



# Hands On

Wadsworth Osteopaths

Newsletter

April 2016



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## Schools Talks

At Wadsworth Osteopaths we are keen to promote health awareness. We are holding a series of talks in schools to help children understand how best to keep themselves fit and well.

Healthy habits started early in life will pay dividends in the future.

A range of different talks are available for different age groups.

Discussion topics include:

## 1. PROMOTING HEALTHY LIFESTYLE

### • **Healthy diet**

- Carbohydrates, Fats and Proteins
- Vitamins
- Fibre
- 5-a-day
- Sugar

### • **Exercise**

- Different exercise programmes to suit different levels of fitness
- Body types
- Muscle types – red and white fibre muscle for short burst and endurance activity
- Training programmes

### • **Smoking, Alcohol, Drugs**

- Health risks associated with legal and illegal drugs

### • **Noticing when something is wrong – PAIN:** when is it normal, when does it need to be dealt with

- Dealing with injury, self help
- Normal healing
- When I need help

## 2. THE HUMAN BODY AND HOW IT WORKS

### • **The skeleton – ‘Dead Bod’:** Can you put the bone back where it belongs?

### • **The spine:** 4 legs v 2 legs

### • **Weak joints and strong joints**

### • **Sitting**

- Sitting too long can reduce your lifespan, (6 hrs TV per day over a lifetime can shorten your life by 4.8 years)
- Increased risk of: Diabetes, heart disease, cancers, osteoporosis, DVT
- Telomeres
- Back pain
- What can I do?
  - Reduce sitting overall, incorporate more movement into your life
  - Alternate between sitting and standing, where possible get up every 20mins
  - If you have to sit for longer periods:
    - Use calf muscle pump
    - Shift in your seat

### • **Carrying**

- Growing bones
- Carrying and posture
- Even loading
- Rucksacks
- Clear out

## 3. HOW DO I RATE MYSELF? HOW CAN I GET FITTER / HEALTHIER?

- Questionnaire

If you would like us to talk to classes in your school please contact:

Robert Wadsworth [rgw@wadsworthosteopaths.co.uk](mailto:rgw@wadsworthosteopaths.co.uk) 0774 771 0317

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## Making Your Workspace Work for You

### Why should I look at my workstation?

#### The Office

A well planned ergonomic workspace should have good lighting, a comfortable temperature and sufficient room to carry out your daily work tasks.

#### Desk

People who type, read, write and use the phone at their desk, should aim for a working height which allows them to sit with knees, hips and elbows at 90 degrees. The desk height should then be the same as their horizontal forearms.

Your desk should be deep enough to allow your screen to sit a comfortable focal length away so you don't have to reach forwards to see the screen in focus.

If you do a variety of tasks at your desk, it is helpful to arrange writing tasks to one side, telephone on the other side and computer in the middle. For any extra tasks, move from one station to the other by wheeling your chair so that you are always facing the job you are working on.

Sit / Stand Desks are starting to become available. We do recommend alternating positions during the working day, standing every 20 minutes or so. Sit / Stand desks are a good way of achieving this.

#### Chairs

Height adjustable chairs are standard these days. In a new office environment or if you haven't done it before, familiarise yourself with the various adjustments so you can set your chair to suit you.

Adjust the height so your knees and hips are at 90 degrees with your forearms horizontal at desk height. If your feet are off the floor to achieve this, use a foot rest.

Arms on chairs are not necessarily useful. They can prevent you from getting your chair close enough to the desk. It can be better to take them off. Aim to sit close enough to your desk so that your wrists can rest on the front of your keyboard.

Lumbar support in the back of your chair is helpful. Everybody has a different lumbar curve – some deep / some shallow, some higher / some lower. If the lumbar curve of your chair fits nicely into your lumbar curve that is fine. If not, and the lumbar support on your chair is adjustable, adjust it to fit your curves. If you can't get it right try a small cushion in the small of your back.

Some office chairs will have a seat angle which is adjustable. Some people find their back is more comfortable with their bottom slightly higher than their knees. (This is not for everybody but can be tried for comfort.)

#### Laptops

Laptops are more popular, particularly for people who work in different locations on different days. They are convenient because they are portable but ergonomically they are not great because you work looking down at the screen. This can put strain on the neck and back.

If you use your laptop on your lap while sitting on the sofa or in bed, the postural problems tend to be worse.

