

MEDICAL MESSENGER

ANNIVERSARY SPECIAL EDITION #001

THANK YOU
READERS

We Thank you for
your overwhelming
love and support

#1 TRENDING
WOMEN'S DAY

30+ YEARS OF
MEDICAL SERVICE



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The Complete Oral
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Dr K. Hariharan
Diabetologist & General
Physician



Dr S. Padmavathy
Gynaecologist



Dr D. Saravanan
Anaesthetist



Dr K.V. Pandian
Physiotherapist



Dr S. Syed Afridi
General Physician



Dr R. Vignesh
General Physician



Dr S. Gokula Krishnan
General Physician



Dr . M. G. Ravanagomagan
Paediatrician



Dr U. Nandhinee
Paediatrician



Dr V. S. Prema Subathiraa
Psychiatrist



Dr Subha Hariharan
Dental Surgeon



Dr D. Mahalakshmi
Orthodontist



Dr Anitha Logaranjani
Periodontist



Dr G. D. Nandini
Oral and Maxillofacial
Surgeon



Dr V. Revathy
Paediatric and Preventive
Dentist



**Dr Jedidiah Fredrick
Abisheg**
Oral and Maxillofacial
Surgeon



Dr C. R. Saravanan
Anaesthetist



**Dr Subhiksha
Chakkaravarthi**
Cleft Lip and Palate
Specialist



Dr R. Vasanth Kumar
Implant Consultant

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From the Editorial

Dear Readers, My warmest welcome to the 13th edition (March - April 2024) and 1st Anniversary version of our newsletter - Medical Messenger.

At the outset, let me thank every one of our patrons profusely for shaping this anniversary edition of the **MEDICAL MESSENGER**; without them, this would not have been possible.

Consistent feedback, suggestions, reminders, and appreciation from our dear patrons kept us Alive.

My journey as an editor and a contributor seemed very challenging. It was a task to collect, collate and contribute pertinent information and ensure it does not repeat.

When I look back at the end of a year's effort, I see nothing more than a sigh of relief for accomplishing. Honestly, I thoroughly enjoyed this.

I would fail if I did not thank my father and director of K.H NURSING HOME, Dr K. Hariharan, for encouraging and supporting me at every step to make this Medical Messenger a reality.

Birth of Medical Messenger

To highlight and inform the public about the Women's Day 2023 celebration and its weeklong Health awareness programme, the **MEDICAL MESSENGER** came into existence in March 2023.

The scope of our newsletter was to deliver pertinent health information from varied fields of medicine.

We found the Medical Messenger increasing in content and pages as months passed. Hyperlinks to K H NURSING HOME and SMILECARE's regular updates were inserted.

To spice it up, adding cookery and mindful diet recipes was a hit. We were hoping to add more of it in future editions.

Holistic and wellness healthcare camps and classes like Yoga and Mudra therapy by Mr Parthiban R, MCA, MSc (Yoga), Yoga Therapist and Mudra Teacher, Founder and Managing Trustee of SVD Foundation was unique and welcomed by many, especially elder and seniors.

The monthly health assessment free camps like Breath Free Camp (Asthma Camp) and dietician camp are being updated

in the NEWSLETTER to emphasize the importance of health check-ups and diligent measures taken by Doctors of K H Nursing Home & Smile Care.

Anniversary Special edition March-April 2024

This special edition comes with lots of surprises and interesting elements. My heartfelt gratitude to special edition contributors,

- Ophthalmologist - Dr Srividya B., M.B.B.S., D.O.DNB, FICO(UK), FRCS (Glas.)
- Home maker- Mrs. Anu Rajan. R. S., M.S.W., D/O Late Dr R. Nirmala M.B.B.S., DGO.,

I take the privilege to appreciate and thank Dr Srividya Madam for willingly accepting my proposal to conduct the Women's Day Free Eye Test Camp at her centre, "**I CARE EYE CARE CLINIC**", Chromepet, Chennai. Many homemakers, entrepreneurs, and seniors benefited from this.

At this juncture, I would like to thank the K H Physio Team headed by Dr K. V. Pandian for their consistent article contribution related to Physical disabilities, rehabilitation and exercises.

