Your
PHYSIOTHERAPIST
Practice Newsletter

Winter 2007

HOURS

The practice hours are:

MON-FRI: 8.00am - 7.00pm

SAT: 8.00am - 1.00pm

(Please ring for an appointment)

CONDITIONS TREATED

You can have the following conditions treated at our clinic:-

Osteoporosis
Low Back Pain
Sports Injuries
Musculoskeletal Pain
Neck Pain
Arthritis
Joint Pain

SERVICES AVAILABLE

Some of the services available to you are:-

Physiotherapy
Pilates
Remedial Massage
Podiatry
Galileo Whole Body Vibration
Osteoporosis Treatment
Balance Training
Personal Training

FURTHER INFORMATION

HICAPS - on the spot health insurance claims

EFTPOS, VISA, Mastercard, Bankcard

Workcover, TAC, D.V.A.

108 June 2007

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Dear Physio

Q. I developed pain in my wrist near my thumb. Someone said it was something called De Quervain's tenosynovitis.. What is it and what can I do about it?

A. De Quervain's tenosynovitis is inflammation of the sheath around some of the tendons that are attached to the thumb. It is usually caused by overuse involving wrist and thumb movements. Some of the things that may help this problem include:- rest, local physiotherapy modalities, ice massage, a brace to take strain off the tendon, anti-inflammatory medication. In extreme cases a cortisone injection and even surgery may be required.

Q. I went to my physio recently and he recommended Acupuncture for my problem. I didn't know physios did acupuncture. Is that common?

A. Many physiotherapists are embracing acupuncture to try to enhance patient recovery. The Australian Physiotherapy Association now runs courses for physiotherapists to obtain skills in this area. Acupuncture can be a valuable tool. If your physiotherapist doesn't perform acupuncture themself but thinks it may be worthwhile, he or she may be able to refer you to a colleague who does.

Q. Every time I see my physio they give me exercises to do following treatment. I'm pretty lazy. Can't I just go and get my back "cracked" and leave it at that?

A. The prescription of home exercises is a vital part of treatment. Whilst 'hands-on' treatment is very important, you will obtain longer lasting and more permanent correction of your problem if you perform recovery enhancing exercises. By giving you these exercises, the physiotherapist is also showing you how to treat yourself, so that you don't become too dependant on therapists and passive treatment for relief.

Q. How do I know if I have torn a cartilage in my knee?

A. You have two knee cartilages (or meniscus). They are situated between the two knee bones (femur and tibia) and help provide cushioning and reduce friction when the knee moves. These knee cartilages can be damaged by twisting injury or by squatting activity. Pain is noticed either on the outer or inner sides of the knee. Sometimes you can't straighten or bend the knee fully. There may be some swelling of the knee. Sometimes this can be at the back of the knee (Baker's cyst). Special tests carried out by your physio or doctor can help identify a torn meniscus. These days MRI scans can be useful in diagnosing a meniscal injury. Usually surgery is required to trim the tear as most meniscal tears will not heal due to poor circulation in the meniscus.

Q. What is osteoporosis?

A. Osteoporosis is a problem whereby there is reduced bone mass (thin bones) and it occurs commonly in the elderly, especially in postmenopausal women. It can be due to old age but it can also be linked to hormonal problems, poor absorption of nutrients in the gut and a variety ofof other medical problems. It is linked to menstrual problems earlier in life, as well as inactivity and poor bone mass early in life. The big problem with osteoporosis is that bone easily fractures. This causes pain, disability and can start a downward spiral in the direction one's life may take. Weight bearing exercise is important in preventing and treating osteoporosis, as can medication and changes to diet and lifestyle.

Q. What is a deep vein thrombosis?

A. Deep vein thrombosis (DVT) is a blood clot in a vein. The clots often occur in the calf but can be present higher up in the leg and in the arm. They commonly occur due to inactivity, circulatory disturbance or sustained pressure on a vein (i.e. crossing legs for sustained periods). The signs of DVT include calf discomfort, swelling, increased warmth and pain on stretching the calf (Homan's sign). They commonly occur after travelling, surgery or immobilisation (e.g. being in a plaster caste after fracture). If parts of the clot break off, they can become lodged in the lungs or brain. This can lead to death. A DVT is treated by blood thinning medication.

Q. Does the size of the tennis racquet grip cause tennis elbow?

A. The size of the grip on a tennis racquet has often been thought to be a factor in causing elbow pain in tennis players. However recent research (Am J Sports med 2006) suggested that grip size has no real effect on muscle activity and so may not be a factor in developing or affecting tennis elbow. The authors of the study suggested players choose the most comfortable sized grip rather than focusing on the actual grip size.

