

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

APTS Monthly



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Office Hours:

Monday -

8:00am - 5:30pm

Tuesday -

8:00am - 7:00pm

Wednesday -

8:00am - 5:30pm

Thursday -

8:00am - 5:30pm

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8:00am - 4:00pm

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It's Hard to Go Wrong Using Ice

When to use heat or ice on an injury, ache or pain is as common a question in a healthcare office as you will find. While there are generalities that can be followed, it can also be an extremely specific self-treatment. It is very difficult to go wrong with ice. On the contrary, if you put heat on an inflamed body part, there is potential to worsen a condition. So to start with a general rule of thumb in our office is to recommend ice for 20 minutes to the painful body part with at least 40 minutes off before the next ice application. A thin protective layer should be placed between the ice and the skin such as a paper towel or t-shirt. Always inspect the skin after the application. It should be pink and cool, returning to normal before the next ice application.

The majority of injuries or musculoskeletal ailments will respond to ice. Unfortunately most patients fail to ice frequently enough to be effective. For instance, if you have an ankle sprain, you may need to apply ice to the ankle four to five times a day for two or three days for the ice to be effective. If any body part swells, becomes discolored, or causes a loss of function (in this case: the inability to bear weight), you should see a healthcare provider and most likely have an x-ray to rule out a fracture or additional pathology. Applying ice in this case should be for comfort and swelling control while arranging to see a provider.

The best form of cold therapy is ice itself. Your relatives may recommend frozen peas, corn, or other frozen produce. Frozen produce will not supply the same degree of cold

as ice itself. Counter irritants such as rubs that produce a cold sensation do not reduce swelling or inflammation. They are designed to relieve pain by tricking your brain to focus on the cooling or heating sensation produced by the ingredients in the lotion or cream. This is where the term "counter-irritant" comes from. Remember the acronym PRICE therapy when applying ice: Protect, Rest, Ice, Compression, and Elevation.



It is also common for patients to bring up the old adage of ice for the first 24-72 hours and then apply heat. This is a poor rule to follow because it negates the presence of pain and loss of function. If the condition is actively swelling or limiting function (weight bearing, sleep, work, etc.), it is appropriate to apply ice more than 72 hours after the onset of pain or injury.

Living in central New York, I have come to think it is a natural reaction to prefer heat instead of ice. In general, heat usually feels nice and comforting. Unfortunately, more often than not, it is not the right thing to do when it comes to an injury or painful musculoskeletal condition. If you do apply heat, it should be moist in nature. A hot shower or hot bath are good forms of home heat application. There are special heating pads available that are made with a moist sponge or there are also several microwaveable devices available in your local pharmaceutical retailer. One thing that I would absolutely recommend you not use is a dry heating pad. I tell my patients, "If you own a

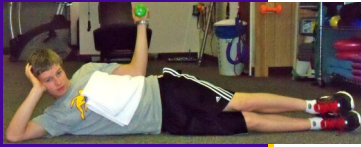
dry heating pad, give it to someone you don't like". Dry heat applications usually make the problem worse by creating local dehydration, edema, and inflammation.

So when is heat the treatment of choice? Moist heat is very helpful when you have a chronic degenerative condition such as a non-inflammatory arthropathy like degenerative joint disease of the knee or back. Unfortunately these conditions usually are associated with some level of pain. In this case, using "contrast therapy" may alleviate the stiffness and the pain. Applying moist heat for 15-20 minutes followed by an ice application for 15-20 minutes and then gentle movement such as walking is a form of contrast therapy that works well for patients with arthritis of a non-inflammatory type.

Never go to bed with an ice pack or heating device applied to a body part. There is a risk of falling asleep with the ice or heat in place and this can result in worsening of the condition or causing further injury or tissue damage. There are areas of the body where certain nerves are very superficial and at risk of injury from prolonged ice or heat application. The more common areas are the outside of the knee, inside of the elbow, the groin, and the lower abdomen. Lastly, if you are unsure or have a question about applying heat or ice to an injured area, call a healthcare provider that knows your medical history and whom you trust.

Article by Dale Buchberger,
DC, PT, CSCS

Exercise of the Month: Sidelying External Rotation



Sidelying external rotation, start and end position (top), exercise position (bottom)

The rotator cuff of the shoulder is an important group of muscles used for stability, so you want to protect it as much as possible. It is a smaller muscle group, so the focus of exercise should be on repetitions and not as much on weight. The following is a great exercise that we use in our office to strengthen the rotator cuff of the shoulder prior to going to the gym.

To perform the exercise, lie on your side with your head supported by your hand (as shown)

or on a pillow. Place a folded up towel under your upper arm to fill the gap between your arm and torso. Bend your elbow to 90 degrees with your thumb pointing up. Keeping this 90 degree angle, rotate your hand up and back, keeping your thumb pointing toward the ceiling while keeping your upper arm and elbow in contact with the towel. If possible, give a slight squeeze of the shoulder blade at the end of the range of motion. Lower arm back to starting position.

