

May 2008

When It Feels Like More Than a “Cold Shoulder”



Because your shoulder provides the greatest range of motion of any joint in your body, it is more susceptible to a wide variety of injuries, including **rotator cuff tears** and a condition called “**frozen shoulder**.” Some common reasons for shoulder pain include **overuse and repetitive motion, sudden trauma** and **degeneration due to aging**. Symptoms of shoulder injuries include

- **pain;**
- **numbness;**
- **tingling;**
- **weakness;** or
- **difficulty with range of motion**, which can make daily activities, such as combing your hair or reaching for something, painful.

Tears that occur in the tendons and muscles of the shoulder that lift and rotate the arm are called rotator cuff tears. Left untreated, these muscles can develop scar tissue and, over time, lead to a significant loss of function.

“Frozen shoulder,” where the shoulder becomes stiff and immobile, often occurs for no known reason. It is more commonly associated with a variety of serious illnesses, including diabetes, thyroid problems, heart disease, Parkinson’s disease and even clinical depression. When shoulder injury or surgery is followed by prolonged joint immobilization, the risk of developing a frozen shoulder is highest.

Because frozen shoulder is often mistaken for rotator cuff tear, diagnosis may be difficult. Depending on the nature of your injury, your age and activity level, **treatment may include nonsteroidal anti-inflammatory drugs (NSAIDs) to reduce swelling, ice and heat therapy, cortisone injections or surgery.**

In addition, **ongoing physical therapy** can help improve shoulder mobility. We can develop a plan of stretching and range-of-motion exercises, accompanied by education and support, to help you during recovery.

May 2008

Spring Into Fitness



As the days get warmer and longer, it is natural to want to spend more time outdoors. And outdoor summer sports provide the perfect opportunity to spice up your fitness routine.

It is easy to transfer your indoor gym routine to the great outdoors. Tired of the treadmill? Go hiking. Head spinning from spinning class? Consider mountain biking or bike touring in the countryside. Swimming, rock climbing, canoeing, rowing, waterskiing—just about any outdoor recreational activity can be considered exercise.

It is important to remember, however, to develop a transition plan from a winter to summer exercise program. We can help you with this plan, as well as explain how to avoid injuries when taking on these new activities.

The following tips can help you ease into your new program:

- **Set clear, realistic goals for your fitness program.**
- **Do not try to do too much, too soon.**
- **Make exercise a priority. It may be tempting to lie in the sun, but get active!**
- **Hydrate! Drinking water is even more important in the heat of the summer.**
- **Avoid exercising during the heat of the day.**
- **Learn proper techniques to avoid injuries. Consider taking lessons if you are trying something new.**

And, as always, consult us before starting any new exercise program.

May 2008

Does Minimally Invasive Knee Surgery Mean Minimal Pain?



When a surgeon uses smaller incisions and makes fewer muscle cuts to replace a knee, the procedure is called **minimally invasive**. While you can expect postoperative pain, your surgeon, working with us, can help you manage and minimize it very effectively. But it is important to realize that you have had very significant knee surgery!

Your doctor will undoubtedly prescribe pain medications following surgery. **Pain control is important for your comfort**, and without it, you would find it difficult to begin your physical therapy, which is crucial.

Within 24 hours after your minimally invasive knee replacement surgery, you will likely be able to get in and out of bed and use a walker to navigate a long hallway. You might not even have to stay in the hospital overnight.

Physical therapy usually begins within 48 hours after surgery and continues for months. You will have home physical therapy until you can drive to outpatient appointments. And you'll be climbing stairs and walking with a cane or crutches within a few days. As your therapy progresses, your discomfort will lessen, and your medication doses can decrease.

Because participating fully in postsurgical physical therapy is so important, do not be tempted to try to prove to yourself, or anyone else, how "tough" you are by tolerating pain. By taking the medications prescribed by your doctor as needed, you will have a more comfortable physical therapy experience and resume an active lifestyle more quickly.

May 2008

Get In the Swim for Back Pain



Back pain can carry a double whammy. Painful back muscles may prevent you from exercising comfortably. But a lack of exercise may inhibit your back from healing and may actually make the condition worse. Swimming can be an excellent solution to your problem. Fortunately, swimming provides a great full body workout.

- **Water counteracts the forces of gravity, taking pressure off the spine.**

- **You get an excellent cardiovascular workout and increase blood flow to affected areas, without the stress on the joints that jogging causes.**
- **And the resistance training you get by pulling your body through the water helps you strengthen your muscles, which may relieve certain forms of back pain.**

But you cannot just dive in to a swimming program if you suffer from back pain. Repetitive or awkward movements in the pool have the potential to aggravate your pain. You need to **be sure that your swimming style fits your needs.**

Depending on your situation, other activities may be more appropriate.

- **Water aerobics**, which includes marching in place, jumping jacks and movements mimicking cross-country skiing, accomplishes many of the same goals as swimming. The workout may also incorporate equipment such as flotation devices.
- **“Dry-land” exercises**, such as walking and stair climbing in the pool, may also prove effective.

Before beginning any program to relieve back pain, consult us. We can custom design a program that addresses your specific needs while considering your personal preferences.

May 2008

Why Does My Right Elbow Hurt When I Lift Things?



Even if you do not play a racquet sport, you might have lateral epicondylitis, or “**tennis elbow.**” This is the common term for the painful irritation or degeneration of the tendons that connect the elbow muscle, known as the extensor carpi radialis brevis (ECRB), to the bony bump on the outer part of the elbow (the epicondyle).

Tennis elbow is caused by chronic overuse, whether it is from recreational activities like hitting ground strokes or from occupations that require raking leaves, painting walls, weaving or cutting meat. Most often, it occurs in the elbow of your dominant side.

The ECRB is used when you extend or lift your wrist or hand, so tennis elbow **can make its presence felt when you lift anything, heavy or light.** Once tennis elbow is definitively diagnosed, treatment can begin. First, to relieve pain, you can apply ice; take acetaminophen or a nonsteroidal anti-inflammatory drug (if ordered by your physician); avoid, as much as possible, activities that cause flare-ups; and use orthotics, such as a counterforce brace or a wrist splint, to reduce strain on the affected muscles and tendons.

When the pain is better controlled, we can reduce the chance that the symptoms will return. Physical therapy strategies include

- **evaluating your activities and modifying repetitive motions, if necessary;**
- **gradually strengthening your forearm and wrist muscles, often including an emphasis on lowering weights (negative actions);**
- **stretching and range-of-motion exercises;** and
- **wearing a device to keep your wrist straight during lifting or tennis strokes, to encourage the use of the stronger upper arm muscles instead of the smaller forearm muscles.**

We can help you properly execute an exercise program to achieve maximum satisfaction while minimizing discomfort.