This entire endeavour owes its success to the invaluable contributions of Dr R. S. Arvind Bharani, our dynamic head of digital marketing and media at K H. With a Ph.D. in Bioengineering, he goes above and beyond to curate captivating collages, eye-catching posters, vibrant banners, engaging newsletters, and compelling social media videos. Let us applaud his dedication and tireless efforts to make our outreach efforts successful.

To summarise, last but not least, I thank the almighty for his unbound grace and blessings on all of us to make this happen. I assure you all that it is an interesting read ahead.

Please stay connected with us to embrace a healthy lifestyle and adore the beautiful smile on your face. Thank you,

Best Regards,

Dr Subha Hariharan

Editor

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Special message from Dr K. Hariharan

Thanks for your wonderful patronage. We have successfully completed 12 issues and one year of monthly newsletter. We have made every effort to enlighten society on various health issues.

We are glad we received positive feedback and appreciation. Please give your kind patronage for subsequent years.

Happy Tamil New Year, 2024.



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Home Maker and Career Woman

Mrs. Anurajan. R. S.

Happy Woman's Day – 8 March

Dedicated to my mom, Dr. Nirmala

Both homemaking and career are important for women of this era. It may be mostly a choice to choose one, but it is tough and practically impossible at the same time.

However, learning to balance both will surely lead to a very peaceful, happy life.

The first and most important thing is systematic planning; our schedule gives us a comfortable space to work at home and in the workplace.

Training ourselves from a young age to do things systematically and plan everyday schedules reduces tension.

Mostly, there will be no stress when we love to do our work.

So, first, we should develop the habit of loving work at home or in the workplace. So planning and loving our work makes it easy and stress-free for us.

Again, relieved from stress and tension, a woman will have peace of mind to care for her health and the well-being of her children and family.

You can be a night or early bird; be comfortable and plan your schedule accordingly.

More than everything, your health and fitness of both mind and body are very important for your career and homemaking.

Our parents, especially our mothers, were mostly first generation to work professionally and at home. They knew how to handle both their professional and home.

For example, my mom was an efficient medical practitioner and an excellent homemaker.

She managed both ends very nicely and was talented to the core. She was a very lovable, wonderful mother and equally a lovable and excellent doctor.

She was also a very efficient cook who cooked various food and sweets. She could also stitch and do beautiful embroidery work.

Is it easy or challenging to manage a career and home? Yes, times are hard.

Women face many difficulties while travelling for jobs and at work.

Women should be trained mentally to manage these hurdles from a young age.

Our attitude to facing any difficulty shall help us manage our work at home and in the workplace.

A woman's love and trust towards her family shall be a boon for her.

Her family members will help her do household chores. That would make her efficiently handle her profession. It is like two eyes – both are exceptional for a woman.

Like the women of our previous generation, if we could allot time in a balanced manner, we could be an efficient professional and wonderful home manner.

We should learn to use our gadgets in a useful manner – we should stop our distractions towards unwanted and useless things.

We should also develop positive habits and hobbies to keep us fit. It is all about time and attitude, which could do wonders in our career and home.



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Empowering Women: Nurturing Eye Health Across Generations Dr Srividhya

When Dr Subha Hariharan asked me to write an article on women and eye health, I started thinking about how, as women, we can make a difference in our lives and the lives of those around us.

I would like to break up this article into three parts for

- Young parents.
- Parents with teenage children.
- Grandparents.

Young Parents

Sleepless nights, juggling a job with household work and now a new addition to the family, many young mothers present with headaches, mostly due to stress and sleepless nights, a few due to power changes associated with hormonal changes of pregnancy.

A few mothers, especially those with hormone therapy, can experience blurring of central vision due to fluid accumulation in the retina, a condition called central serous retinopathy.

This usually resolves with a stoppage of hormone treatment; rarely, a few may require laser treatment.

Avoiding stress, eating a balanced healthy diet, and getting adequate sleep go a long way in resolving many of these problems.

Among young mothers, a tendency I have been noting is that they give cellphones or switch on the television when they are engaged in work.

Later, these parents came and told me the child was always on the cellphone/television.

We should remember that children tend to emulate what they see around them in their early years.

