



Getting You On

THE ROAD TO RECOVERY

A Quarterly Newsletter from Peninsula Rehab & Sport Medicine January 2011 Issue 10

www.penrehab.com All Newsletter Issues are archived at our website.



NEW YEAR'S RESOLUTIONS!

Doesn't it seem like yesterday that we were writing about New Year's Resolutions in our Newsletter? We talked about how making a New Year's Resolution successful, requires that one actually *do* something. Let's talk about a few actions that can make some of those New Year's Resolutions for 2011 a success. Here are some basic ideas. First, always check with your doctor if your resolutions involve dieting or exercising.

RESOLUTION: *You want to get organized at home.*

ACTION: Start *BEING* organized today. Whenever you take something from its place, put it back where you got it as soon as you are finished with it. As soon as you bring something home from a shopping trip, put it where it belongs. When you get the mail, open it, sort it and toss trash *now*. No procrastinating. Don't tackle trying to clean up and reorganize the entire place. It's overwhelming and will feel darn near impossible. Starting today *keep* organized. Then work on the rest in little bits and pieces. Make a list of small projects and work on them one at a time at your own pace. It all adds up and it begins today.

RESOLUTION: *Lose some weight and feel better about the way you look.*

ACTION: First, start feeling better about what you are eating. There is always a measure of guilt when we eat the wrong foods (or maybe not). Make some swaps. Beginning today, swap eating one thing that you tend to eat everyday that is packed with calories and fat for

something less fattening. Are you having a Snickers every day at lunch? Trade it in for Toostie Roll. That's right a Toostie Roll. You can still have your sweet tooth satisfied for a substantially lower amount of calories and fat. Snickers: 271 calories and 13.6 grams of fat. Toostie Roll: 140 calories and 3 grams of fat, about half the calories and only about 1/4 of the fat of a Snickers. Better yet – give it up for a big juicy, crispy apple- about 100 calories and 0 fat.

How about that Latte you have every morning or afternoon? Close to 400 calories!!! Choose the skinny version using skim or low fat milk. Better yet – give it up for a rich, smooth cup of hot steaming black coffee. Black coffee, once you get used to it, exposes the true flavor of what coffee is supposed to taste like. Giving up a portion of your usual daily intake of calories, even if you change nothing else, will help you to drop a few pounds over time. Dream up other ways of substituting high calorie foods you eat, with lower calorie foods that you also like. For example you don't have to eat less chicken, just eat grilled or roasted instead of fried. Don't buy ice cream by the gallon. It's too convenient to chow down on a second serving. Choose a *pint* of low fat frozen yogurt or raspberry or mango sherbet instead of 3 scoops of full fat ice cream. It has only half the calories of ice cream and 0 fat and is surprisingly delicious! It all adds up and it begins today.

RESOLUTION: *You want to exercise more – but ugghh! You just don't feel like it.*

ACTION: This one is a little harder. You can't substitute anything for movement. So start with a lazy solution. Try some chair exercises. You don't even have to get up. You can do some stretching or repetitive exercises while lying in bed. Leg lifts,

small abdominal crunches, or using some light dumbbells for some upper body/arm work while you lay in bed. Willing to get a little more active? Try a class – Zumba, Line Dancing, Belly Dancing, even Pole Dancing. Check your local gym and choose something that you think would be fun. If you're having fun, you're more likely to get moving. The more you get yourself moving, the more you will *want* to move. You could even make a new friend or two! It all adds up, and it begins today.

RESOLUTION: *You want to be nicer.*

ACTION: Smile! While you shop for groceries, look people in the eye and give a stranger a smile. Instead of giving your wife/husband a smart alecky answer about something, give them a smile and a little kiss instead. Pay it forward. You see someone ahead of you in line at the coffee shop is shy a nickel or even a quarter. Dig into that pocket and give it to them. If you can afford it, when you're in line at the McDonalds or Starbucks, ask to pay for the bill of the person behind you. You will plant a seed of generosity and perhaps that person will pay it forward for someone else. Being nice can be contagious and can make you feel really good. So don't be stingy with those smiles and compliments. It all adds up, and it begins today.

We can be anything we want to be, or do anything we want to do. We have the capacity for it. It's a matter of our own willingness to make things happen.

Everything we do adds up to something, and it can all begin today.



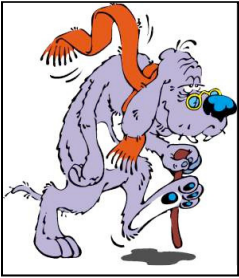
Swap Snickers for a Toostie Roll



Swap full fat ice cream for Sherbet

DOES WEATHER AFFECT ARTHRITIS PAIN?