ARE YOU DUE TO HAVE ORTHOPAEDIC SURGERY?

After most knee, shoulder, hip, back and other joint surgery you should be having physiotherapy to enhance your recovery. Ask your surgeon when you should be starting this (usually as soon as possible). You can also request that you have your physiotherapy carried out at this clinic.

Referring others to our clinic

If you know someone with any of the problems outlined in this newsletter, please let him or her know about our clinic. We are very grateful for any referrals we receive and we will endeavour to provide patients referred to us with the highest quality of care. Physiotherapy offers a safe, gentle and effective treatment approach for a variety of conditions.

The information in this newsletter is for general patient interest. If you have a problem you should get it properly assessed by your physiotherapist or family doctor.

printed by eureka! (08) 8356 1122

Freedom PHYSIO & PILATES

Dear Client,

Welcome to our newsletter and thanks for coming to see us for your physio needs.

Your ongoing health is very important to all of us here at the clinic. We hope that this newsletter will help keep you up to date with information about physio-related health matters that may be of interest to you and people you know. We hope you enjoy it!

If you have any queries, please call us. If you, or someone you know, have a physio related problem, please call us. We would be more than happy to help you out in any way we can.

Please feel free to pass this newsletter on to your family and friends.

With kind regards

The Therapists and Staff at

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Overuse injuries in the leg
What you should know

Many sports people and fitness enthusiasts suffer from overuse injuries of the legs. The term overuse pertains to performing an activity that results in overloading of tissue in the legs. This results in damage to this tissue and subsequent inflammation and pain. Overuse injuries are sometimes difficult to manage because effective treatment requires the athlete to "reduce the overuse". Convincing the athlete to do this effectively is not always easy. A sudden increase in frequency or intensity of activity are the usual causes. However, there are mechanical factors that can be involved.

Lower leg alignment can contribute to an overuse injury. Poor limb alignment can make a person's limb less able to withstand the stresses and strains of activity. For example, fallen arches (pronating rear-feet) can alter the alignment of the whole leg, thus affecting the way stress is transferred through the leg during activity.

Hip muscle control is another factor. Poor hip muscle control affects the alignment of the whole leg. Again, this affects load transfer through the leg.

Core stability is the ability to control the alignment of the trunk during activity. An inability to control your trunk position will alter the way forces are transferred through the legs.

Footwear is another important variable. Poor footwear may lead to foot mal-alignment. However, the ability to provide adequate shock absorption is critical.

The surface involved can also be a factor. Running on hard or sloped surfaces can affect the forces travelling through your legs.

Your general **level of fitness and flexibility** can determine how much activity your legs can tolerate. If you lack conditioning your bones, tendons, muscles and joints may not be strong enough to tolerate the increased loads you want to place on your body. Similarly, poor flexibility will affect how your body moves. Poor movement patterns will also affect how loads are transferred through your body.

What are the common lower leg overuse problems?
These include:-

- Achilles tendon problems
- Forefoot pain
- Patella tendon problems
- Groin pain
- Hamstring problems
- Shin pain
- Knee cap problems
- Stress injury or fractures in the various bones of the leg

Treatment
As indicated earlier, to treat an overuse injury effectively you need to "reduce the overuse". Medical treatment such as using anti-inflammatory medication or gels may be indicated but addressing the factors outlined earlier is very important and your physiotherapist can help you with this. In particular:-

- Consider orthotics if your feet are biomechanically challenged
- Exercises to improve hip control, core stability and flexibility
- Review your activity so that you are not overdoing things. Perhaps consider cross training
- Have recovery strategies in place. For example, having a 48 hour break between running sessions may let your legs recover adequately from each session
- Ice routine (see article on page 3)
- Local physiotherapy modalities and hands-on therapy such as massage and stretching can help

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Are you overweight?

It is sometimes easier for physiotherapists, doctors, patients and their families to "beat around the bush" about this subject. Nobody likes upsetting their patients, family or friends. Often patients "kid" themselves about their weight and don't face up to reality. However, the question may need to be asked "are you overweight?".

Why should this question be asked?
Many musculoskeletal and medical problems arise directly from patients carrying too much weight. In particular, medical problems like diabetes and cardiovascular disease. In the case of musculoskeletal problems, many instances of joint pain, spinal pain and tendon pain can be directly attributed to a patient carrying too much weight.