Perform 2 sets of this exercise for 10-15 repetitions every day without using a weight. Gradually increase your repetitions to 2 sets of 30. Once that becomes easy, hold a one-pound weight (water bottle or soup can) and drop your repetitions down to 2 sets of 10. Again, gradually build to 2 sets of 30 before increasing weight to 2 pounds. Continue this cycle up to no more than 3 pounds at 2 sets of 30 repetitions to keep your rotator cuff strong and stable!

The majority of injuries or musculoskeletal ailments will respond to ice and the best form of cold therapy is ice itself.

Dr. Buchberger Speaks at ACBSP

On April 12-15, 2018, Dr. Dale Buchberger traveled to San Diego, CA, to teach a 3-hour review course regarding sports injuries of the upper extremity for DACBSP candidates preparing to take their certification examinations. There were more than 300 Doctors of Chiropractic in attendance. He was also present for the remainder of the conference in which the most up to date sports medicine information was being presented prior to publication. Since 1980, the American Chiropractic Board of

Sports Physicians™ (ACBSP™) has led the development of sports medicine certification and has managed a world-class credentialing process that ensures certified sports chiropractors meet competency standards to effectively work with and treat athletes and those engaged in athletic activities. In addition, the ACBSP offers continuing education and research seminars to facilitate the dissemination of the latest scientific knowledge, treatment trends, and best practices for patient care.



Dr. Buchberger pictured with the 2018 Sports Chiropractor of the Year (SCOTY) Dr. Claire Johnson and past SCOTYs at this year's ACBSP Sports Sciences Symposium in San Diego, CA: Dr. Robert Nelson (2008), Dr. Anne Sorrentino (2014), Dr. Claire Johnson (2018), Dr. Dale Buchberger (2009)

Milk & Hip Fractures

“Study: Milk may not be very good for your bones or the body,” reported the *Washington Post* in 2014. But a new, better study says otherwise.

Scientists tracked 80,000 women and 43,000 men for roughly 32 years. Those who drank at least one glass of (mostly skim or low-fat) milk a

day had a 17 percent lower risk of breaking a hip than those who drank less than one glass a week. Those who drank at least two glasses a day had a 23 percent lower risk.

Cheese eaters had no lower risk. Ditto for yogurt eaters, though few people ate even one serving a day.

This study isn't proof that milk prevents hip fractures, but it counters some earlier reports that milk doesn't protect bones.

Osteoporos. Int. 2017. doi:10.1007/s00198-017-4285-8.

Source: Nutrition Action Healthletter, January/February 2018.



Freedom of Choice



You are the most important member of your own health care team, and you are entitled to choose the most appropriate health care professional to meet your goals. The American Physical Therapy Association (APTA) has provided the following guidelines for choosing a physical therapist for your care.

Freedom of Choice You have the freedom to choose your own physical therapist. Most states allow you to go directly to a physical therapist without getting a physician's referral first. Currently, 46 states allow people to go directly to a physical therapist without a physician's referral (all but Alabama, Indiana, Michigan, and Oklahoma).

Keep in mind that your insurance policy may require a visit to the primary care physician first or may limit your access to preferred providers only.

Your physician may refer you for physical therapy that is to be provided in the physician's office, or to a facility in which the physician has a financial

interest. If this is your situation, be aware that you have the right to choose your own physical therapist and that you are not obligated to receive physical therapy in any specific facility. Always insist that your physical therapy be provided by a licensed physical therapist.

Physical therapists who are members of APTA are bound by the Association's Code of Ethics and are especially committed to providing competent and compassionate care.

How to Choose a Physical Therapist Make sure that you receive physical therapy from a licensed physical therapist. Physical therapists are professional health care providers who are licensed by the state in which they practice. If you are receiving physical therapy from a physical therapist assistant, be sure that he or she is supervised by a licensed physical therapist.

Ask the physical therapist's clinic if it participates with your insurance company. Receiving care from a participating physical therapist should minimize your financial responsibility. There may be good reasons, however, to see a physical therapist who does not participate with your insurance plan. If you need a physical therapist who has special skills related to your particular condition - or if the location or other aspects of the care or the facility meet your needs - this may be a good choice for you.

Specialization Many physical thera-

pists specialize in treating specific areas of the body, such as the back, neck, knee, hand, or shoulder, or they may concentrate their practice on pre- and postnatal care, sports injuries, stroke rehabilitation, or one of many other areas or physical therapy. Physical therapists may also be certified by the American Board of Physical Therapy Specialties (ABPTS) in eight specialty areas of physical therapy: orthopedics, sports, geriatrics, pediatrics, cardiopulmonary, neurology, women's health, and clinical electrophysiology.

Your Appointment Your first visit should include an evaluation by the physical therapist. Your physical therapist will perform an examination to identify current and potential problems. Based on the results of the examination, and considering your specific goals, your physical therapist will design a plan of care to include specific interventions and will propose a timetable to achieve these goals and optimize your movement and function. Your physical therapist will likely provide you with instructions to perform exercises at home to facilitate your recovery.

You should feel comfortable asking your physical therapist any questions regarding your course of care, including specifics regarding interventions and expectations.