If you only use a laptop for a few minutes at a time, your body may be able to cope, but if you work on your laptop for longer periods, we recommend you use a stand - this opens out the laptop so the top of the screen is higher. If you are using a laptop stand, which are readily and relatively cheaply available, you will also need to plug in an external keyboard.

## **Screen**

Aim to work with the top of your screen at eye level. Some monitors are attached to a movable arm which makes this easy, but do remember to move it if you are taking over from someone else of a different height. Alternatively raise your monitor on a platform – some people use phone books if nothing else is available.

Angle your monitor so you are facing it and not sitting on a twist. For people who use different sections of their desk for keyboard and writing, move along the desk so you are always facing your work.

For workers who like to use 2 monitors or more, be aware that the wider your total monitor width the more you will have to turn your head from side to side. A very wide screen set-up could be a problem in the longer term.

## **Mouse**

Various different types of computer mouse are available. Choose one which best suits your requirements.

If right handed, the mouse is usually on the right. Some left handed people prefer to use their mouse on the left but you may want to choose a left handed mouse.

Mouse mats can be useful but become unnecessary when using a mouse with an optical sensor.

For people who have or are susceptible to wrist strain, a mouse mat with a wrist rest can be helpful (this allows the mouse to be operated from the fingers and minimises the wrist movement).

A mouse in the style of a Joystick can be used. These can be useful for people who suffer with tendonitis, wrist problems and RSI.

Various other designs can be considered if you have a particularly difficult problem and use the mouse a lot in the course of your work.

## **Keyboard**

As with your screen, your keyboard should be positioned in front of you. Resting your wrists on the front of the desk so the keys are operated with movements of the fingers and wrists is generally best. Holding your arms and shoulders in a raised position can cause the neck and shoulder muscles to fatigue over time.

For some people a wrist rest can also be helpful. The wrists rest on a gel pad in front of the keyboard.

Ergonomic keyboards can be helpful, particularly the split keyboard which allows the hands to be separated and work in line with the shoulders, thus reducing side-bending of the hands.

Contoured keyboards can also be helpful, altering the angle of the hand in relation to the wrist.

Some of these keyboards take time to master and some are expensive so it is wise to seek advice to try and get the best keyboard and / or mouse to suit your needs.

## **Breaks**

Probably the most important advice is to take regular short breaks (20-30 seconds every 20 minutes). Stand move and stretch before sitting down again.

Most of us tend to lean forward towards our screen when we have been working for some time – this places extra strain on the neck, shoulder and back muscles. By standing and moving regularly through the working day this effect is reduced. When we sit down again we automatically re-set our posture.

The trick is to not give yourself long enough to get into that slumped position!

### **Advice**

If you find you are developing problems with your neck, back, shoulder, arms and hands or headaches and eye-strain you may need to seek advice from your doctor, optician or osteopath.



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## **Ruth's Story**

My name is Ruth and I am 24 years old. When I was 5 I thought I was like E.T. He was different. I always knew I was different.

When I was about 5, I was diagnosed with epilepsy. I have absences, temporal lobe seizures, and drop fits to this day. With the drop fits, I can just drop to the floor and have a seizure, however when I drop I can sometimes hit my head or my arm. When I was 6, I was diagnosed with an IGA blood deficiency. It's where I am missing elements in my blood that help fight infections off. So if I catch a cold it can turn into a nasty infection. I have always suffered with mobility problems from a young age. I used to wear callipers. People used to tease me, but in the back of my head I was ET! All the mean comments bounced off me. Until the age of 8, I was considered as having Special Educational Needs. I was behind educationally, then at the age of 8, I started to learn and my education took off. At about the age of 8, I was diagnosed with dyspraxia, to this day I can't do my shoe laces properly and I end up tying my fingers up!

At age 15 one of the scariest events of my life happened. As a child I always used to complain to my mum my heart skipped a beat. Anyway, I was studying for my GCSEs and the weirdest thing happened, my heart went BANG! I woke up with a cannula in my hand and I was hooked up to an ECG machine.

At age 21 after years of investigations, my cardiac consultant decided I needed an ablation and a pacemaker fitted. During the surgery the surgeon said, "Houston we have a problem."

I started to hear machines bleep and I felt myself fading. All the faces of the nurses, the surgeon and the doctor faded.....silence.

