



Hands On

Wadsworth Osteopaths ■ Newsletter ■ April 2015

This month's theme is The Pelvis.



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'My back's killing me' Part 2 – Pelvis injuries'

'I've put my back out', 'I feel to be on one side', 'I can't stand up straight'.....'and it's killing me'

At Wadsworth Osteopaths we see patients who have injured their backs every day and probably more than half of these are pelvic joint injuries.

The pelvis lies between the hips and the bottom of the spine and is made up of the triangular sacrum in the middle with the last lumbar vertebra sitting on top and the tail bone or coccyx hanging from the bottom of the sacrum.

The broad bones of the pelvis are attached to the sacrum on either side by the sacro-iliac joints. They are joined to each other at the front by the pubic symphysis and the deep ball and socket joints of the hips are located on either side.

Q. Which parts of the pelvis can be strained or injured?

A. The sacro-iliac joint is the one which is most commonly strained.

The sacro-iliac joints are flat with ridged surfaces angled obliquely and supported by tough ligaments. The SI ligaments can be strained or overstretched and this usually occurs when we bend forwards with a twist.

The symphysis pubis at the front of the pelvis can also be strained during pregnancy when hormones soften the supporting soft tissues that hold the joint together.

Otherwise it is less common to strain the pubic symphysis.

The coccyx or the sacro-coccygeal joint can also be strained. Most often this happens when someone falls heavily onto their bottom (Ouch!)

The ball and socket joint of the hip can also be strained but it usually requires considerable force to damage this strong joint. Some sporting injuries can dislocate the hip and other forceful falls and injuries can damage the cartilage labrum (the rim which deepens the hip socket.)

Q. How can I tell if I have strained one of my pelvic joints?

A. *Pain.* Pain is the most common symptom. For SI strains the pain is usually felt at the bottom of the back to one side or the other. The sacro-iliac joint can refer pain into the groin on the same side and in some men also into the testicle.

Lopsided. As osteopaths we often see patients who have strained their sacro-iliac joint and feel lopsided: 'It feels like I have one leg longer than the other'.

The lop-sidedness can occur for a variety of reasons so it is important to do a careful examination to find out what has happened in each case. For example:

- There may have been some rotation displacement of the pelvis – a forward rotation gives the effect of the leg on that side appearing longer, a backward rotation gives the effect of a shorter leg
- Some patients adopt a protective posture – they usually lean away from the painful side: 'my back feels like a banana'. This may or may not be accompanied by a pelvic rotation.
- One leg may in fact be longer. While we are growing our bones don't always grow symmetrically and when we finish growing there can be some unevenness. Similarly our feet and hence shoes sizes are not always exactly the same.
- A flat foot on one side, a one sided bow-leg or knock-knee can also give an impression of lop-sidedness.
- An arthritic hip or knee where the articular cartilage has worn down on one side can also give the effect of one leg being longer than the other.

Difficulty straightening up from a bent position. When the sacro-iliac joints have been strained it is common for patients to mention that they can bend forward but coming up straight again or bending backwards is quite painful.

Pubic Symphysis. If the symphysis joint has been strained there will usually be pain at the front of the pelvis a couple of inches below the belly button. Also walking can be very painful.

Coccyx: Coccyx pain is usually felt over the coccyx. Be aware that coccyx pain does not always come from the coccyx - for example a strain of the bottom lumbar joint can send referred pain to the coccyx.

Hips: Hip pain can be felt at the side, at the widest part of the hip where the knobble of the greater trochanter can be felt just under the skin. It can also be experienced as

referred pain in the groin, front of the thigh and or front of the knee. Hip strains are also usually associated with pain on movement 'It is painful reach my foot and I am struggling to put my socks on'.

Q. What can I do if I think I have strained one of my pelvic joints?

A. For pelvic joint strains the advice is to rest (a day or 2 in bed if it is really severe) otherwise it is best to keep it gently moving – sit a bit, move a bit, stand a bit, move a bit.

Use heat and ice as needed. Heat for muscle spasm, ice for inflammation.

