

ACTIVE P.T. SOLUTIONS
...BECAUSE LIFE
SHOULD BE ACTIVE

APTS Monthly



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8:00am - 4:00pm

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Wrist Pain or Neck Pain?

Carpal tunnel syndrome is one of the most common nerve entrapments of the upper extremity. It occurs when the median nerve is compressed in the wrist. However, it is not uncommon for compression of the median nerve to occur in several different sites in the forearm. Over the course of time, the general population has come to accept that hand and wrist pain, numbness, or tingling adds up to carpal tunnel syndrome. In fact, hundreds of people each year have wrist decompression surgery in hopes of relieving these symptoms. The problem with this thought process is that there are many causes of numbness, tingling, and/or pain in the hands and fingers.

Symptoms specific to carpal tunnel syndrome most often occur in the thumb, index finger, middle finger, and half of the ring finger. If you have symptoms in your fingers but your little finger is fine, this may be a sign that you have carpal tunnel syndrome. There are two other peripheral nerves that supply the hand. The ulnar nerve supplies the little finger, while the radial nerve supplies the backside of the thumb, index and middle fingers. Nerve roots from the neck or cervical spine (C6, C7, C8) control a different pattern of sensation in the hand with some overlap. This is what makes the diagnosis of a cervical spine problem versus true carpal tunnel syndrome so challenging. It is also why it is so important to answer questions about your symptoms as specifically as possible. The diagnosis will sway one way or another based on the answers you provide.

Many people who have undergone surgery for carpal tunnel syndrome continue to experience hand, wrist,

and arm pain or tingling. There are some that get temporary relief but the problem recurs frequently with symptoms of higher intensity. Other patients develop symptoms similar to carpal tunnel syndrome following neck injury. They may not have had a wrist injury but still experience pain in the hand.



Since the body is a complex network of joints, nerves, ligaments, muscle, and fascia,

it is possible that a symptom from one area of the body may be caused by a problem located in a different part of the body. This approach to healing is more holistic as opposed to the isolationist approach. Recent research demonstrates this to be the case in patients experiencing symptoms of carpal tunnel syndrome. Some studies indicate that it is not uncommon for symptoms of carpal tunnel syndrome may be caused by muscle stiffness in the neck and shoulders resulting in poor posture, tense muscles, nerve compression, and pain traveling down the arm and into the hand.

While we have created a technologically advanced society, these advancements have accelerated the aging process creating chronic postural distortions in even our youngest members. In a given day, it is not uncommon for the majority of the population to go from a car to a desk and computer, back to a car, and finally to a La-Z-Boy.

This lack of movement creates a domino effect, and most relevant to carpal tunnel syndrome is the rounding of the

shoulders and forward head posture. When the shoulders round and the head shifts forward, the muscles in the neck and shoulders compress the nerves that course from the neck to the hand. The hand requires a stable base at the neck and shoulders in order to function properly. Weakness caused by inactivity and poor posture ultimately causes the hand and forearm muscles to be overworked. This results in "double crush syndrome" or nerve compression proximally while also causing compression distally in the hand and forearm. This results in tingling, pain or numbness in the hand, wrist and arm.

Before you accept a diagnosis of carpal tunnel syndrome, ask yourself some simple questions: Did anyone examine my neck? Was I given an explanation why my neck was not a cause of my hand symptoms? Should I get a second opinion? Does the diagnosis of carpal tunnel syndrome make sense? Were metabolic causes of carpal tunnel syndrome ruled out, such as diabetes, thyroid disease, and even pregnancy?

Generally speaking, there are many options for the treatment of patients experiencing carpal tunnel-like symptoms. Do your homework and work with healthcare providers that share your goals and expectations. As the patient, it is your right to choose a physical therapist with whom you feel most comfortable discussing all aspects of your care.

Article by Dale Buchberger,
DC, PT, CSCS



Wrist flexor stretch (top) and wrist extensor stretch (bottom)

Exercise of the Month: Wrist Stretches

This month's exercise features two stretches for the wrist that will help prevent or relieve pain in the wrist, elbow, and forearm, especially for those people that perform a lot of repetitive motions with their hands. For each of these stretches, you'll want to find a table high enough to rest your hand on comfortably with your elbow straight. If you can't find one high enough, you can stack books on a table until you reach a comfortable height to perform the exercise.

