



# MOVEMENT FOR LIFE® NEWSLETTER

## TIPS FOR PREVENTING PAINS AND STRAINS IN THE OFFICE

Is your job causing you pain? Maybe it's not the work itself but your office environment. While you're hard at work, poor daily habits may be taking a serious toll on your well-being. Workplace injuries, including musculoskeletal disorders such as tendonitis and carpal tunnel syndrome are often painful reminders of the effect that hours of poor posture and awkward motion can have on the body.

In 2006, the Bureau of Labor Statistics reported 357,160 cases of work-related musculoskeletal disorders that resulted in lost workdays. In addition, the Journal of American Medical Association found that costs associated with common pain conditions and lost productivity in the U.S. are estimated at \$61.2 billion per year.

While office injuries have become more common, many can be minimized or prevented entirely through the principles of ergonomics, or the science of designing work environments to better fit the capabilities of the individuals using them. Practicing proper ergonomic principles at work helps ensure comfort, increase productivity and reduce health issues, such as stress injuries, back, neck and shoulder strain and muscular pains.

*"Employees are spending more time behind a desk and in front of a computer screen, making office aches and pains more common,"* says Kevin Butler, board-certified ergonomist and

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## YOUTH SPORTS CONCUSSION

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Sports concussion continues to be a hot topic in the media. Medical technology and research have advanced to a point where significant insight into the damage done to the brain is being discovered on a regular basis. New criteria for diagnosis, and recommendations of care are now more conservative based on this knowledge, especially for younger athletes. In fact, youth and teens are quite different than adults when it comes to head injury. Here are some facts you may not be aware of:



- Teens may have cognitive symptoms, even if there are NO physical symptoms.
- 90% of concussions DO NOT result in loss of consciousness.
- Youth take longer to heal than adults, due to developing brain
- Female athletes may be at a higher risk of concussion than male athletes.
- A high school athlete with a concussion TRIPLES their risk of having another.

Concussions are often under-reported, because many athletes, parents, and coaches are simply not aware of the signs and

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include getting in or out of bed, washing your hair in the shower, gardening activities, going to the dentist or beauty parlor.

## ROCKS IN YOUR HEAD

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### JUST ONE COMMON CAUSE OF DIZZINESS

Benign Paroxysmal Positional Vertigo is a common disorder of the vestibular (*also known as the inner ear*) system most commonly resulting in vertigo or dizziness. With this condition, small calcium carbonate crystals called otoconia (rocks), which are a normal part of your inner ear, get dislodged and move into one or more of the semicircular canals of the inner ear where they don't belong.

When this happens you develop Benign Paroxysmal Positional Vertigo, or what is known as BPPV. That is a mouthful! But, what does it mean? The word Benign is used because BPPV is not life threatening, Paroxysmal because the vertigo comes on quickly and is short lived (*usually less than one minute*), Positional because symptoms are brought on by specific movements of your head or body (*i.e. - rolling in bed, lying down, bending over and looking up*) and Vertigo because it causes a spinning sensation.

The most common complaints associated with BPPV include:

- Balance Problems- 57%
- Vertigo- 53%
- Trouble walking- 48%
- Lightheadedness-42%
- Nausea-35%
- Blurred vision, floating, inability to concentrate- <20%

Common situations in which BPPV symptoms can be provoked

Though the vertigo associated with BBPV is short lived it can be intense enough to cause severe dizziness, imbalance, and nausea. Chronic problems such as

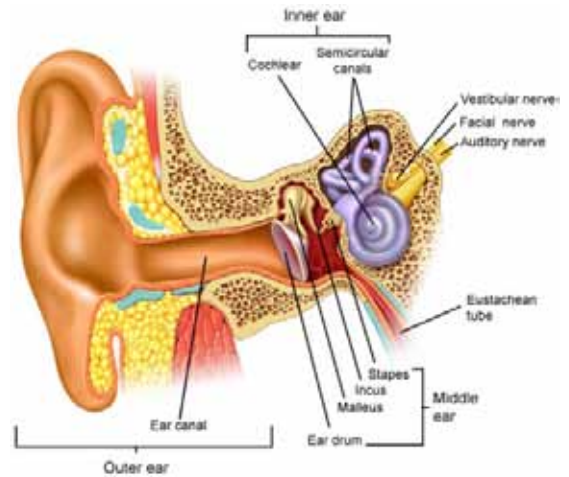


Figure 1. Diagram of the Inner Ear

balance and lightheadedness can continue to occur even after the episodic vertigo has stopped. Therefore, it is critical that a proper balance assessment and balance retraining be instituted to help manage those people whose balance problems continue to persist.