Article by Carolyn Collier, PTA
Source: <http://www.moveforwardpt.com/resources/choose.aspx>

Be aware that you have the right to choose your own physical therapist and that you are not obligated to receive physical therapy in any specific facility. Always insist that your physical therapy be provided by a licensed physical therapist.

APTS Recipe Box: Mango and Banana Ice Cream Pops

This recipe uses non-dairy milk, which makes it vegan, gluten free, and dairy free. These are perfect for a hot summer day!

Ingredients: 2 very ripe bananas; 1 very ripe mango; 2 teaspoons vanilla bean paste; 5 tablespoons passionfruit; a dash of soy or other non-dairy milk

Instructions: Peel and chop bananas into small pieces and place in a container in the freezer. Do the same for the mango. Allow to freeze completely. Once frozen, put the mango in the food processor and add the passionfruit.

Blend until it becomes a smooth consistency like sorbet. Place in a container and put back into the freezer. Next, put the bananas into the food processor. Add the vanilla bean paste. Again, blend until it becomes a sorbet-like consistency. Add a small amount of non-dairy milk to achieve the desired consistency, if needed. Then, using some clear ice pop containers (so you can see the layers being formed), add a teaspoon of the mango sorbet to the bottom of the container. Place a teaspoon of banana sorbet on top. Continue to add alternative layers of fruit, and you can make the layers as thin or as thick as you want. Work quickly so as to not let the sorbet

melt too much; you want the sorbet soft enough to spread but not too soft that the layers will blend together. (If you find the sorbet getting too soft, just put it back into the freezer for a few minutes before continuing.) Once the container is full, put a popsicle stick in the center and put it back into the freezer to set.

Source: www.onegreenplanet.org/vegan-food/recipe-layered-mango-and-banana-ice-cream/



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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!

...BECAUSE LIFE SHOULD BE

ACTIVE!

Nutrition 101: What Milk?

Plant milks are becoming more popular these days. Why? Non-dairy is better for the planet, for animals, and many people believe it's better for their health. All "milks" are not created equal. Here's a guide:

Know what you're missing. Dairy milk is naturally rich in nutrients. Among them: calcium (30% of the Daily Value per cup), vitamin B-12 (20%), and potassium (10%). Dairy milks also add 25% of the DV for vitamin D. Many non-dairy milks add at least that much calcium and D. Only soy milk naturally matches dairy's potassium, though some pea milks add enough to rival soy. Some milks boast that they're "soy-free" but if you like soy and want its protein, healthy fat, and potassium, there's no reason to drop it. Many plant milks don't add B-12. If you're a vegan, take a multivitamin. Any milk made from plants (soy, nuts, grains, etc.) has no cholesterol. It also has no lactose. Most non-dairy milks are also naturally gluten-free. (Still always check the label.) The controversial thickener carrageenan is also gone from most non-dairy milks. Most almond milks have no more than 4-6 nuts per cup. If you want a creamier milk that's made with unsaturated fat, go for more nuts. This also means you'll get more calories than regular nut milks, but this doesn't mean you'll get any more protein, calcium, or vitamin D.



protein, look for at least 7 grams per cup. Dairy provides 8 grams. That means nearly all almond, cashew, coconut, flax, rice, and other nut milks are out. They typically have 0-1 gram of protein per cup. But most soy and pea milks are in. (Some light or sweetened soy milks have just 5 or 6 grams.) Your best shot at a non-dairy milk that tastes like regular milk is pea protein.

Limit added sugar. One cup of dairy milk has 3 tsp (12 grams) of naturally occurring lactose (milk sugar). Most non-dairy milks naturally have 0-2 grams of sugar. Anything more than that is added. Some rice and oat

Get enough protein. Protein may not matter if you just want a low-calorie liquid to blend into your yogurt smoothie. But if you're counting on milk for

milks have as much as 20 grams of sugar because companies use enzymes to break down their starches into sugars. That sugar was considered added sugar. Who needs added sugar anyway? Plenty of unsweetened non-dairy milks taste good. Don't like unsweetened? Most sweetened "original" non-dairy milks have just 1-1 1/2 tsp of added sugar, which is far less than most vanillas (1 1/2-3 tsp) or chocolates (3-5 tsp). The best tip is to check the label. One brand of "hint of honey" has 2 tsp of added sugar per cup, while another "lightly sweetened" variety has 4 tsp per cup. (You call that *lightly*?)

Get healthy fats. If you drink dairy milk, stick with 1% or fat-free to limit saturated fat. For non-dairy, don't worry about the fat in nuts, seeds, and soy. It's the healthier, unsaturated kind, just avoid coconut milk. Coconut milk raises your cholesterol via longer-chain saturated fatty acids.

Skip rice milk. Arsenic is a human carcinogen, and rice soaks it up from soil and water. A half-cup of rice milk could put an adult at the daily arsenic limit set by *Consumer Reports*. Kids under 5 should not drink rice milk daily.

Article by Carolyn Collier, PTA

Source: *Nutrition Action Healthletter*, January/February 2018.