## Clinical Images Bedside Hand Grip Assessment with the Sphygmomanometer

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A 39-year-old, right-handed man presented with rapidly progressive weakness of his dominant hand. On examination, his grip strength was normal in the left hand and decreased in the right (Fig. 1). He was found to have a left-sided brain tumor, which was thought to explain his weakness.

Routine bedside assessment of grip may not detect subtle changes in strength. Using the sphygmomanometer, clinicians can measure grip strength at the bedside more objectively<sup>1</sup> (Fig. 2). First, the sphygmomanometer is rolled into a cylinder comfortable for the patient to grip at rest. The cuff is then inflated to 20 mmHg, and the patient applies maximal grip force to the cuff. The gauge needle indicates the patient's applied pressure (left hand, about 250 mmHg). In this case, his right hand grip was decreased (right hand, about 110 mmHg). See the online video appendix demonstrating the technique.



Figure 1. Hand grip assessment using index card.

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Figure 2. Hand grip assessment using sphygmomanometer.

This convenient bedside measurement technique has been used in the past to measure grip strength in patients with rheumatoid arthritis, and has been shown to be reliable when compared to the Jamar dynamometer (the reference standard for testing grip strength).<sup>1,2</sup> Clinicians should be aware of this method when assessing subtle changes of grip strength.

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