What a difference a few kilos make.
If the average person was to strap 5-10 kilos to their body and walk around for a few hours, they would notice the difference this would make to the strain going through their spines, hips, knees and feet. Conversely, taking these few kilos away immediately reduces this strain.

How this relates to treatment.
Many overweight people don't get the full benefit from treatment because they continually overload the damaged part of their body due to their excessive weight. Many overweight people suffer from year of chronic pain because they can't reduce the load going through their muscles and joints.

What you should do.
Whilst being overweight can be due to medical problems, many people are overweight due to lifestyle choices. Changing these patterns can be very difficult. Being overweight can usually be linked to either too little activity or eating too much of the wrong food.

Consulting your family doctor about your weight is a good start. Speaking to a dietitian is the next step. Determining your body mass index (BMI) and performing skin fold tests so that you can work out your current state and effectively measure progress is important. Using scales may be misleading. You may actually become a bit heavier as you become fitter initially. This is because increased bone and muscle mass may increase your weight even though you are losing fat.

Properly planned and supervised exercise is very important. As a guide, you should be carrying out exercise for thirty minutes, 3-4 times per week. Beware of overuse injury as your body may take a while to adapt to this increased activity. Your physiotherapist can help you with this or you may like to join a good gym or see a personal trainer.

Did you know?

There are more than 640 muscles in the human body

Do you suffer from heel pain?
Maybe you have planter fasciitis

The plantar fascia is a made up of something called connective tissue. The plantar fascia links the heel to the forefoot and helps support the large arch in your foot. Damage to this tissue causes pain and inflammation in the foot and can be very debilitating.
Sometimes the pain prevents people from walking long distances or running. In severe cases even normal walking may be difficult due to the pain.

Where do you get it?

The common area of pain is in the inside part of the heel. Sometimes, however, the pain may be in the whole of the heel or in the arch of the foot.

Why do you get it?

Overuse is often the cause (see article on page 1). A sudden increase in walking or running often precedes the onset of pain. However, sometimes patients report the onset of pain coming on after one unfamiliar activity, such as spending too long on their feet one day or walking on unfamiliar terrain.

Foot mechanics. A lot of patients with plantar fasciitis have poor foot mechanics. In particular, a fallen or a high arch can be responsible.

Being overweight is a very common predisposing factor. If you are on your feet a lot and are overweight, this will be a potent combination in patients developing plantar fasciitis. Sometimes weight gain is reported by patients prior to the onset of the pain. Starting exercising to lose weight is often a factor. In particular performing too much weight bearing exercise such as walking long distances, running and jumping type activity is commonly involved.

Poor foot wear is often implicated. Poor cushioning, poor support, the incorrect type of shoe for your foot-type, worn out or ill-fitting shoes can all predispose someone to plantar fasciitis.

How to treat plantar fasciitis

1. Weight loss is very important. The sooner you address this the better.
2. Stretching the calf and the plantar fascia restores normal mobility in the tissue and promotes the formation of organised/ properly aligned scar tissue. Rolling the foot on a ball can help stretch the plantar fascia also.
3. You need to address your footwear. Purchasing good supportive and well cushioned shoes is important. Replacing these regularly is also critical.
4. Orthotics and strapping can hold the foot in better alignment thus reducing the load going through the plantar fascia.
5. Local physiotherapy modalities can help hasten recovery.
6. Sometimes medication, cortisone injection or surgery is required to overcome a particularly troublesome case of plantar fasciitis.

Do you need Orthotics?
If you have biomechanical problems with your feet, orthotics (shoe inserts) can help you realign your feet to take the pressure off your joints and soft tissues. Ask the physiotherapists at this clinic to assess you. We can help arrange either off the shelf or custom made orthotics.

What types of conditions can a physiotherapist help you with?

Many patients are unaware of the many conditions that can benefit from physiotherapy.
Below is a list of some of the common problems that we help deal with:-

◆ Back and neck pain ◆ Headaches
◆ Sprained ankles ◆ Injured knees
◆ Arthritic pain and stiffness ◆ Shoulder pain
◆ Tennis elbows ◆ Tendon problems
◆ Muscle tears ◆ Hand and foot problems
◆ Bruising ◆ Fracture rehabilitation
◆ Rehabilitation after joint replacements
◆ Rehabilitation after joint and bone surgery

If you have any of the above problems, and you want to improve as quickly as possible, have an assessment from one of the physiotherapists at this clinic.

