



APRIL EDITION

Welcome to the April 2014 issue of News@Movehappy.

For more information and news, follow us at: www.facebook.com/movehappy

And be sure to look out for our new website: www.movehappy.com.au

Movehappy News

It's the sport of Kings...." Its better than diamond rings.... Its football"

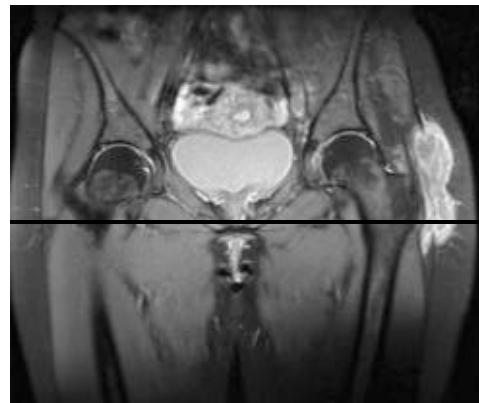
Now I know that this song was sung by Goldie Hawn about American football (the eighties movie Wildcats for other lovers of eighties pop culture), and the picture below is of Ray playing Gaelic football, but whatever, its footy time.



This year we will again be providing coverage to many of the football grounds around town including Marist (Dave), St Edmunds (Will and Ads) and Grammer (James and Chris) for Rugby Union and for Eastlake AFL who now play in the NEAFL (Dave and Ben). Remember as mentioned a few times this year, though football is an injurious sport, you can negate some of this risk with a Movehappy preseason Sports Ready screening and an appropriate prehabilitation program of strengthening and stretching.

Condition of the month

Trochanteric Pain Syndrome.



A common condition that we see here in the clinic, particularly in women, is pain on the outside of the hip. This pain tends to come under a number of names including trochanteric bursitis, gluteus medius and minimus tendonopathy, and gluteus medius or minimus tearing. In truth, all three of these conditions tend to overlap, with the tendon tearing being the end stage of the pathology. All have in common pain on the outside of the hip that tends to come on slowly over time, rather than suddenly. It is associated with tenderness to touch, pain on climbing stairs, rising out of chairs, and particularly, pain at night.

The condition represents a biomechanical breakdown in which the lateral (outside) hip begins to undergo too much compression. This can be from sitting in chairs that are too deep (with the knees being higher than the hips), lying on hard surfaces, sitting with knees together and feet out, a loss of hip extension range of motion, and weakness of the hip abductor (buttock) muscles which allows the leg to drop into adduction (you can see that position in the above x ray).

Like all conditions, this condition is best treated in the early stages, as once the tendon tears, the fix is much harder to bring about, and much slower.

Here at Movehappy we try to address the causative

factors of the compression rather than simply treat the pain itself. This involves first addressing any pelvis asymmetry that might be present. We then aim to restore the hip extension range of motion to allow the posterior gluts to work, and simultaneously activate the deepest portion of the hip, the gluteus minimus muscle. This work requires the use of the real time ultrasound, as often this muscle is completely quiet, having been overtaken by the more superficial muscles.

In some cases, we will refer of for a cortisone injection, particularly in the presence of the bursal inflammation, or if the pain is so severe that it is preventing the exercises from being performed.

If any tendon damage is present this condition will take a minimum of three months to rehabilitate, but it can take up to nine to fully resolve.

If you or someone you know suffers from this pain, get an assessment today. Unfortunately it does not tend to spontaneously resolve and many of the patterns that lead to this condition also lead to hip osteoarthritis.

Exercise of the Month

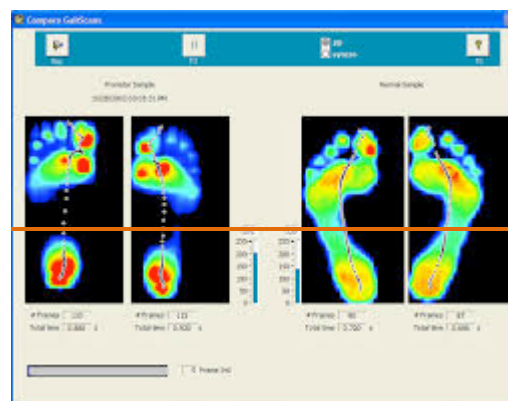
Deep Hip activation using RTUS

As mentioned earlier, reducing compression of the deeper muscles of the hip is one of the key elements to relieving the pain of this condition. This involves loosening the muscle on the top through massage and needling, and restoring hip extension range of motion. It also “waking up” the deepest layer of muscle, the gluteus minimus. We do this here at Movehappy though the use of real time ultrasound. This means that we can show you your deepest muscle, the gluteus minimus and teach you how to activate it in real time. Often this muscle is inhibited and will be difficult to mentally “find”. It is important that we get this timing of contractions right, so that the deepest muscle turns on before the more superficial ones thus preventing the tendon compression and damage.

Product of the Month

GAIT SCAN ORTHOTICS.

As the lateral hip pathologies are complex and require such a multifactorial treatment program, this month we are running a special on the Gait Scan custom made orthotics. Using the Gait scan technology we take a digital footprint as you walk over our plate. This gives us a 3d image of your foot and we then have a custom made orthotic built in Canada. These orthotics normally retail for \$400 but this month they will walk out the door for \$300. These orthotics particularly help those who have a pronated foot, which tends to drop the hip into internal rotation and adduction. This month's offer, however is open to all clients, not just those with hip pain.



REGISTER NOW

Fat or fiction: who are you going to believe?

Remember to register for the next nutrition seminar now. The last one sold out. If you have issues with chronic inflammation or weight management this could be the seminar for you!

MOVEHAPPY TRIVIA

Where in the body would you find the cubital fossa?

*How many different **types** of muscle are there in the body? There are three types of muscle: skeletal, smooth, and cardiac.*

To opt out of this email newsletter, send an email with the subject OPT OUT to mail@movehappy.com.au