The first stretch is for the

"bottom" (palm) side of the forearm. Stand with your palm on the table, fingers pointing behind you, and the elbow fully extended. You may already feel a stretch in this position. If not, keep your palm on the table and your elbow extended and lean back slightly to feel a stretch in the forearm.

The second stretch is for the "top" side of the forearm. Stand with the back of your hand on the table, fingers once again pointing behind you, and the elbow fully extended. Again, you

may already feel a stretch just by getting into this position. To increase the stretch, keep the back of your hand on the table, elbow extended, and wrist down, and then lean back slightly to feel more of a stretch in the forearm.

Hold each stretch for 30 seconds and perform one stretch three different times a day to keep your wrist, forearm, and elbow loose and less painful.

As always, if you experience any lasting pain or discomfort, seek the advice of a healthcare professional.

Good Luck, Laura! Welcome, Patty!

Active Physical Therapy Solutions had to say goodbye to our part-time front desk staff member, Laura Fennessey, who worked here most recently in the afternoons and Tuesday evenings for the last 2 years. She had to resign to become a full-time student. She is studying cosmetology

at BOCES as well as attending Cayuga Community College. She will be missed!

We do, however, have a new, full-time, front desk staff member! Patty Schoonmaker started on Monday, November 13, and will be working 9:00-close on Mondays, Wednesdays, Thursdays, and Fridays, and

12:00-7:00 on Tuesdays.

Thank you in advance for your patience as she learns the ins and outs of how the front desk operates. Please help us make her feel welcome—we're glad to have her help!

Even Santa Claus does ball tables in his "work-out-shop" to get ready for his big day!



Healthy Holiday Tips

Keep these tips in mind to ensure your holiday is not only a fun one, but a healthy one!

- Don't skip meals. It may seem logical to skip lunch to save room for a dinner party. But arriving starved may result in overeating, and drinking on an empty stomach will give you a
- quicker buzz, which is more likely to lead to mindless munching.
- Even if you do not have time to make it to the gym, stay active in other ways. Cleaning, walking, and lifting some light weights at home are all ideas.
- People who sleep less tend

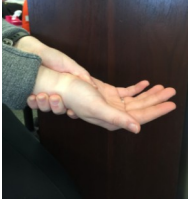
to weigh more. Make sure you get your ZZZs, even during the busy holiday season.

- Make plans for January. Sometimes people feel a post-Christmas let-down, but if you have something to look forward to, you'll be more likely to stay upbeat.

Source: <https://tiltonfitness.wordpress.com/>
page/91



Carpal Tunnel Syndrome



Carpal tunnel syndrome (CTS) continues to be a label commonly given to anyone experiencing pain, numbness, and/or tingling in his or her hands. While

carpal tunnel syndrome is one cause of hand symptoms, it is not the only cause. It continues to be the popular cause.

Carpal tunnel syndrome occurs when the median nerve, which runs from the shoulder through the forearm and into the hand, becomes compressed at the wrist. The median nerve controls sensations to the palm side of the thumb, first two fingers and half of the third finger (but not the little finger), as well as small muscles in the hand. We need to remember that just because a patient experiences "median nerve symptoms" doesn't mean they have CTS. The median nerve can become entrapped at one of six common places from the shoulder to the wrist.

The carpal tunnel itself is a narrow, rigid passageway of ligament and bones at the crease of the hand. It houses the median nerve and finger flexor tendons. Sometimes, thickening from irritated tendons or other swelling narrows the tunnel compressing the median nerve. The result may be pain, weakness, or numbness in the hand and wrist, radiating into the fingers or up the arm.

Symptoms usually start gradually, with frequent burning, tingling, or itching numbness in the palm of the hand and the fingers, especially the thumb and the index and middle fingers. Some patients state that their fingers feel useless and swollen, even though little or no swelling is visible. The symptoms start in one or both hands

during the night, since many people sleep in a fetal position with their wrists and fingers flexed. A person with CTS may wake up needing to "shake out" the hand or wrist. As symptoms worsen, tingling occurs during the day. Decreased grip strength makes it difficult to form a fist, grasp small objects, or perform fine movements. In chronic cases, the muscles at the base of the thumb atrophy. Some people are unable to differentiate between hot and cold by touch.

