

## DECOMPRESSION THERAPY – What is it Really????

Spinal decompression is traction. It has been used for many years and is covered by many insurance companies. The use of decompression therapy is FDA approved in the category of traction for the treatment of back pain. It is performed by a mechanical force creating a distraction of soft tissue or joint separation. Decompression/traction is controlled through the amount of force, length of time and angle of pull. Decompression/traction is a passive modality that may help people who suffer with chronic pain initially overcome an acute flare up. Due to the chronicity of many back conditions, active rehabilitation and staying consistent with a home exercise program offers the best long term outcomes.

One study attempted to support solely decompression/traction therapy. 219 patients received decompression/traction therapy but some also received epidural injection, bracing, oral medication and job modification. 86% of the patients had a favorable outcome for the first 90 days. Unfortunately, no one was followed up for outcome assessment beyond 3 months, thus true results for relieving chronic pain could not be reported.

Remember decompression/traction is a passive procedure; it does nothing to assist in strengthening and reconditioning trunk and core muscles. Chronic conditions such as degenerative disc disease, arthritis, spinal stenosis and bulging discs are conditions that have some permanent instability. Since we are faced with a compressive force of gravity all day long, after a few treatments of decompression/traction, we must progress to conditioning our supportive muscles. You must be actively involved in taking care of yourself. If you have any questions regarding decompression/traction, give us a call.

## OUCH! SHIN SPLINTS

A common ailment in the beginning of an exercise program is developing shin splints. Shin splints, stress fractures and other over use injuries have a common mechanism of development. Understanding the circumstances that lead to these injuries is the key to preventing them.



Shin splints are characterized by pain in the lower 1/3 of the shin. The pain is felt on the bone and can develop inflammation of the layer of bone called the periosteum, as well as inflammation to the fascia and muscles around the lower leg. The repeated running cycle of pounding and pushing off results in muscle fatigue which may then lead to higher forces being applied to the fascia.

When dealing with overuse injuries, it's important to look at the entire chain of movement. This includes ankle, knee, hip and pelvis. An over pronation or turning in of the foot can be a primary cause of developing shin splints. Poor sacroiliac mobility or loss of range of motion in the knees, as well as tight gluteal, calf and hamstring muscles can predispose a person to shin splints and other injuries.

If you are having symptoms of shin splints or any other muscular or skeletal pain, we will be happy to evaluate your condition and get you on the road to recovery. We treat advanced athletes, weekend warriors as well as the senior athlete. We always work with your primary care physician or health care provider.

## Events Update

We were busy through the winter months with some events outside of clinical treatment which were fun and informative. Here is an update of the results of some of these activities. Take a look at some of our **upcoming events**; we hope you can participate in these.

•**Golf Improvement Clinics** (Jan, Feb and March) we worked with Professional Golf Instructor Pat Tyrpak and had full classes 2 times a month through the winter to help golfers improve swing mechanics and the physical restrictions keeping them from playing at their best.

•**Pee-Wee Football Combine** (January) we helped the Medina Bees Youth Football put on their first combine to help direct their off season training

•**High School Athletic Combine** (February) We organized an athletic combine based on the NFL Football combine to assess athleticism in high school athletes and direct their off season training. Our featured guest was former NFL player Tom Lopienski. We had over 80 athletes from 14 different schools participate with some impressive scores. Just a few examples: best 40 yard dash of 4.56 seconds, best vertical jump of over 33 inches, and best broad jump of 9 feet.

•**Little League Baseball Clinics** (January and February) instructed baseball players in injury prevention, dynamic and static stretching, athletic stance, shoulder strength and rotational exercise.

•**Second Annual Health and Fitness Fair** (February) Hosted in our clinic in open house fashion visitors could test fitness parameters with standardized test to see where they compare to national averages based on age and gender as well as receive a free body composition analysis.

•**Chronic Back Pain Seminars** (January and March) Participants received instruction on body mechanics and participated in mobility and stability exercises to better be able to actively participate in self managing their condition.

## ★★★ Upcoming Events ★★★

•**Yoga Fitness Classes** Tuesdays 7pm, Thursdays 6 pm; call to register (see back of newsletter for more info on this)

•**Injury Prevention and Performance Improvement Clinics** coaches and athletes can call to schedule these clinics which include ACL injury prevention, jump and land mechanics, true athletic stance, reactive exercise and can be individualized to the specific sport.

•**Pee Wee Football Combine** we will be repeating the tests for the Medina Bees Youth Football program to assess their progress from the last combine.