Use medication - pain killers and anti-inflammatory drugs can help.

Get some advice. Your GP can advise and help with medication. We are happy to talk to patients on the phone and advise on home management. If your pain is persisting we would need to do a proper examination to find out what has been damaged and work out a management and treatment plan.

Treatment can involve a range of techniques including traction (stretching), soft tissue massage to relax muscles, passive joint stretching, manipulation (or High Velocity Thrust). Corrective positional manipulation is often helpful. Other techniques include muscle energy and cranial techniques which can be used in certain circumstances.

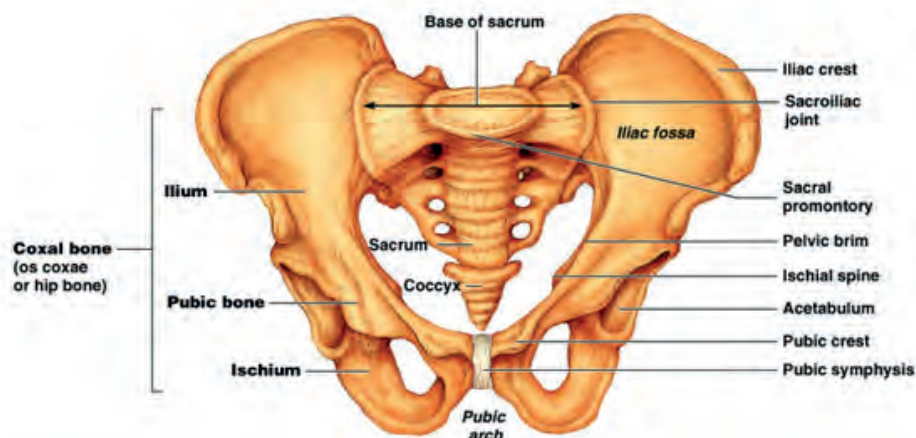
Home management, work management and exercise advice will be given when the time is right.

Q. What else can go wrong?

Fractures: Fractures to the hips and pelvis are normally associated with serious trauma and in most cases you will be looked after at A&E.

Pelvic Organs: The bladder, uterus, bowel and other pelvic organs can all give pain in the back, or groin (as with pelvic joint strains) so it is important to bear these in mind. When we see patients with a fresh injury we will always ask questions to check the organs are working correctly and if there is any suspicion of a problem which is not from the muscles and joints we will ask patients to speak to their GP. See below for further information about the pelvic organs.

Hernias: A hernia occurs most commonly where there is a weakness in the muscles of the abdomen, this can be caused by physical strain (eg heavy lifting) or from excessive straining or at sites of old wounds (eg surgical scars.) So, while a hernia may give pain in the groin, like referred pain from the sacro-iliac joint, there will usually also be a lump. If present this will also need to be discussed with your doctor.



The three solid bones that form the pelvic bowl and its joints also protect the reproductive organs, the bladder, the colon and a substantial part of the large bowel. At the same time, they contain an intricate network of nerves, veins and arteries which supply these organs and the muscles of the legs and feet.

OUTSIDE THE PELVIS

Working from the outside –inwards, there are several layers of abdominal and back muscles attaching around the upper rim of the pelvis. The buttock and leg muscles attach to the bowl and base of the pelvis, these form a sling from front-to-back are the muscles of the pelvic floor.

COMMON PROBLEMS

After any kind of spinal, pelvic or abdominal surgery – including Caesarian-section and episiotomy in childbirth - these layers of muscles have to be cut through, but not all of them are stitched back together again and consequently must heal by themselves. The response of the body is to repair the injured area as rapidly as possible by forming scar tissue, which not only reduces muscle power, but can tether any nearby structure. As osteopaths, we commonly see problems relating to altered nerve or muscle function as a result of recent surgery. Typically, we can advise exercise regimes to improve muscle tone and strength, we can articulate affected joints to increase range-of-movement, or stretch and massage tethered areas affecting major nerves, organ motility and fluid drainage.



