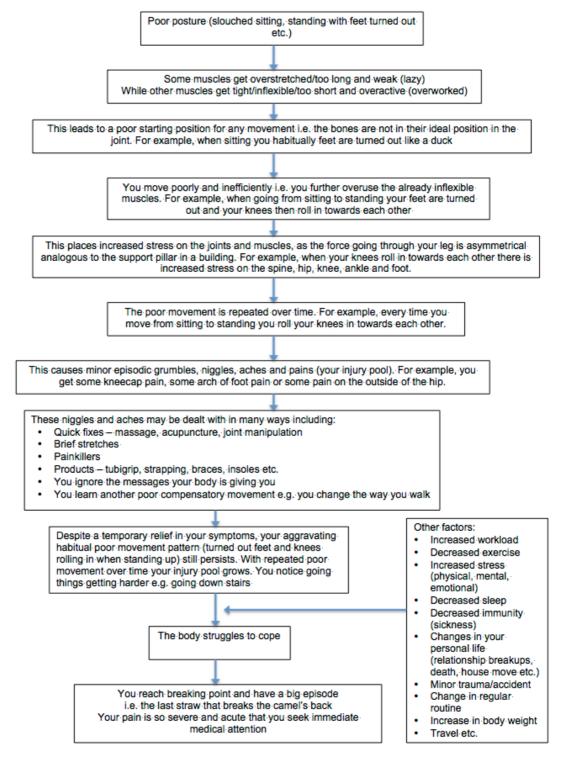


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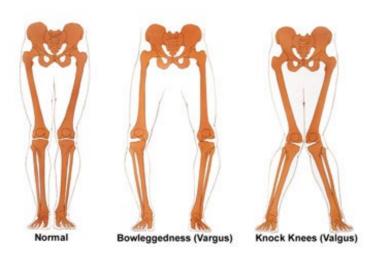
MOVEMENT AND PAIN

Many clients find it difficult to understand why they develop aches and pains in the absence of any significant trauma or incident. The flowchart below will hopefully highlight the multifactorial nature of musculoskeletal aches and pains and answer this question. The flowchart uses poor posture as a starting point.





The pictures below should help you to further understand the example mentioned in the above flow chart- moving from sitting to standing with your knees rolling in towards each other.



Comment: This picture shows the "knocked knees" posture where the knees are "kissing"



Comment: This picture shows how the force is distributed unevenly through the leg and causes increased stress and potential niggles and aches. Ideally, the plumb line should be falling through the centre of the knee and ankle.





Comment: This picture further re inforces the increased andunecessary pressure placed on the muscles and joints in the lower limb when moving poorly on a habitual basis.

This is but one example of the many poor movements that you can do with your body on a habitual basis that could, over time, eventually result in aches and pains.

Please also note the other factors that could play a role in "tipping you over the edge" and resulting in your "big episode". The mind-body interaction in disease becomes clear and you begin to see what how the body expresses what the mind thinks, the heart feels and adjusts itself accordingly (please refer to the pain explained handout and the stress and pain handout).

So what can be done to ease my pain?

As your pain may be multifactorial in origin, your therapist will assess you to determine which is the predominant contributing component.

If habitual poor movement patterns are a predominant factor, then these will have to be corrected. Poor movement patterns can be corrected by learning a new healthy pattern of movement. Learning a new healthy pattern of movement is similar to acquiring any new skill, such as, learning how to drive a car.



There are many models of learning and a useful one is shown below:

Unconscious Incompetence

You don't know that you don't know how to do something.

Conscious Incompetence

You know that you don't know how to do something and it bothers you.

Conscious Competence

You know that you know how to do something and it takes effort.

Unconscious Competence

You know how to do something and it is second nature; you rock at it.

Your therapist will guide you so that the new movement pattern becomes second nature to you. This will require thoughtful practice, high quality repetition and imagery training. As you are making a change, it is understandable that you may get frustrated and that you may go though a period of adaptation where your symptoms may get slightly worse before getting better. Rest assured that the new healthy movement pattern should decrease your pain, increase your flexibility, increase your strength, make your everyday activities easier, enhance your performance and increase your quality of life.

References:

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