It is we who introduce them to these gadgets, and then when they get addicted, we get angry with them.

Childhood obesity refractive errors are rising because our children are not spending time outdoors. It is predicted that 98% of our children will have short-sightedness by 2050.

How can we prevent this? Trying to finish our household chores before the child wakes up gives us time to engage the child in play; reading to children will introduce them to another world, which, if properly channelled, can increase their vocabulary brain power and reduce their dependency on gadgets.

Parents of teenage children

Moving on to mothers with teenage children, there is an alarming increase in many mothers in their late 30s and early 40s presenting with Retinal vein Occlusion due to hypertension.

They present with blurring of vision as the first symptom due to undiagnosed hypertension.

Children not performing to parental expectations and work-related stress are common causes.

Trying to spend a little time, at least 30 minutes to 60 minutes, on some physical activity will help.

Grandparents

Grandparents, our joint family system revolves around you. With the mother and father working often, the full responsibility for the grandchildren's upbringing is upon you.

Coupled with age-related issues, this is a challenging time for many of you.

The common diseases women may face as age advances are cataracts, glaucoma, macular degeneration, and diabetic retinopathy.

Periodic eye evaluation once a year will help to diagnose and treat many of these diseases. Make it a priority to take care of your health and exercise regularly.

I would also request grandparents not to give their cell phones to their grandchildren, especially when their parents are not there, as today's children are very tech-savvy, and you cannot monitor their activities.

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Vertigo

Dr K. V. Pandiyan

Introduction

Vertigo refers to the sensation of dizziness or feeling like the world is spinning around you.

It occurs when there's an issue with the inner ear's vestibular system, responsible for maintaining our balance.

There are two types of vertigo:

- Subjective vertigo: a feeling that you are moving
- Objective vertigo: a feeling that things around you are moving.

Vertigo can also be caused by a disruption in certain areas of the brain or nerves supplying the ear.

Therefore, you must receive medical advice as soon as you start experiencing symptoms of vertigo.

Causes

There are various causes of vertigo. It is important to establish the exact reason behind your symptoms to give the best possible outcome of your physiotherapy treatment.

Most cases of vertigo are mild and only last for a short period, but unfortunately, this can become an ongoing issue for some people. Possible causes of vertigo include:

- Labyrinthitis
- Vestibular Migraines
- A bleed in the brain
- A sudden movement change in direction
- Head injury
- Multiple sclerosis (MS)
- Benign paroxysmal positional vertigo (BPPV)
- Vestibular neuritis
- Ménière's disease
- Acoustic Neuroma

Symptoms

There are a number of symptoms associated with vertigo other than dizziness and spinning sensations. Potential symptoms of vertigo include:

- Nausea
- Dizziness
- Headaches
- Vomiting
- Feeling giddy
- Anxiety/ Panic
- Loss of hearing
- Ringing in the ears (tinnitus)
- Unsteady when standing or walking
- Loss of balance
- Weakness
- Sensitivity to light or sound
- Unintentional eye movement (nystagmus)
- Eye pain
- Fatigue

Diagnosis

There are many different ways of diagnosing vertigo depending on what has caused the condition.

Often, you will be advised to have a variety of tests to accurately confirm vertigo so that your treatment is as effective as possible. Tests may include:

- Recording a full history of symptoms
- Balance tests
- Hallpike's manoeuvre: a test that temporarily brings on symptoms of vertigo
- Hearing tests, Eye test & Blood tests
- CT/ MRI scans

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Treatment

Physiotherapy is a very effective way to help minimise the symptoms of vertigo.