Spontaneous recovery can occur in ~30% of those affected by BPPV over a period of weeks. However, there is no need to wait. BPPV is easily diagnosed and treated with simple movement-based procedures that can be done by a vestibular trained Physical Therapist. Any individual with BPPV is encouraged to seek treatment early in order to avoid episodes of vertigo that can be frequent and potentially debilitating. Successful treatment of BPPV is based on correctly identifying several factors:

- Which semicircular canal is effected (3 in each inner ear)?
- Which side or ear is affected?
- Which form (typical or atypical) of BPPV you have?

With proper treatment, remission of BPPV is generally > 90% with most people getting complete resolution within 1-2 physical therapy treatments. Possible complications related to treatment are rare. It is important to point out that treatment for BPPV is a management technique and not a cure because reoccurrence can occur in about 47% of people. Reoccurrence is shown to be higher in older individuals and following head trauma.

If you know of anyone suffering from vertigo or other related symptoms, we are here to help.

# TIPS FOR PREVENTING PAINS AND STRAINS IN THE OFFICE

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consultant for Fellowes, Inc. "Poor habits such as slouching, reaching across your desk or bending your wrists up when you type can unknowingly cause stress on the body and lead to more serious medical conditions."

Butler recommends incorporating the following techniques at work to ensure desk dwellers stay comfortable and healthy from head to toe:

**EYES** - Sit approximately an arm's length away from your monitor and position the top of the monitor screen at, or slightly below, eye level. Take mini breaks every 10 to 20 minutes to rest the eyes from the glare of the monitor.



**SHOULDERS** - Keep your shoulders relaxed and in a neutral position as you type. Keep your elbows close to your sides as you use the keyboard and mouse. Take a moment every so often to roll your shoulders up and back to alleviate tension.

**HANDS AND WRISTS** - Keep your wrists straight and in a neutral position. Keep the bottom of your elbows even with the keyboard height, not below. Use minimum force while striking the keys and utilize your chair arms for support.

**BACK AND LEGS** - Adjust your chair so your thighs are parallel to the floor. Sit back in the seat so that your lower back is supported firmly by the chair or a support cushion. Place your feet on a footrest to relieve "pull" on the lower back. Make sure to get up and stretch your back and legs every hour.

In addition to these recommended techniques, employees should ensure they have the right office equipment incorporated into their workspace to maximize comfort and increase productivity on the job. Features to look for in desk furniture and accessories include palm support that relieves wrist pressure to help prevent carpal tunnel syndrome, and an adjustable keyboard tray to promote neutral hand/wrist position.

# YOUTH SPORTS CONCUSSION

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symptoms, which include:

- Appearing dazed
- Headache
- Nausea
- Balance problems, dizziness
- Double or fuzzy vision
- Sensitivity to light or noise
- Feeling sluggish, or foggy
- Concentration or memory problems
- Confused, forgetful
- Behavior / personality change
- Can't remember events right before, or right after being hit
- Changes in sleep patterns

If any of these signs or symptoms are present after a blow to the head, **STOP** activity immediately and consult your health care provider. Proper, conservative management is the best way to ensure many years of healthy physical and mental activity.

For more information on head injury in sports, please visit [www.cdc.gov/ncipc](http://www.cdc.gov/ncipc)



Stacey is an NATA certified athletic trainer, preventing and managing sports injuries for the past 20 years. She is Director of Sports Medicine & Athletic Training for San Luis Sports Therapy.



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**Keep in touch with our team,  
we want to hear from you!**

# CONGRATULATIONS

We are happy to announce that the following physical therapists have achieved advanced status as board certified clinical specialists through the American Board of Physical Therapy Specialties.

- **Megan Perhach** - Pediatric Certified Specialist (PCS)
- **Toni Oliver** – Geriatric Certified Specialist (GCS)
- **Jason Roda** – Orthopedic Certified Specialist (OCS)
- **Jen Seay** – Orthopedic Certified Specialist (OCS)
- **Jason Godfrey** – Orthopedic Certified Specialist (OCS)
- **Tanya Conley** - Orthopedic Certified Specialist (OCS)
- **Jason Sanders** – Geriatric Certified Specialist (GCS) in addition to his existing Orthopedic Certification (OCS)

With these therapists achieving board certification, we now have **17 specialty certified therapists in the areas of orthopedics, sport, geriatric, pediatric and hand therapy**. We are very proud to have professionals who have demonstrated a motivation and ability to distinguish themselves as advanced clinicians in a specialized field of physical therapy. Of all licensed PTs in the United States, only about 5% have completed board certification.

We pride ourselves in having a team of physical therapists that are highly trained and provide specialized care to our community.

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## Proudly Serving Kern County

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