I came round, the surgeon looked white and he explained I had a heart attack. He said, "Ruth we are so sorry, you had a heart attack. We can go ahead with the ablation, but not the pacemaker." I cried and cried and cried.

The ablation surgery took 4 hours and the surgeon explained I had Wolffe Parkinson White Syndrome, and all that could be done was to monitor me and give me beta blockers.

The monitoring of my heart goes on.

At 15, my brother lost most of his sight and became visually impaired. He suffered with photophobia and had terrible headaches. My brother, Chris, had cranial massages from his late teens with Mr Wadsworth. Chris said Mr Wadsworth worked wonders.

At 22, I went to see Mr Wadsworth, and at first I was unsure, as I didn't understand what the cranial massage could do. In my first session with Mr Wadsworth we talked through my medical history, the poor man had a more in depth story than you the readers have. We sat for an hour and a half discussing my health conditions. Mr Wadsworth was sure I was not an alien. I was slightly disappointed, I always wanted to be ET!

Mr Wadsworth explained he was going to do a cranial massage in the next session.

I went for my next session, and the minute I laid on the bed I started to feel sleepy. He explained to my Mum that my head felt hard. After about 40 minutes he woke me up. He sat me up slowly and at first I felt dizzy. The dizziness subsided and my head felt different, less tense

I have now lost the use of my left leg, continue to have seizures, and the consultants are convinced I have MS. Plus I am on 20 different tablets a day. Through all of this Mr Wadsworth has been my friend and my saviour because although the seizures aren't great, the regularity of them are slowly going down. I can't express how lucky I am that Mr Wadsworth has helped me.

Life is hard and goes on, but if you ever feel at a dead end and need help, Mr Wadsworth is the man. I just want to say a massive thank you, you are making my life a lot easier, and my brother's life easier too.

### The Osteopath Comments:

So the question is: How can osteopathy help epilepsy? We certainly don't treat nor claim to treat epilepsy, but in Ruth's case during her fits she arches her back in such a violent and extreme way that much of her body weight is taken on the back of her head. No wonder then that her neck muscles were so tense and she gets headaches. The work we have done with her is to relax the muscles around her head and neck and loosen the joints. Due to her complex medical problems we have to go very carefully and consequently we use the very gentlest of techniques available to us as osteopaths.

Cranial osteopathy works with the pulse in the fluid around the brain and spinal cord. By gently palpating this fluid movement with our hands and encouraging a stronger, more even rhythm we can help to ease out some of the tension in the muscles. Ruth often sleeps during treatment and luckily seems to find it reduces the severity and frequency of her fits.

Having such a complicated series of medical problems it is difficult to find the right pathway through the medical services available. Nowadays medical specialists work in their own specific field, so one consultant may offer advice for one aspect of one of her problems, but it is very difficult to keep the whole picture in mind. Her GP has been very supportive in this respect over many years, and I would like to think we have been able to help in some way to guide her in the right direction when needed.

Ruth has battled with epilepsy since early childhood, has immune deficiency which makes it very easy for her to pick up infections and has heart problems, as she describes, including having suffered a heart attack at age 21. She also has eye problems, probably ocular albinism like her brother, struggles with hip pain, sciatica, bulging discs and spinal stenosis. In addition she has tumours in her femur bone, which fortunately are benign, as well as lactose intolerance. A doctor might read through her notes (if he had time), and think he had mixed several patients up together, but no, it's all Ruthie, and she deals with it all with such courage, humour and determination.

Her brother has undergone lengthy and extensive medical tests in the US and it now looks likely that there is a rare, very rare, genetic problem in the family. It has never been identified before and it may possibly be that the family are the only ones in the world with this particular defect.

I have great admiration for Ruth. Despite all her health problems she graduated not long ago from her OU degree with a 2.1. She would love to be a teacher and undoubtedly would make an excellent one, but her health problems mean this will be very difficult.

She thinks she is like ET. I don't know about aliens but she is certainly different to anyone I know and a very special person. I feel proud to have been able to help her.

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## **Bank Holiday Opening at Wadsworth Osteopaths Spring 2016**

We are open on:

**Monday 2 May 2016 &**

**Monday 30 May 2016**

Remember our phone lines are answered 24/7. If you do need to contact us over the bank holiday weekends, just call **01482 875004**.

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**Next Edition June 2016**

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Call Us: 01482 875004  
[info@wadsworthosteopaths.co.uk](mailto:info@wadsworthosteopaths.co.uk)