Physiotherapy can help with vertigo in the following ways:

- Provide a diagnosis and advice on symptom management
- Improve balance
- Reduce feelings of dizziness and spinning
- Reduce walking and standing difficulties
- Minimise headaches
- Reduce the episodes of vertigo

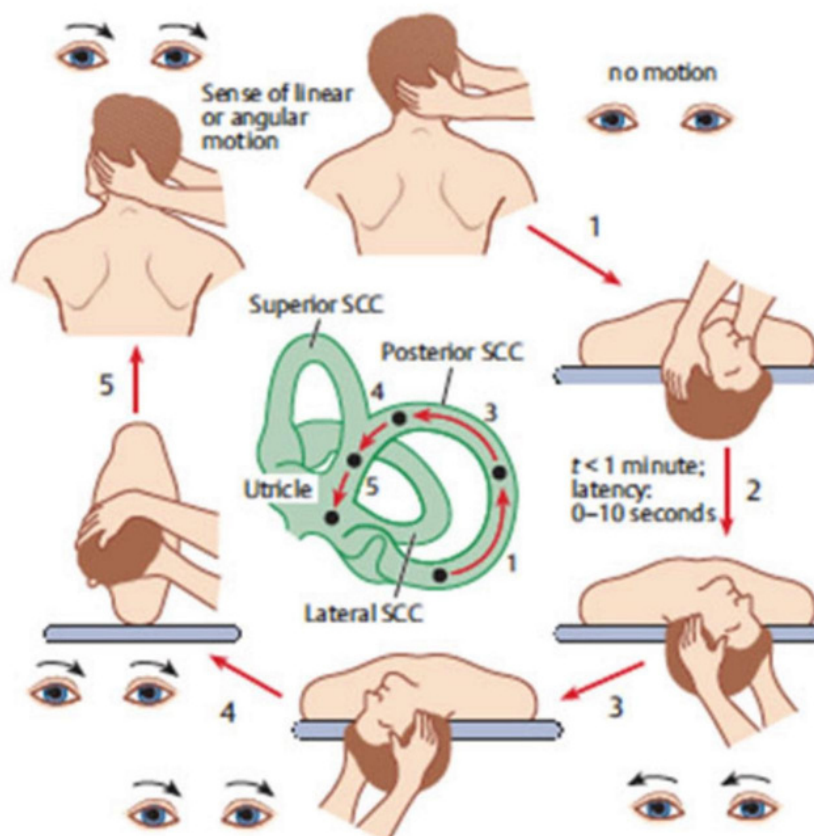
Physiotherapy Management

The physiotherapy chosen to treat your condition will depend on the exact symptoms and severity of vertigo.

Physiotherapy may include:

- The Epley Manoeuvre: This technique aims to move the otoconia pieces (crystals) that disrupt the vestibular system to areas that will not cause any symptoms. Four specific movements are carried out to try and move the crystals.
- Vestibular rehabilitation - which includes special exercises designed to get your vestibular system functioning normally again
- Neck mobilisations
- Balance retraining
- Pacing
- Activity adaptation advice

Epley Manoeuvre



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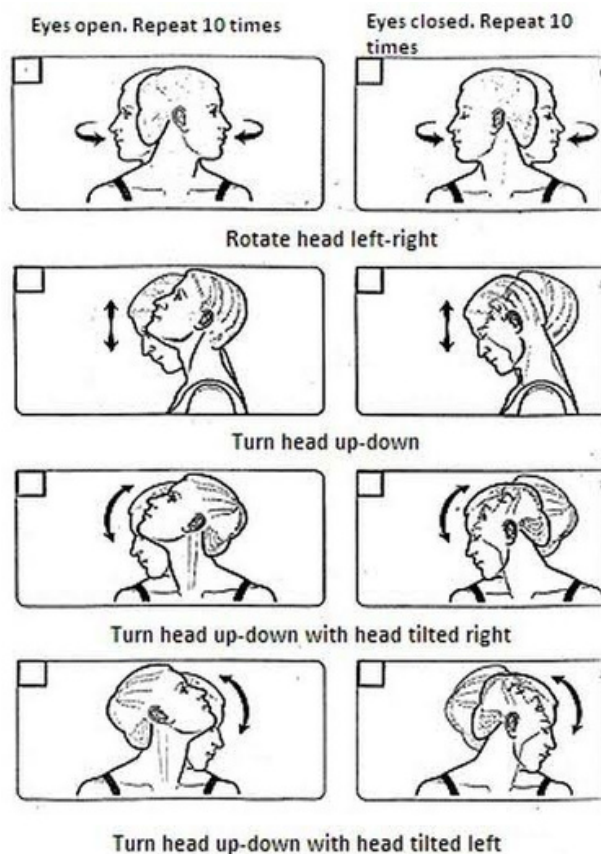
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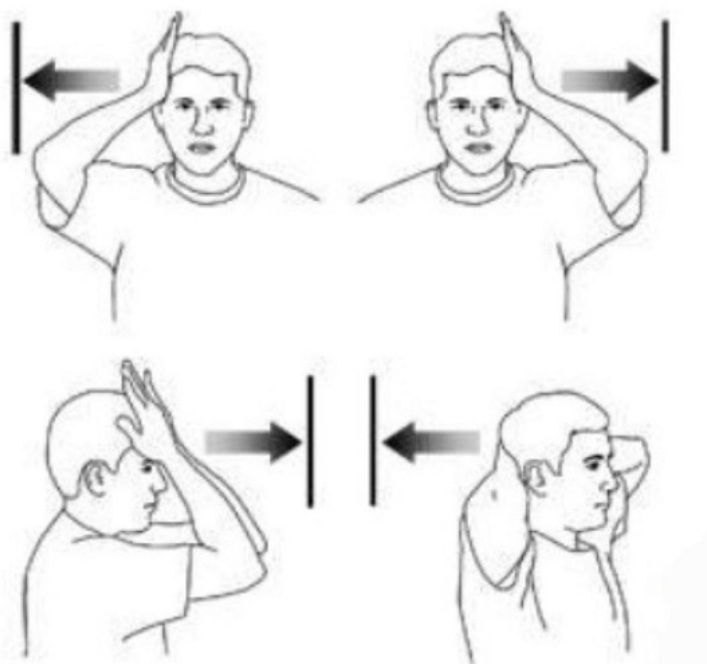
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Isometric Neck Exercise



