

TOTAL NEWS AUTUMN 2023



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BACK PAIN



Back Pain is the most common condition we treat at Total Physiotherapy, which is no surprise given up to 80% of people will experience back pain at some time in their life. Here we discuss some back pain myths and misconceptions and, most importantly, how to recover from an episode of back pain.

Back Pain and Misconceptions:

"I have hurt my back, so I need to rest in bed"

For the first few days after hurting your back, avoid aggravating activities. A balance of rest and movement may relieve pain.

Prolonged bed rest is associated with higher levels of pain, poorer recovery and greater absence from work so keeping active is the key.

"More pain = more damage"

Logically you would think that the worse the pain, the worse the damage, however, this is not the case. There is substantial research that tells us that two people can have similar back problems but very different reports of pain.

It is important to work with your physio to understand why and how your protective mechanisms are working.

Cont. on next page

BACK PAIN MYTHS AND MISCONCEPTIONS CONT'D

"I need an X-ray or scan to find out what is wrong with my back"

Imaging for back pain is indicated only in a small percentage of cases, as the research shows consistently that it is not so much how the structures appear that results in pain, rather, how your body responds to any changes.

".... so if I don't need a scan, how does the physio know what is wrong with my back"

Physiotherapists are trained to accurately assess for serious causes of back pain. This includes inflammatory arthritis, fracture or significant nerve compression, and when to refer onwards.

90% of people presenting for treatment of back pain are classified as having non-specific lower back pain, where there is no one specific structure or pathology driving the pain.

Research suggests it is not possible OR necessary to identify which specific tissue (e.g. disc, facet joint, muscle) is the source of pain in order to manage it effectively. The key is to help you regain pain-free movement and the correct muscle strength and control to return to your daily activities, work and sport without pain.

"Now I have hurt my back, it will be a problem forever"

While lower back pain can be very painful and restrictive initially, most people make a good and rapid recovery. There are some indicators that identify people who may experience longer term problems in the early stage of back pain. An assessment and the correct advice from your physio is often enough to help you on the path to recovery and avoid long term pain. Most people recover within 6 weeks.





"Everyone has a different piece of advice for fixing my back - how do I know what to do?"

It is true that there are many tools in the toolbox that can help you recover from back pain. Friends and family will often swear by one technique or exercise but that may not be the best for you. Your physio will assess you and treat you with the techniques most likely to help your pain. Sometimes a few different strategies need to be tried or combined to get the best result.

"I've tried everything and I still have pain - do I need surgery?"

Surgery is only necessary for a tiny proportion of those with back pain. Your physio will communicate with your GP if an opinion from a surgeon is required. Consulting a surgeon does not necessarily mean you will have surgery. They may advise on alternative medication or an injection or set a time frame for following conservative treatment.



The experienced team at Total Physio are up to date with the latest in evidence based practice for treating back pain. Treatment options for pain relief and improving movement include massage, heat, acupuncture or dry needling, joint mobilisations, taping and exercises.

FREQUENTLY ASKED QUESTIONS

What is the one thing you would tell people to do, to reduce the likelihood of back pain occurring?

Stay healthy, stay fit (don't do too much at once, and don't do too little), maintain a neutral posture, look after our mental and physical health, enjoy life. Overall, stay healthy, happy and balanced.

What are the best core exercises to alleviate lower back pain?

It depends on the mechanism of your lower back pain (LBP), your baseline strength and if your back pain is acute or chronic. If your LBP is a disc injury and it is quite aggravated, extension type stretches would be best e.g cobra stretch.

If it is an acute joint injury or mechanical dysfunction, flexion type stretches e.g. child's pose, forward fold, leaning forwards in a chair, would be the way to go.

If your LBP is mechanical/non-specific, or you are ready for strengthening there are many exercises: For example 4 point kneel hovers, back extension which will help to improve core control and mobility.

