

November 2015

Walking the Plank for Core Strength



You don't need to be a pirate to engage in plank exercise. In a plank exercise, you move your entire body into a certain position and hold it for a given length of time—a duration that increases the more experienced you become. An excellent way to **strengthen** your core (trunk-stabilizing) muscles, plank exercises help prevent or ease lower back pain and, as a bonus—especially if you want to enhance your appearance—help **flatten** your abdominal muscles.

Plank exercises help **prevent injuries** that may occur when you engage in sports or other strenuous activities. Instead of “rehab,” as in rehabilitation, think of plank exercises as “prehab”—as in prehabilitation. The goal is to become as fit as possible so you can withstand future impacts, twists and missteps that might otherwise cause lingering physical problems.

You can benefit from many varieties of plank exercises. There are, for instance, a number of different kinds of **side planks**, which you perform on your right and left sides. For some planks, you lie **on your back**, while others are performed **facedown**, supporting yourself on your hands or arms and feet or knees. The benefit from these exercises comes from using not only your limbs and extremities for support but also your internal core muscles, which become stronger as you perform the planks. Some planks, called **dynamic planks**, involve motions such as small leg lifts carried out from a front or side plank position.

Whether the planks are dynamic or not, knowing the right body form—down to the last inch—is essential to avoid injury and ensure the **greatest benefit** from your hard work. We can devise a regimen that includes the best plank exercises for your body, your current fitness level and your fitness goals. By integrating plank exercises into your overall fitness program, you will be well on your way to a level of core strength you never imagined.

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Lose Your Balance, Gain Your Balance



Feeling off-balance can put your world into a tailspin—literally and figuratively. Balance disorders have a long list of causes: inner-ear problems, cognitive or spinal cord injuries, muscle weakness or damage, diabetes, Parkinson disease and even simple aging. Regardless of the cause, balance disorders can put people at **high risk for falls** and **disrupt daily activities** due to fear of provoking symptoms.

Physical therapy can **effectively treat** balance disorders, but sometimes patients find the methods we use a bit disconcerting. These may include forcing you to lose your balance or making you perform exercises that exacerbate your dizziness or vertigo. However, there is a method to our apparent madness.

Your body's balance depends on an intricate working relationship between your central nervous system and your inner ear, eyes, muscles and sense of body position, called proprioception. When even one of these begins to work improperly, major problems can occur.

Luckily, your brain can adapt to changes through a process called vestibular compensation. This doesn't always happen easily, however, and that's where physical therapy comes in: Through **vestibular rehabilitation therapy**, we can help encourage this compensation. The best way to do this is by performing exercises that provoke your symptoms of imbalance, allowing your brain to experience error and figure out how to correct it.

At the same time, we can address any postural problems or muscle weakness that could contribute to your poor balance. We will **develop a plan** that takes into consideration your individual needs and challenges, and ensure that the exercises are performed in a safe environment.

While vestibular rehabilitation therapy may take you out of your comfort zone at first, this is exactly what it is supposed to do—challenge your brain and body to figure out a new way of keeping you stable. We are here to **guide you** through the process, which should result in a better, balanced you.

November 2015

Put Your Finger on Flexor Tendon Recovery



Flexor tendon surgery involves the tendons in charge of bending the fingers or thumbs into the palm of your hand. These tendons let you grip a pencil and hold a fork and knife. That is why your hand must be allowed to **heal properly** after flexor tendon surgery. The awkward-looking splint you have to wear after the procedure helps do just that.

The splint—which you will be instructed to wear continuously for three to six weeks, followed by nightly and/or intermittent use for a few weeks thereafter—keeps you from straightening your fingers and overstretching the repaired tendons. In the initial healing stages, the tendons could possibly **pull apart the repaired portions** or, in the long term, lead to less flexibility and mobility in the fingers.

Wear the splint **exactly the way** your surgeon has instructed, keeping it away from water and heat to prevent the material from losing its shape. Of course, if the splint starts causing significant discomfort or becomes damaged in any way, call your physician as soon as possible.