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Mudra Therapy

Mr R. Parthiban



What is Mudra ?

Mudra is a simple yoga posture that channels the energy flow in our body.

By doing this, one can treat the most common diseases and discomforts in the physical body.

Regular practice of these mudras will contribute to your complete good health and can be used as a preventive measure.

Benefits of Mudra practice

- Easy to do.
- Work is equivalent to many yoga asana postures.
- Self-healing method.
- Helps with regular breathing and meditation practice.
- Certain mudras can bring in lifestyle changes.
- Wish fulfilling mudra can help you focus and achieve the goal.

Pancha Bootha / Five Elements

Pancha Bootha are the basic components of anything in this world.

The combination of which works for millions of objects and entities.

The basic Pancha bootha / five elements are

- Earth / Prithvi
- Water / Jala / Apu
- Fire / Agni
- Air / Vayu
- Akash / Space / Ether

General instructions for all Mudras

Duration:

Minimum 8 minutes to Maximum 24 minutes.

Sitting posture:

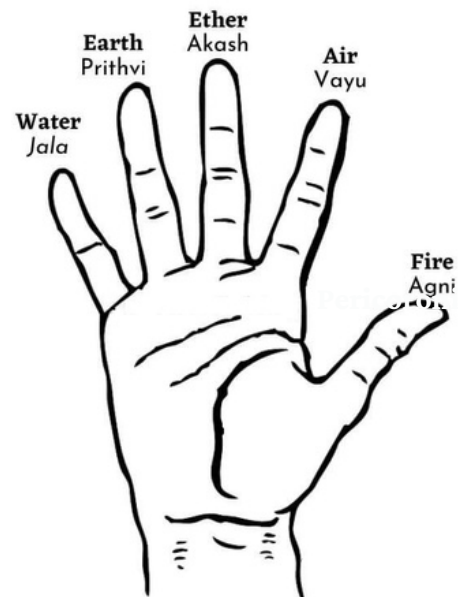
Comfortable sitting posture with neck and back straight (else you can sit in a chair).

Age limit:

Minimum 7+ years and no maximum age limits.

Note:

People with high Blood pressure, low Blood pressure and Heart diseases, Pregnant and to be Pregnant, take advice personally before practice.



SVD Foundation - No Fees - MUDRA THERAPY Level 1 Class.

Date: From 06-APR-2024 to 28 -APR-2024 (Saturday and Sunday - Morning: 7.00 AM to 8.00 AM (IST)) - Online Class
Topic: Mudra, Pranayama, Meditation, Healing, and Needs Fulfillment Techniques.

