

# I Bodies in Motion

TOTAL HEALTH CENTER NEWS LETTER

“Expert Care with Caring Hands”

Volume 39

Total Health Center is a full service physical/occupational therapy clinic where expert patient care is our first priority. We treat a full range of orthopedic and neurologic conditions. Our clinic has therapists with advanced training and specialist certifications. Our goal is to help you, the patient, reach your full potential.

## Your Feet Can Cause Knee Pain



Although the feet are essential for proper running form and good biomechanics, runners often neglect them. A runner with an incorrectly aligned foot can experience pain in the lower body, most often in the knee. How the foot causes such discomfort revolves around **pronation**, the inward roll of the foot and the flattening of the arch that takes place with each step.

A slight pronation is a normal part of running and is usually harmless. However, many runners fall into the **over pronator** category. While many people, even runners, over pronate for years with no resulting injury, the undue pressure on the knee joint may cause it to become misaligned. The result is extra rubbing and strain on the knee joint, which results in pain. Soon, pain may spread throughout the body's kinetic chain, involving the feet, shins, knees, hips and even the lower back.

How can you tell if you over pronate? We can perform a **gait analysis**, which will reveal whether you have a problem. A quick, informal test you can perform at home involves wetting the bottoms of your feet and standing in a place where the water will show up clearly, such as the kitchen floor. If your footprint is almost the same width for the entire length of your foot, and does not show a different shape where your arch should be, then you may have a pronation problem. Generally speaking, the more excessive the pronation, the more likely you will experience other problems.

The easiest way to correct over pronation is to wear **supportive shoes** or use **orthotics** in your footwear to correct the mechanics of your stride. We can work with your podiatrist to develop a program of **gait rehabilitation**,

Call us at (269) 968-0888  
Mon to Thurs 7am-7pm  
Fridays 7am-4pm



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## Recipe of the Month

### Fruity Granola

#### Ingredients:

- 1 tablespoon butter
- 1 cup chopped onion
- 2 1/2 tablespoons all-purpose flour
- 3 cups chopped red potato (about 1 pound)
- 1 1/4 cups 1% low-fat milk
- 3/4 cup fat-free, lower-sodium chicken broth
- 1/2 cup water
- 1/2 cup (2 ounces) shredded reduced-fat sharp cheddar cheese
- 1/8 teaspoon ground red pepper
- 2 tablespoons chopped green onions

#### Directions:

Melt butter in a medium

which includes the use of orthotics and **strengthening exercises** to adjust the pressure on your knees and improve the gait mechanics.

If you are having trouble with your knees or hips, contact us to achieve the best possible outcome. We can help you improve your running style and reduce or significantly alleviate your pain.

## A Tale of Two Tendons: de Quervain Syndrome



**De Quervain syndrome**, also called de Quervain tenosynovitis (DQT), is a problem in people who make a repetitive motion with their hand, wrist and thumb. The motion can be involved with pursuits ranging from trimming bushes to factory work to typing to tennis. Fritz de Quervain, a Swiss surgeon, is credited with identifying the syndrome in 1895.

In DQT, **the fibrous sheath surrounding two tendons is inflamed**. Both tendons—the extensor pollicis brevis (EPB) and abductor pollicis longus (APL)—are located **on the inside edge of the wrist on the thumb side**. The sheath is like a tunnel through which the tendons travel, and it is lined with a tissue called the tenosynovium. When that becomes **inflamed from overuse**, the movement of the tendons within is restricted and painful.

To relieve the pain, **over-the-counter anti-inflammatory medication** is usually a good start, with your physician's approval, as is **icing**. If the pain still does not resolve, a **cortisone injection** will likely help. Just as important is what you do *not* do. **Give the tendons a rest**. Avoid the activity that caused the DQT—or at least avoid performing it in the same way—along with any others that would strain the area.

To help you rest the affected area, we will likely prescribe a device called a **thumb-spica splint** for your thumb and forearm. This will immobilize the wrist and lower thumb joints. While it can be cumbersome, the splint is necessary to promote proper healing. After the tenosynovium has sufficiently healed, we will develop a program of exercises to **strengthen your wrist and improve your range of motion**.

To prevent a recurrence, we will **evaluate the motions that caused the DQT** in the first place. If you developed DQT at work, for instance, we will check your workstation and see how you typically sit and use your hands there (keyboarding, texting, etc.). Then we will make recommendations for healthier positions and movements.

The good news is that while DQT can be quite painful, it is fortunately a condition that can often be treated quite successfully. Performing the right exercises and making adjustments in your activities will likely get you back to full range of motion, free from pain.

saucepan over medium-high heat. Add onion to pan; sauté 5 minutes or until onion is tender. Sprinkle with flour; cook 1 minute, stirring onion mixture constantly. Add potato, milk, broth, and 1/2 cup water to pan; bring to a boil. Cover, reduce heat, and simmer 10 minutes. Add 1/2 cup reduced-fat sharp cheddar cheese and ground red pepper; cook 2 minutes or until cheese melts, stirring frequently. Top each serving evenly with 1 1/2 teaspoons chopped green onions

## Patient Testimonials

I feel my body has responded well to your therapy. I'm equipped to call and help myself in the future.  
- anonymous

It was a pleasure coming to your clinic. Nice warm atmosphere and very professional.  
- C. Cranson

Very professional and friendly.  
- S. Emerling