Carpal tunnel syndrome is often the result of a combination of factors that compress the median nerve in the carpal tunnel, rather than a problem with the nerve itself. Contributing factors include trauma or injury to the wrist that cause swelling, such as sprain or fracture; mechanical problems in the wrist joint; work stress; repeated use of vibrating hand tools; fluid retention during pregnancy or menopause; or the development of a cyst or tumor in the canal. In some cases, no structural cause can be identified. In these cases, the cause is entrapment at another site along the path of the median nerve. Symptoms in all five fingers are not usually caused by a problem in the carpal tunnel and are more commonly associated with shoulder instability or thoracic outlet syndrome.

There is little clinical data to prove that repetitive computer work causes CTS. Repeated motions performed in the course of normal work or other daily activities can result in repetitive motion disorders such as bursitis and tendonitis. Women are three times more likely than men to develop CTS, perhaps because the carpal tunnel itself may be smaller in women than in men. The dominant hand is usually affected first and produces the most severe pain. Carpal tunnel syndrome usually occurs in adults. Patients under the age of 40 are more likely to experience

CTS symptoms due to inflammation of the tendon linings and repetitive compression of the nerve itself. Patients over the age of 40 are more likely to develop CTS symptoms from degenerative changes (arthritis) of the wrist joints and/or degenerative thickening of the flexor tendons in the carpal tunnel.

The risk of developing CTS is not confined to people in a single industry or occupation, but is common in assembly line workers - manufacturing, sewing, finishing, cleaning, and meat, poultry, or fish packing. In fact, CTS is three-times more common among assemblers than among data-entry personnel. A 2001 study by the Mayo Clinic found heavy computer use (up to 7 hours a day) did not increase the risk of developing CTS.

The non-surgical treatment of CTS involves manual therapy such as Active Release Techniques (ART) or Instrument Assisted Soft Tissue Mobilization (IASTM) applied along the entire course of the median nerve. Splints may be used at night for symptom relief allowing for uninterrupted sleep. Once the symptoms reduce, the brace should be abandoned, as long term use of bracing increases the tightness that contributed to the problem in the first place. Patients over the age of 40 are more likely to require surgical release of the carpal tunnel to decompress the median nerve. Patients under the age of 40 are more likely to recover with physical therapy that includes the aforementioned manual therapy techniques. If you are experiencing CTS symptoms, you may want to discuss manual therapy treatment as an alternative prior to pharmaceutical or surgical treatment.

Article by Dale Buchberger,
DC, PT, CSCS

There is little clinical data to prove that repetitive computer work causes CTS. A 2001 study by the Mayo Clinic found heavy computer use (up to 7 hours a day) did not increase the risk of developing CTS

APTS Recipe Box: Paleo Gingerbread Cookies

Ingredients: 1 cup almond flour; 2 tbsp blackstrap molasses; 1 tsp ground cinnamon; 3 tbsp extra virgin coconut oil (or butter), melted; 1 tsp ground ginger; 1/4 tsp ground nutmeg; 1/2 tsp ground cloves; 1/2 tsp baking soda; 1/2 tsp baking powder; 1 1/2 tsp vanilla extract; 1/4 tsp fine grain sea salt.

Instructions: Preheat oven to 350 degrees F and place rack in the middle. Line a baking sheet with parchment paper, set

aside. In a bowl, combine almond flour, spices, baking soda, baking powder, and salt. In another bowl, mix coconut oil, blackstrap molasses, and vanilla extract until well combined. Add wet ingredients to dry ingredients and mix well until a dough forms. You might want to add a couple of tablespoons of almond flour if the dough is too wet or some water if it's too dry. Scoop one tablespoon of mixture, drop onto the lined baking sheet, and press down to form into cookie shapes. Bake for

9-10 minutes. Let cookies cool on the baking sheet (without touching) for 15 minutes, then with the help of a spatula, place cookies onto a rack and let cool completely.