Join the WhatsApp group for class details

Mentor: Mr.Parthiban R, MSc (Yoga) S-VYASA University, Yoga Therapist, Mudra Teacher, and Founder of SVD Foundation.



Fact of the month

Unlocking the Power of Vitamin D: Your Guide to Sunshine Health

Dr Arvind Bharani. R. S.

Vitamin D:

Vitamin D is a vital essential nutrient for bone health, immune function, and overall vitality.

Types:

Vitamin D2 (ergocalciferol): Derived from plants and fortified foods, this form of Vitamin D is less potent than D3.

Vitamin D3 (cholecalciferol): Synthesized in the skin upon exposure to sunlight, it is the most biologically active form.

Dietary Riches:

These are found in fatty fish like salmon, fortified dairy products, cereals, and supplements, ensuring adequate intake.

Deficiency Dangers:

Linked to weakened bones, increased susceptibility to infections, and mood disorders like depression.

Optimal Wellness:

Prioritize regular sunlight exposure and maintain a balanced diet with Vitamin D-rich foods for robust health.



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Lab Corner:

Comprehensive Laboratory Services at **Sai Clinical Laboratory**. Discover a wide range of laboratory services available at Sai Clinical Laboratory, located within K H Nursing Home. From **Biochemistry** to **Haematology**, **Serology** to **Microbiology**, we offer precise diagnostics to support your health journey. Trust our expertise for accurate results and exceptional care. Your well-being is our priority. Visit us today.



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Awareness Corner:




Free Interactive Talk

Understanding Diagnostic Tests: Lab, Imaging, Endoscopy & Biopsy Explained



Dr. Syed Afridi. S, M.B.B.S,
General Physician
பொது நல மருத்துவர்



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Understanding Diagnostic Tests: Lab, Imaging, Endoscopy & Biopsy Explained

Discover the world of diagnostic tests and their crucial role in healthcare. From lab tests to imaging procedures, endoscopy, and biopsy, each plays a vital role in diagnosing various medical conditions. Learn how these tests help healthcare professionals identify diseases accurately, guiding treatment plans and improving patient outcomes. Stay informed and empowered about your health journey.

[Click here to see the full video](#)

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Awareness Corner:



Understanding Temper Tantrums: Tips for Parents

Join Dr. V. S. Prema Subathiraa, M.D Psychiatry, as she sheds light on temper tantrums in children at malls and shops. Learn valuable insights and effective strategies for parents to navigate and manage these challenging situations. Don't miss this essential awareness video. Consult Dr. V. S. Prema Subathiraa at K. H. Nursing Home for personalized guidance. Appointments available in the evening from 05:00 pm to 08:00 pm.

[Click here to see the full video](#)

Overcoming Exam Anxiety: Tips for Parents



Dr. Prema Subathiraa V. S. MD Psychiatry
Psychiatrist | மனநல மருத்துவர்

Overcoming Exam Anxiety: Tips for Parents

Join Dr. V. S. Prema Subathiraa, M.D Psychiatry, for an insightful discussion on exam anxiety in children, driven by maternal pressure. Discover practical strategies and supportive approaches for parents to alleviate exam stress and foster a positive academic environment. Don't let anxiety hinder your child's success. Consult Dr. Subathiraa at K. H. Nursing Home for expert guidance. Evening appointments are available from 05:00 pm to 08:00 pm.


[Click here to see the full video](#)

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Camp Corner:





FREE PROSTATE TESTING CAMP

Are you experiencing any of the following symptoms? Visit the camp to get tested.


- 50+ Age Group
- Frequent urination during day
- Urinating more than 2 times in night
- No proper flow of urine during urination

Uroflow clinic





Dates will be updated in our social media



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DR. K. HARIHARAN

FREE SPIROMETRY TEST

ALLERGY & LUNG FUNCTION DETECTION CAMP

Every Month Last Wednesday

2.30 PM to 4 PM







Woman's Day Special Assesment Camp



Nutrition and Diet Care for Women



08 Mar, 2024, Friday
10:00 am - 02:00 pm



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WOMEN'S DAY SPECIAL EYE CAMP

11-03-2024 to 15-03-2024 & 18-03-2024

First Come, First Serve Basis - Only 5 patients will be given tokens for eye testing daily * - 09:30 am onwards



I Care Eye Care Hospital
No.20, Hanuman Kovil Street,
Radha Nagar, Chromepet,
Chennai, Tamil Nadu 600044











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WOMEN'S DAY SPECIAL CAMP

08-03-2024 to 30-03-2024

Your Health, Our Priority !