Linda Hoyland MAR KFRP – Kinesiologist and Vitality Specialist works at Holly House Clinic. In this article she discusses food and food intolerance.

Which foods could be sapping your energy?

- Do you feel tired most of the time?
- Do you feel sleepy after a meal?
- Do you crave certain foods?
- Do you have digestive problems - IBS, indigestion etc?
- Do you feel bloated?
- Have you got sinus problems, hay fever, eczema, itching, aches & pains?
- Do you get headaches or have poor concentration?
- These are all symptoms of food intolerances.

When you are under stress, on medication, have had antibiotics, or there is alcohol and sugar in the diet, this can create the ideal conditions for food intolerances to

develop.

Normal everyday foods become difficult for the body to process properly so they end up triggering an immune response and the body tries to fight them off instead of treating them as nutrients.

It can be difficult to discover the guilty foods as the degree of intolerance varies due to the amount of stress the body is under, how much you eat of that particular food, how you are feeling, even the time of day can make a difference!

Common food intolerances are wheat (there is much more gluten in modern day wheat), milk, cheese, tea, coffee, chocolate and people with joint problems can be sensitive to potatoes, tomatoes, peppers and aubergines (these are all members of the Nightshade family).

Kinesiology can help discover if certain foods are causing you problems and also help bring the body back into good working order so that they no longer affect you. I have seen clients achieve remarkable results with this process as it addresses many different factors that can contribute and the bonus is you lose weight!

When I tested one lady for food intolerances, she said I had just described the entire contents of her fridge, she changed what she ate and lost 10lbs in 10 days!

Linda can be contacted at Holly house Clinic 01482 875004

News

Easter Clinic Opening

Monday 4 May 2015 - OPEN Beverley

Monday 25 May 2015 - OPEN Beverley

Monday 31 August 2015 - OPEN Cottingham

Talk at Holly House Clinic for Pregnant and New Mums

We are holding another talk at Holly House Clinic on Tues 12 May 2015, 6pm – 7.30pm.

This talk is free and open to all who are interested.

1. Background to Osteopathy
2. *Relaxin* (hormonal softening of ligaments during pregnancy) – help or hindrance
3. *Postural adaptation* to Pregnancy
4. Pelvic Girdle Pain (PGP) / Symphysis Pubis Dysfunction (SPD)

How osteopaths can help

5. *Childbirth* – Primitive Reflexes, Labour, C Section
6. *Postnatal problems* – bending, lifting, back pain, neck pain, fatigue.....
7. *Babies* – colic, sleeping difficulties, feeding problems, cranial osteopathy

We are also offering free consultations for anyone who is experiencing muscle and joint problems during or after pregnancy and unsure whether osteopathy can help:

1. Free 15 minute session with an osteopath experienced in working with pregnancy problems

2. Examination
3. Discussion of your problem
4. We are limited to 4 free sessions directly after the talk on 12.5.15.

Numbers for this talk are limited. If you would like to attend please leave your details at Holly House Reception.

01482 875004 or info@wadsworthosteopaths.co.uk

Open Evening to mark 30 Years at Wadsworth Osteopaths

A date for your diaries:

Tuesday 30 June 2015, 7pm Open evening and Taster sessions

Offers - £10 off

1. During May and June 2015 we are offering reduced rate (£30 rather than usual rate of £40) first consultations for New Patients who attend at Holly House Clinic on Monday, Thursday or Saturday.

Use the voucher below to claim your reduced rate consultation.

2. For Current Patients who recommend a New Patient who attends for a first consultation during May or June 2015 at Holly House Clinic on Monday, Thursday or Saturday we are also offering £10 off.

Use the voucher below to claim your reduced rate consultation.

✂.....

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Your name..... | New Patient Name.....

£10 Off voucher for you | **£10 Off voucher for New Patient**

|

Pass this slip to your friend/ family/ contact and ask them to present at reception when they come for their first session.

Ask for company stamp to validate voucher | **Ask for company stamp to validate voucher**

Next Issue

The next Newsletter will be June 2015.

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