(from: Johns Hopkins Health Alerts)



If you have arthritis, you may be among those people (and there are many) who feel that their arthritis pain is influenced by the weather—specifically, they experience more arthritis pain on cold, rainy days and less arthritis pain on warm, dry days.

Research studies (including two recent reports) on whether climate really does affect arthritis pain have produced conflicting results.

What the Research on Arthritis Pain Shows

The first study looked for a relationship between weather and arthritis pain in 151 people with osteoarthritis, rheumatoid arthritis, or fibromyalgia (a rheumatic disorder that causes joint pain) as well as 32 people without arthritis as a control group. All participants lived in Cordoba City, Argentina, which has a warm climate. Participants kept a journal for one year recording the presence and features of any pain, and these daily reports were matched with weather conditions such as temperature, barometric pressure, and relative humidity.

Patients in all three groups experienced more pain on days when the temperature was low, while people in the control group were unaffected by any of the weather conditions. In addition, patients with rheumatoid arthritis were affected by high humidity and high pressure; osteoarthritis patients by high humidity; and those with fibromyalgia by high pressure. However, the associations were not strong enough to allow pain to predict weather, or vice versa.

The other study looked at 154 people (average age 72) who lived in Florida and had osteoarthritis of the neck, hand, shoulder, knee, or foot. Participants reported their arthritis pain scores for up to two years. Researchers then matched the scores with the daily temperature, barometric pressure, and precipitation status. No significant associations were found between any of the weather conditions and osteoarthritis pain at any site, except for a slight association between rising barometric pressure and hand pain in women.

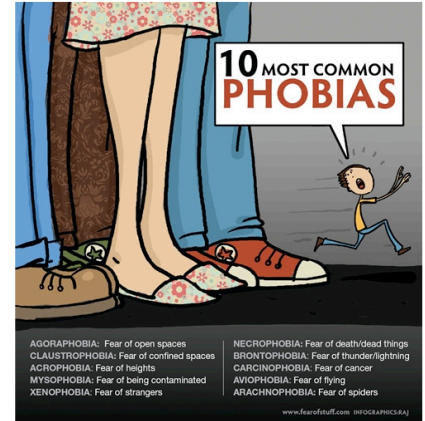
A Mild Case for Warmer Weather

Although some evidence exists that people living in warmer, drier climates experience fewer episodes of arthritis pain, climate does not affect the course of the disease. At most, it may affect symptoms of arthritis pain.

One theory holds that a drop in air pressure (which often accompanies cold, rainy weather) allows tissues in the body to expand to fill the space, meaning that already inflamed tissue can swell even more and cause increased arthritis pain. Other possibilities: Pain thresholds drop in colder weather; cold, rainy days affect mood; and during colder weather people are less likely to be outside and get the exercise that normally helps keep arthritis pain in check.

So does this possible link between cold, rainy weather and arthritis pain mean that people with arthritis should move to a dry, warm climate like Arizona? Not necessarily, especially if it means leaving your family, friends, doctors, and support system behind. If you are thinking of moving, first spend a considerable amount of time in your new location to see if the weather affects your arthritis pain symptoms.

Bear in mind that no environment is arthritis-proof: Even though the people in these research studies live in warm climates, they still struggle with arthritis pain. Similarly, it's possible to get relief from arthritis pain in any climate. For example, even if cold weather means you can't spend time outdoors, you can still get valuable exercise in a gym or heated pool.



DO YOU HAVE ANY PHOBIAS?

<http://phobialist.com/#A->

The link above lists literally hundreds of phobias that people can suffer. Can you identify these? What is:

Alektorophobia fear of chickens

Alliumphobia fear of garlic

Arachibutyrophobia fear of peanut butter sticking to the roof of the mouth

Bufonophobia fear of toads

Consecotaleophobia fear of chopsticks

Didaskaleinophobia fear of going to school

Gatophobia fear of cats

Oenophobia- Fear of wines (What??!!)

Omphalophobia fear of bellybuttons

Plutophobia- Fear of wealth. (Hmmm – I don't think so)

40 Million Americans suffer from anxiety disorders. Out of that number, approximately 15 million adults and children suffer from social phobias, according to the National Institute of Mental Health (NIMH).

The most common phobias in psychology include irrational fears of spiders, heights, confined spaces, lightning and strangers. Fear of public speaking and fear of flying are also common phobias. Most people can live with their phobias, some need counseling, and sadly, some

people are so phobic they live every day with their fears haunting them, unable, afraid or embarrassed to seek help.

You may be surprised at some of these people who have their own phobias.