- Vitals (BP, SpO2)
- ECG
- TSH
- CBC
- RBS

*** NO FASTING
REQUIRED**

SPECIAL OFFER

₹ 600 only

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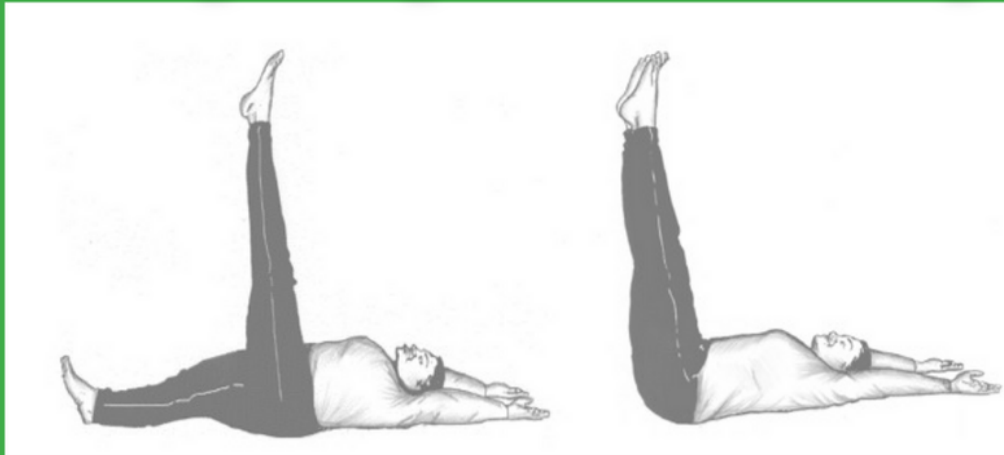


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Yoga Corner:



Straight Leg Raise Breathing



Practice:

Stage 1: Alternate legs

1. While inhaling slowly raise the right leg without bending the knee, as far as comfortable (up to 90° if possible).
2. While exhaling return the leg to the floor as slowly as possible.
3. Repeat the practice with the left leg.
4. This is one round. Perform 10 rounds.

Stage II: Both legs

1. As you get stronger, you can do the leg raising exercise with both legs. Avoid this exercise if you have low back pain.
2. Lie on the back with the legs together, hands stretched out over the head, biceps touching the ears and palms facing the ceiling.
3. While inhaling slowly raise both the legs without bending at the knees, as far as comfortable (up to 90°, if possible).
4. While exhaling return the legs to the floor as slowly as possible.

Note: Avoid both legs raising if you have backpain.

Follow us @svdfoundation



<http://svdfoundation.org>

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Medical Marvel of the Month

GREGORY PINCUS (1903 – 1967)

JOHN ROCK (1890 – 1984)

MIN CHANG (1908-1991)



DEVELOPED IN 1960, THE BIRTH CONTROL PILL REVOLUTIONIZED FAMILY PLANNING BY INCORPORATING SYNTHETIC ESTROGEN AND PROGESTIN HORMONES. THE INNOVATIVE WORK OF GREGORY PINCUS, JOHN ROCK, AND MIN CHANG TRANSFORMED REPRODUCTIVE HEALTH BY ALTERING BODILY FUNCTIONS TO PREVENT PREGNANCY.

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Rehabilitation Recap 2023



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Dr. S. Jeffe
Senior Physiotherapist



Dr. K. B. Ramya
Senior Physiotherapist



Dr. K. V. Pandian
Chief physiotherapist



Dr. P. Smith Wiggles Worth
Consultant Physiotherapist



Dr. A. Immanuel Jacob
Consultant Physiotherapist

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Supraspinatus Tendonitis

Dr K. V. Pandiyan

Supraspinatus tendonitis is a common problem in the shoulder, also known as "Shoulder Impingement Syndrome" or "Painful Arc Syndrome".

