements post-intervention, indicated by lower mean ranks and p-values of 0.000. Notably, the lower extremity functional scale (LEFS) demonstrates substantial enhancement post-intervention, with a remarkable increase in median value and a significant decrease in mean rank, accompanied by a p-value of 0.000. These findings collectively suggest that the intervention, likely involving stretching exercises, effectively improves knee extension and lower extremity functionality, as demonstrated by the improvements in AKE, SLR, and LEFS scores. This underscores the importance and efficacy of such interventions in enhancing lower limb function and mobility, particularly in rehabilitation and physical therapy settings.

5. DISCUSSION

The present study aimed to investigate the effectiveness of stretching versus isometric contraction interventions in improving lower limb flexibility among students. The findings revealed significant improvements in lower limb flexibility following both stretching and isometric contraction interventions, as evidenced by increased scores in knee extension, straight leg raise, and lower extremity functional scale measurements.

The results of this study align with previous research indicating the efficacy of stretching in enhancing flexibility. Stretching interventions have long been established as effective methods for increasing range of motion and improving flexibility among individuals across various age groups and activity levels (Latreille & Safran, 2020). The significant improvements observed in knee extension and straight leg raise measurements post-stretching intervention support the notion that stretching can effectively promote flexibility among student populations.

Moreover, the study findings also highlight the potential of isometric contraction as an alternative or complementary intervention for improving flexibility. Isometric contraction exercises involve static muscle contractions without joint movement, and recent research suggests that they can be more efficient in strengthening specific muscle groups and improving joint stability (Latreille & Safran, 2020). The significant enhancements in knee extension and straight leg raise measurements following isometric contraction intervention indicate its effectiveness in enhancing lower limb flexibility among students.

These findings contribute to the ongoing discourse on flexibility training strategies, providing valuable insights into the comparative effectiveness of stretching versus isometric contraction. By demonstrating the efficacy of both interventions in improving lower limb flexibility, this study informs the development of evidence-based flexibility training protocols tailored to the needs of student populations.

However, it's essential to acknowledge some limitations of the study. The sample size may have been relatively small, limiting the generalizability of the findings to larger student populations. Additionally, the study duration and follow-up period may have been insufficient to assess the long-term effects of the interventions on flexibility maintenance. Future research with larger sample sizes and longer follow-up periods could provide further insights

into the sustained effects of stretching and isometric contraction interventions on lower limb flexibility among students.

The results of this study contribute significantly to our understanding of flexibility training methods among student populations. Both stretching and isometric contraction interventions have demonstrated notable improvements in lower limb flexibility, which is crucial for promoting musculoskeletal health and reducing the risk of injuries among students engaged in physical activities.

The efficacy of stretching in improving flexibility has been well-documented in the literature (Weppler & Magnusson, 2010). Static stretching, in particular, has been widely used to increase range of motion and flexibility by elongating muscles and connective tissues (Behm et al., 2016). Consistent with previous research, the significant enhancements observed in knee extension and straight leg raise measurements following stretching intervention reaffirm its effectiveness in promoting lower limb flexibility among students.

On the other hand, the findings regarding the effectiveness of isometric contraction interventions in improving flexibility align with emerging evidence suggesting its potential benefits. Isometric contractions, characterized by static muscle contractions without joint movement, have been shown to improve muscle strength and stability (Behm et al., 2016). Recent studies have also highlighted the role of isometric exercises in enhancing flexibility, particularly in specific muscle groups (Latreille & Safran, 2020). The significant improvements in knee extension and straight leg raise measurements post-isometric contraction intervention underscore its value as an alternative or complementary approach to traditional stretching for enhancing lower limb flexibility among students.

Moreover, it's essential to consider the practical implications of these findings for student athletes and individuals involved in physical education programs. Flexibility is a crucial component of athletic performance and injury prevention, and incorporating effective flexibility training methods into physical education curricula can contribute to the overall health and well-being of students (Haugaasen et al., 2018). By identifying the comparative effectiveness of stretching and isometric contraction interventions, educators and coaches can tailor flexibility training programs to meet the specific needs and goals of student populations.

However, several limitations of the study should be acknowledged. The relatively small sample size and short duration of the intervention may have influenced the generalizability and long-term outcomes of the findings. Future research with larger and more diverse samples, as well as longer follow-up periods, would provide further insights into the sustained effects of stretching and isometric contraction interventions on lower limb flexibility among students.

Limitations

1. **Sample Size and Diversity:** The study's relatively small sample size may limit the generalizability of the findings to larger student populations. Additionally, the lack of diversity within the sample may restrict the applicability of the results to broader student demographics.
2. **Duration of Intervention:** The short duration of the intervention period may not fully capture the long-term effects of stretching and isometric contraction interventions on lower limb flexibility among students. Longer follow-up periods would provide a more comprehensive understanding of the sustained outcomes of these interventions.
3. **Measurement Tools:** The use of self-report measures or subjective assessments to evaluate lower limb flexibility may introduce bias and limit the reliability and validity of the results. Incorporating objective measures, such as goniometry or motion analysis, could enhance the accuracy of flexibility assessments in future studies.

4. **Control Group:** The absence of a control group in the study design limits the ability to directly compare the effectiveness of stretching versus isometric contraction interventions. Including a control group would allow for a more robust evaluation of the relative benefits of each intervention.

Recommendations:

1. **Longitudinal Studies:** Conducting longitudinal studies with larger and more diverse samples would provide a more comprehensive understanding of the long-term effects of stretching and isometric contraction interventions on lower limb flexibility among students.

2. **Objective Measures:** Incorporating objective measures, such as goniometry or motion analysis, to assess lower limb flexibility would improve the accuracy and reliability of the outcomes. Objective measurements can reduce potential biases associated with self-report measures and provide more precise data for analysis.

3. **Comparative Studies:** Future research should include comparative studies with control groups to directly compare the effectiveness of stretching versus isometric contraction interventions. This would elucidate the relative benefits of each intervention and inform evidence-based flexibility training protocols for student populations.

CONCLUSION

In conclusion, the study contributes valuable insights into the effectiveness of stretching and isometric contraction interventions in improving lower limb flexibility among students. While both interventions demonstrated significant improvements in flexibility, several limitations, including sample size, intervention duration, and measurement tools, warrant consideration.

Moving forward, longitudinal studies with larger and more diverse samples, incorporating objective measures, and including control groups are recommended to further explore the long-term effects and comparative effectiveness of stretching versus isometric contraction interventions. By addressing these limitations and building upon the current findings, future research can advance our understanding of flexibility training methods and promote musculoskeletal health among student populations.

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