Marilyn Monroe was Agoraphobic – afraid of open spaces.

Paris Hilton is Claustrophobic – afraid of confined spaces.

Sheryl Crow is Acrophobic – afraid of heights.

Howie Mandel is mysophobic – extremely afraid of being contaminated.

Sarah Michelle Gellar is necrophobic – afraid of the dead.

Justin Timberlake is arachnophobic – he has a fear of spiders.

John Madden is aveophobic – he is afraid of flying. He has his own mega trailer that he travels in.

Woody Allen has carcinophobia – he is afraid of cancer. (Who isn't!!!)

Madonna is bontophobic – she is afraid of thunder and lightning.

Barbra Streisand has xenophobia – she is uncomfortable around strangers.

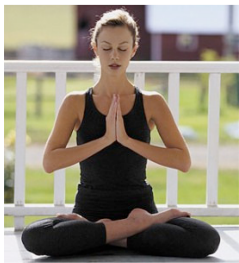
If you have a phobia or know someone who has a debilitating phobia, the help of a counselor can help to you eliminate or at least cope with the problem. Don't be afraid or embarrassed – seek help. Call your family doctor who can help you find someone to help. Learning to deal with your phobia can set you free to enjoy life to its fullest.

YOGA – It's a growing practice

with growing benefits. According to studies cited at the Johns Hopkins Health Alerts website, there is more and more evidence that yoga can be very beneficial in relieving the pain of arthritis and chronic back problems. It may also help provide the benefit of calming the mind helping to relieve stress and possibly even lower your blood pressure. There are also the more obvious benefits of strength and greater flexibility.



Yoga can be done on any level. Honoring your body is first and foremost when practicing yoga. Seniors can even perform what is known as chair yoga, using a sturdy chair to aid in performing the various poses. Take a look at Get Fit Where You Sit: <http://getfitwhereyousit.com/>



Before you begin any exercise program consult your physician to get his blessing that you are a good candidate for these types of exercises. As good as yoga can be, it's not for everyone.

Here are several links that will take you to The Johns Hopkins Health Alerts Website where they have several articles on the benefits of Yoga for back pain, heart health, arthritis pain, lowering blood pressure. If you can't use these links, just type: Johns Hopkins Health Alerts in your address line and then type yoga in their search line. All of these, and many other articles on other topics, are listed there. If you can't use these links and would like a copy of any of these articles, just let us know.

http://www.johnshopkinshealthalerts.com/alerts/back_pain_osteoporosis/JohnsHopkinsHealthAlertsBackPainOsteoporosis_2942-1.html

http://www.johnshopkinshealthalerts.com/alerts/back_pain_osteoporosis/JohnsHopkinsBackPainOsteoporosisHealthAlert_3302-1.html

http://www.johnshopkinshealthalerts.com/alerts/arthritis/JohnsHopkinsArthritisHealthAlert_2469-1.html

http://www.johnshopkinshealthalerts.com/alerts/arthritis/JohnsHopkinsArthritisHealthAlert_1185-1.html

http://www.johnshopkinshealthalerts.com/alerts/hypertension_stroke/JohnsHopkinsHealthAlertsHypertensionStroke_585-1.html

A BRIEF HISTORY OF PHYSICAL THERAPY

(not to be confused with Personal Training)

(Information taken from Wikipedia)

http://en.wikipedia.org/wiki/Physical_therapy

Physicians like Hippocrates and later Galenus are believed to have been the first practitioners of physical therapy, advocating massage, manual therapy techniques and hydrotherapy to treat people in 460 B.C. After the development of orthopedics in the eighteenth century, machines like the **Gymnasticon** were developed to treat gout and similar diseases by systematic exercise of the joints, similar to later developments in physical therapy.

The earliest documented origins of actual physical therapy as a professional group date back to Per Henrik Ling, "Father of Swedish Gymnastics," who founded the Royal Central Institute of Gymnastics (RCIG) in 1813 for massage, manipulation, and exercise. The Swedish word for physical therapist is "sjukgymnast" = "sick-gymnast." In 1887, PTs were given official registration by Sweden's National Board of Health and Welfare.

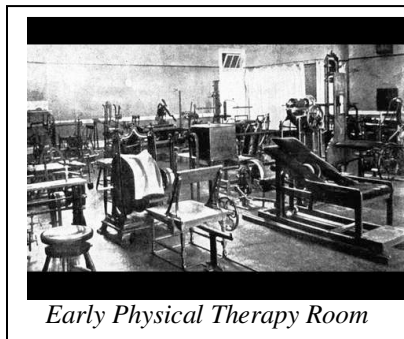
Other countries soon followed. In 1894 four nurses in Great Britain formed the Chartered Society of Physiotherapy. The School of Physiotherapy at the University of Otago in New Zealand in 1913, and the United States' 1914 Reed College in Portland, Oregon, which graduated "reconstruction aides."