Source: <http://www.theironyou.com/2013/12/paleo-gingerbread-cookies.html>



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Get Well...Get Active...Be Active

Newsletter Edited by Carolyn B. Collier, PTA

**At Active Physical Therapy Solutions,
we utilize the most cutting edge
treatment and management
techniques available. Our goal is to
deliver the best possible healthcare in
a friendly, caring, and well-organized
environment. Our staff is here to
provide active solutions to achieving
your personal goals!**

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Nutrition 101: The Power of Peppermint

As we approach the season of candy canes, it's a perfect time to pay homage to the medicinal herb that gives these winter treats their flavor: peppermint.

Far from just a flavor for candy, the therapeutic effects of fresh peppermint and peppermint essential oil have been known since ancient times. Today, modern research has continued to prove what these ancient cultures already know, which is that peppermint is one of nature's most valuable herbal remedies.

Why might you want to add peppermint to your natural medicine chest?

- * Peppermint oil capsules have been described as "the first drug of choice" in Irritable Bowel Syndrome patients, as it safely helps alleviate symptoms and improve quality of life. Research has shown that it is effective in children and adults alike, enough to reduce symptoms by 50%.
- * Peppermint oil is an effective alternative to drugs for reducing colonic spasms. It may also relax the muscles of your intestines, allowing gas to pass and easing abdominal pain. Try peppermint oil or leaves added to tea for gas relief.
- * In people with functional GI disorders, peppermint may be useful to enhance gastric emptying.
- * Supplementing with 90 mg of peppermint oil, along with caraway oil, improved symptoms of functional dyspepsia in 67% of people. If you have an upset stomach, try drinking a small glass of water with a few drops of peppermint oil added.
- * Peppermint is at least as effective as simethicone in the treatment of colic in infants.
- * Peppermint water helps to prevent nipple cracks and

pain in breastfeeding mothers.

- * Inhaled essential oil of peppermint helped to rapidly regress tuberculosis inflammation, with researchers suggesting it may help prevent recurrences and exacerbation of the disease.
- * Extracts from peppermint leaves may inhibit histamine release, which suggests it may help alleviate hay fever symptoms.
- * A topical treatment of peppermint oil resulted in near-immediate improvement in shingles-associated pain, with the results lasting for two months of follow-up treatment.
- * The aroma of peppermint has been shown to enhance memory and increase alertness.
- * Peppermint oil effectively reduces chemotherapy-induced nausea, and at a reduced cost compared to standard drug-based treatments.
- * Peppermint contains menthol, which may inhibit the growth of prostate cancer.
- * Peppermint may protect against DNA damage and cell death caused by radiation exposure.
- * Peppermint has been shown to help inhibit drug-



resistant herpes simplex virus type 1.

- * Peppermint oil extract has been shown to be superior to the mouthwash chemical chlorhexidine in inhibiting the formation of biofilm formations linked to dental cavities. Powdered peppermint leaves have also been used historically to freshen breath and whiten teeth; you can even add a drop or two directly to your toothpaste.
- * Peppermint oil acts as an expectorant and decongestant, and may help clear your respiratory tract. Use peppermint essential oil as a cold rub on your chest or inhale it through a vaporizer to help clear nasal congestion and relieve cough and cold symptoms.
- * Peppermint oil may help relieve tension headache pain. Try dabbing a few drops on your wrist or a cloth and inhale the aroma. You can also massage the oil directly onto your temples and forehead.
- * Peppermint oil is cooling and energizing. Add a few drops to your bath or dab a few drops directly on your body and get into the tub for near-instant stress relief. You can also put the oil into a burner for a stress-relieving aroma.
- * Try blending peppermint oil into your massage oil, shampoo, body wash, or body lotion. It has antiseptic and antibacterial properties that can help cool your skin and remove dandruff and lice from your scalp!
- * Peppermint contains rosmarinic acid (also found in rosemary) which may help to reduce inflammation-causing chemicals in people with asthma.
- * Peppermint may help to relieve muscle spasms and pain. Try massaging its oil onto sore muscles or adding it to your bath water for muscle pain relief.

Article by Carolyn Collier, PTA

Source: <https://articles.mercola.com/sites/articles/archive/2013/10/14/peppermint-health-benefits.aspx>