Physical therapy, the other essential component of successful healing after tendon surgery, will begin while you still wear the splint. In fact, gentle movement in the early days after surgery helps inhibit the tendon from getting “stuck” in its tunnel, while **reducing stiffness and swelling**. These exercises help prevent the scar tissue formed after surgery from becoming hard and inflexible. Because the wrong type of movement can impede your recovery, these exercises must be performed correctly.

We can show you how to move your hand and fingers so your stitches won't be disturbed or cause you unnecessary discomfort. And be patient: It can take up to 12 weeks to fully recover from tendon surgery—half of them spent in that awkward splint. Under our guidance, you will be able to focus on the long-term goal of a **healthy, flexible, strong grasp** that can hold free weights and ice cream spoons with equal success.

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Metatarsal Fracture: Putting Your Foot in It



Perhaps you stubbed your toe or incurred a foot injury while participating in sports. Your doctor has called it a **fifth metatarsal avulsion fracture**, but you are unsure what is meant by that term. A fracture is a break in the bone, and your fifth metatarsal is the long midfoot bone on the side of your “pinky” toe. Of all the bones in the foot, this is the one most commonly fractured. Three fracture types strike the fifth metatarsal most often:

- A **Jones fracture** usually affects athletes and occurs in a particular spot that receives limited blood supply.
- A **stress fracture** results from repeated impact to a specific area, causing a hairline break to develop over a relatively long time.
- An **avulsion fracture**, sometimes called a dancer’s fracture, happens when an attached ligament or tendon pulls off a small piece of the bone near the base of the metatarsal.

Treated properly and promptly, most metatarsal fractures will heal well. Treatment of your fifth metatarsal avulsion fracture begins with ascertaining if you can still evert your foot (turn it outward and roll it toward the pinky toe side). If you can, you have not suffered bone displacement, meaning the fracture can most likely be managed conservatively, without surgery.

First, we **reduce pain and swelling** with ice and anti-inflammatory medication. Then you will wear a therapeutic immobilizing boot for about six weeks, followed by a series of **rehabilitation exercises** we design to rebuild your foot’s strength and range of motion. An exercise program can make the difference between future **proper foot function** and possible long-term complications, such as chronic pain, malunion (improper healing of the fracture) and instability. Such exercises may include

- **gentle stretching**, such as “drawing” the alphabet with your big toe, for range of motion
- **towel curls**, in which you sit in a chair, with your heel on the ground, and use only your toes to reach for a towel just in front of you

For any serious injury to your foot, see us right away to begin treatment promptly. With our help, you can get back on your feet and back to the activities you love.

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Using Physical Therapy to Treat Multiple Sclerosis



Multiple sclerosis (MS)—a chronic, often progressive neurological disease caused by the loss of myelin, the protective material that sheaths nerves—has no known cure, but stabilizing and improving a wide variety of movements through physical therapy can help control MS symptoms and **enhance quality of life**. In fact, it is important to consult us as soon as possible after a diagnosis of MS. Early intervention can often improve the initial difficulties—with walking and balance, for instance—and possibly even slow the disease’s progress.

Along with the other health care professionals on your team, we will custom design appropriate exercises for you. We can take advantage of remission periods you may experience and **plan exercises** to build your endurance and strength while you are able to perform them, to carry you through and beyond that particular remission.

At other times, when you feel less stable, a physical therapy exercise regimen can help you build **strength and stamina**. The following activities can help reduce your fatigue, weakness and pain, as well as improve balance, comfort and efficiency while performing daily activities, flexibility, mood and the use of a cane or walker:

- **Pool-based aquatic exercise:** MS patients often find aquatic exercise comfortable and helpful, especially if breathing difficulties exist. The water provides a gentle resistance during arm and leg motions, which helps build muscle strength.
- **Use of a stationary bicycle, rowing machine or treadmill:** Exercise programs for MS patients using these machines help keep muscles strong to counteract the effects wrought by problems in the nervous system.
- **Yoga and tai chi:** These ancient practices can be soothing as well as beneficial in managing MS. In addition, they offer gentle ways to calm one’s mind while strengthening the body.

No matter what the stage of your MS, we can create an **individualized physical therapy plan** for you to help manage your condition optimally.