Modern physical therapy was established in Britain towards the end of the 19th century. Soon following

American orthopedic surgeons began treating children with disabilities and began employing women trained in physical education, massage, and remedial exercise. These treatments were applied and promoted further during the Polio outbreak of 1916. During the First World War women were recruited to work with and restore physical function to injured soldiers, and the field of physical therapy was institutionalized. In 1918 the term "Reconstruction Aide" was used to refer to individuals practicing physical therapy. The first school of physical therapy was established at Walter Reed Army Hospital in Washington D.C. following the outbreak of World War I. Research was the catalyst for the physical therapy movement. The first physical therapy research was published in the United States in March 1921 in "The PT Review." In the same year, Mary McMillan organized the Physical Therapy Association (now called the American Physical Therapy Association (APTA). In 1924, the Georgia Warm Springs Foundation promoted the field by touting physical therapy as a treatment for polio.

Treatment through the 1940s primarily consisted of exercise, massage, and traction. Manipulative procedures to the spine and extremity joints began to be practiced, especially in the British Commonwealth countries, in the early 1950s. Later that decade, physical therapists started to move beyond hospital-based practice to outpatient orthopedic clinics, public schools, colleges/universities, geriatric settings (skilled nursing facilities), rehabilitation centers and medical centers.

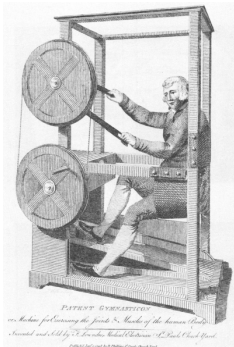
In 1921 in the United States physical therapists formed the first professional association called the American Women's Physical Therapeutic Association. This gave birth to what is known today as the APTA (American Physical Therapy Association), and currently represents approximately 76,000 members throughout the United States. The APTA defines physical therapy as: "clinical applications in the restoration, maintenance, and promotion of optimal physical function."



Early Physical Therapy Room

Specialization for physical therapy in the U.S. occurred in 1974, with the Orthopaedic Section of the APTA being formed for those physical therapists specializing in orthopaedics. In the same year, the International Federation of Orthopaedic Manipulative Therapy was formed, which has ever since played an important role in advancing manual therapy worldwide.

GYMNASTICON



NOTICE: If you receive this newsletter electronically, you can automatically connect to any of the links in the Newsletter by mousing over the link and pressing Control and Click. If you receive a paper newsletter, it is necessary to manually type the link address into your address line on your browser.

If you no longer wish to receive this Newsletter, just call or write

maggiepenrehab@hotmail.com

We will remove your name from the mailing list immediately.

Next Issue: April 2011
We welcome your requests for topics of interest.

All past issues are available at our website in the **PRESS** section.

Peninsula Rehab & Sports Medicine is a state-of-the art Physical Therapy facility specializing in:

- * Orthopaedics
- * Sports Medicine
- * Industrial Rehabilitation
- * Ergonomics
- * Manual Therapy
- * The needs of the active retirement community

with the goal of getting you *on the road to recovery* and back to the activities you enjoy.

The Staff:

Ron Wist, PT

Lesley Rogan, M.Ed., PT, AT Ret

Michelle Perreault, PT

Tim Remenapp

Maggie Bolgiano, Office Administrator

Debbie Shuster – Office Assistant

Elaine Jacobs – A/R Data Entry



Peninsula Rehab & Sports Medicine
With locations at
12417 Ocean Gateway #9 in West OC.
and
12913 Coastal Highway
(next to Tequila Mockingbird)

PH: (410) 213-7878

FAX: (410) 213-7979

Visit our website

www.penrehab.com

See us on Facebook and become a Fan to receive News and Updates!

GOING GREENER! SAVING TREES --- LESS TRASH
We encourage you to receive your Newsletter electronically.

Send an e-mail to: maggiepenrehab@hotmail.com or call (410)213-7878 to request delivery options for your Newsletter.

We will not use your e-mail address for any other purpose than sending the Newsletter on a quarterly and/or update basis. We will not share your e-mail address with any one else.

Save a tree.  Get your Newsletter electronically!

Links you might find useful and interesting:

More information about arthritis from the Mayo Clinic:

<http://www.mayoclinic.com/health/arthritis/DS01122>

72 health benefits of yoga:

<http://www.nursingdegree.net/blog/24/77-surprising-health-benefits-of-yoga/>