Your physic will explain the exercises most likely to help you recover and prevent recurrence of injury.



Top Tips

Keep moving! Gentle movement and short walks, combined with relative periods of rest will help with recovery. Change position or stand up every 10 - 20mins if sitting down in a chair.

Stay positive about your recovery. Lower back pain can hurt a lot, however, most of the time it does not mean something serious has happened. It will improve with time.

Keep doing your usual activities with modifications if needed. It is safe to do so and it will help the recovery process.

Take over the counter pain relief such as Panadol to help with sleep and movement.

Don't keep your back rigid or try to brace your trunk muscles when doing simple tasks such as walking or sitting.

Avoid lying flat on your back for extended periods of time during the day.

Don't overstretch the painful area. Lower back pain needs gentle movement and sometimes can be aggravated with aggressive stretching exercises. Instead, gentle movements and light stretches are recommended.



TOTAL TEAM NEWS

Congratulations to the Head Above Water team from Total Physiotherapy, Laura, Mairi, Louise and excolleague Chris who help to raise much needed funds which will go towards mental health fitness programs for people who need it most on the Northern Beaches.



OUR LOCATION

GETTING TO TOTAL PHYSIOTHERAPY MANLY VALE

Conveniently located on Condamine Street directly opposite the Caltex Service Station and 200m up from Dan Murphy's.

We are on major bus routes between the City and Northern Beaches. Park on Condamine Street, surrounding local roads (please check road signs for clearways: 6-10am; 3-7pm) or nearby Coles or Dan Murphy's carparks.

There is also parking available in our underground car park accessible from Somerville Place.

Please ask reception for specific details.

295 Condamine Street, Manly Vale 2093



OUR TEAM

PHYSIOTHERAPISTS

All our Physiotherapists are experienced in treating a wide variety of musculoskeletal and sporting injuries. They all attend ongoing continuing education in specific areas which leads to a special interest in treating certain conditions or particular sports.

Donna White: Physiotherapist, Masters in Sports Physiotherapy. Special interest in sports, back and shoulder injuries, with extensive research into sailing and gymnastic injuries.

Louise Henderson: Physiotherapist, Pelvic floor, sacroiliac joint and pelvis particularly in post natal women.

Rebecca Rutherford: Physiotherapist, Pelvic Floor, Pilates Instructor and rehabilitation

Laura Wickens: Physiotherapist, Pelvic Floor and Pilates Instructor.

Jane Leathwood: Hand Physiotherapist and Pilates Instructor.

Fiona Elliott: Physiotherapist with an interest in treating children (paediatrics). Masters of Advanced Paediatric Physiotherapy.

Lucy Cathcart: Physiotherapist with an interest in acute pain, neck injuries and rehab of lower limbs and paediatrics.

Gunda Lehmann: Physiotherapist with an interest in general physiotherapy, hydrotherapy and an expertise in the treatment of lymphoedema.

Jacquie Ryder: Physiotherapist, Masters of Musculoskeletal Physiotherapy. Interest in the management of complex musculoskeletal conditions.

Stella Callintzis: Physiotherapist with an interest in paediatrics, which she is currently pursuing further studies in.

Margo Joyner: Physiotherapist with experience in antenatal education and postnatal exercise.

Sarah Pedersen: Physiotherapist with special interest in neck, shoulder and upper back injuries as well as an interest in assessment and management of scoliosis.

EXERCISE PHYSIOLOGIST

Nathan McGrath: Exercise physiologist

MASSAGE THERAPISTS

Clara Thompson: Remedial and sports massage therapist.

Ricky Mediavilla: Remedial massage therapist.

ADMINISTRATION TEAM

Cindy Menzies, Martelle Laws, Annette Wiley, Tully White, Angelika Geohring, Mary Fogarty, Sandra Kaplan, Hanako Greuter, Jessie Purvis, Kerry Lehanneur.

Bookkeeper: Mel Keown.



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