10 ways you can keep your neck pain under control

Neck pain is a very common complaint. Whilst physiotherapy treatment can help neck pain, it is very important that you learn to help control and manage the problem yourself. Here are some things to consider:-

1. **Poor posture** can cause and re-aggravate neck pain. Learn how to maintain good posture during common activities such as reading, watching TV, sleeping and working. This will reduce neck strain.
2. **Overuse** can over-stress the neck structures. Performing the same activity repetitively is unwise. Try to break up and vary your activity from time to time. Examples when overuse can be a problem include painting, gardening, practising your sport (e.g. tennis, golf), lifting, lifting weights and work activities.
3. **Poor muscle control** may lead to fatigue and sub-optimal neck function. Strengthening your neck muscles can help you control your neck problem.
4. **Treatment can often help.** Arrange to have treatment on your neck when problems arise or if your neck begins to deteriorate. Don't leave it until problems become severe.
5. **Heat and massage** are useful self treatment techniques. Heat often helps muscle spasm or tension. Rubbing creams with salicylate (aspirin) in them can give good localised relief.
6. **Regular breaks are important.** Try to divide your activities into small chunks and have breaks in between. Performing gentle stretches and range of movement exercises (as prescribed by your physiotherapist) can be very useful during these breaks. Also, get up and walk around regularly.

7. **Your chair is very important.** Make sure you have a good chair for work, study or when at the computer. Your chair should have a good lumbar support, height adjustment and adjustable arm rests.
8. **Computer height is important.** It should be at eye level and not too far away. You shouldn't have to twist your neck to use your computer. You should have a document holder, good light and the keyboard should be at elbow level. Your physiotherapist can provide specific guidelines about setting up your work station properly.
9. **Avoid tension whilst working.** When you are tense or you are over using the wrong muscles, it will put increased stress on your neck.
An example of this tension is when you shrug your shoulders and hold this position. You will feel the tension in your neck . When you relax from this "shrugged " position and let your shoulders drop down and relax, this reduces this tension. Learn to relax these "shoulder-neck" muscles.
10. **Improve your neck flexibility.** Reduce neck stiffness by stretching tight neck muscles and joints. A stiff neck is less able to withstand strain and loading. Have your physiotherapist show you what exercises you should do.

A regular "tune-up" can help you stay feeling better

If you have a chronic or recurrent problem, such as back pain, neck pain, headaches or arthritis, a regular "tune-up" may help you enjoy life more.

Most of these problems mentioned respond very well to a course of physiotherapy. In conjunction, your physiotherapist will usually give you self treatment exercises, to help you improve your problem and maintain this improvement.
Unfortunately, spinal problems and arthritic pain can recur and can make your life miserable. If this is the case with you, or someone you know, then regular maintenance treatment (or "tune-up" sessions) should be considered.

"Tune-up" sessions will help keep your joints mobile, will release tight muscles and will update your self treatment exercises, so that they are giving you maximum benefit.
Many patients find that a tune-up session every few weeks can help keep them feeling good and stop them having repeated acute episodes of pain.

It is also more cost effective than having extensive treatment to overcome an acute episode of pain.

If you feel you would benefit from regular maintenance treatment, please ring to book a time to discuss this with your physiotherapist.

If you feel you would benefit from regular maintenance treatment, please ring to book a time to discuss this with your physiotherapist.

Good first aid will get you back on track sooner

If you suffer an injury, a knowledge of appropriate first aid will minimise bleeding and further damage. This in turn will help you overcome your injury as quickly as possible.

The basics of first aid can be summed up by remembering RICER for the first 48 hours. This stands for:-

REST the injured part so that no further damage can occur. This may mean stopping work or sport immediately and it may also mean applying some sort of splint to prevent movement of the injured part.

ICE should be applied to the injured part for 15-20 minutes, every 30-60 minutes, to slow down bleeding and swelling. Make sure you avoid an ice burn by wrapping the ice in a damp cloth, so that it does not directly contact the skin.

COMPRESSION will also help reduce swelling and bleeding . This can be done by wrapping a bandage around the injured part or by compressing the injured site with your hand.

ELEVATE the injured part so that bleeding and swelling flow away from the injured part.

REFER the injured person to a health professional for further assessment and management. This would usually mean to your family doctor or your physiotherapist.

Physiotherapists are experts in managing sports and soft tissue injuries such as bruises, sprained ligaments and strained muscles.

Carry on this protocol for the first 48 hours after an injury. Also, during this time, avoid HARM. This means avoid Heat, Alcohol, Return to activity and Massage until you are sure bleeding and swelling have stopped.

Did you know?

There are approximately 45 billion fat cells in an average adult.