Function

The function of the supraspinatus muscle is to raise the arm outwards from the side, clinically known as 'abduction.' It also plays a role in external rotation and resisting gravitational forces on the glenohumeral joint. When the tendon becomes inflamed or irritated, it is termed tendonitis.

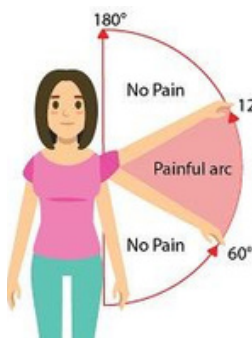
Supraspinatus Tendonitis symptoms may come on abruptly after an injury or build up slowly on and off over the years with no obvious cause.

A classic sign of supraspinatus Tendonitis:

There is a painful arc when moving the arm ' between 60-120 degrees of abduction as the tendon gets compressed against the bone in that range.

Symptoms of painful arc syndrome typically present in middle age, most frequently between 45-65.

Generally, supraspinatus tendonitis is an overuse injury caused by repetitive friction on the tendon, but any injury in the shoulder, instability, or shoulder impingement can cause it.



Causes of Supraspinatus Tendonitis:

- Degenerative tears
- Direct blow
- Ligament laxity
- Poor posture
- Repetitive action

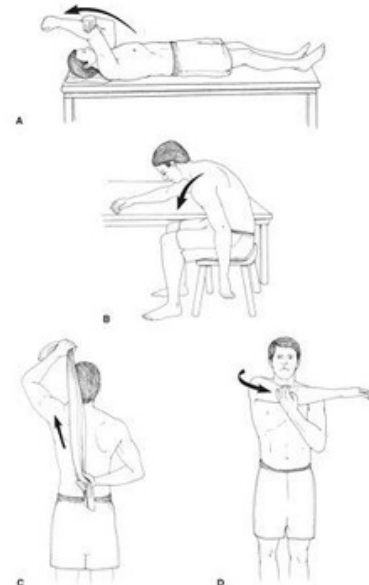
Diagnosis:

- X-ray
- MRI

Physical Therapy Treatment in Supraspinatus Tendonitis

- Modalities: Ultrasound, Cryotherapy, and Electrical stimulation for muscles can provide temporary relief in the acute phase. Ultrasound: To help reduce inflammation and realign tendon fibres.
- Cryotherapy, soft tissue techniques, and wearing a sling and taping are some other techniques to decrease pain. Proper home exercise programs should also be taught in convergence with proper ergonomics.
- Posture Work: To improve posture also helps in reducing pain.
- Stretching Exercises: To reduce the muscle tightness
- Upper Back Stretches: reduce pain and stiffness
- Exercises: To enhance strength and flexibility of the shoulder.
- Scapular Stabilisation Exercises: Improves scapular strength
- Rotator Cuff Exercises: Improves shoulder strength

Early management for this condition includes avoiding repetitive movements aggravating the shoulder's pain.



Shoulder Stretches: Stretching of muscles reduces the tension on the muscles

Gentle range-of-motion exercises:

Range of motion of shoulder joint. Initiate with shoulder passive movement. Followed by exercises such as:

Codman's pendulum exercises: To maintain range of motion and prevent the development of a frozen shoulder.

Once the pain has been decreased, joint mobilisations, massages, muscle stretches, and active-assisted and active exercises are needed to improve the ROM more.

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Active-assisted mobilisations: The patient can do these by using an exercise bar. Patients can also use a rope, stick, and pulley. In this way, the unaffected arm helps to pull the affected arm into anteversion. A physiotherapist works on resistance exercises for strengthening shoulder muscles as an active assisted exercise person can do.

Strengthening exercises: Strengthening external and internal rotators, biceps, deltoid, and scapular stabilising muscles. Strengthening all these muscles will keep the shoulder joint more stable and powerful and prevent further injuries. Eccentric exercises will also be more efficacious than concentric exercises. Strengthening exercises are done with the help of theraband, dumbbells, and weight cuffs of different weights as progression is needed.



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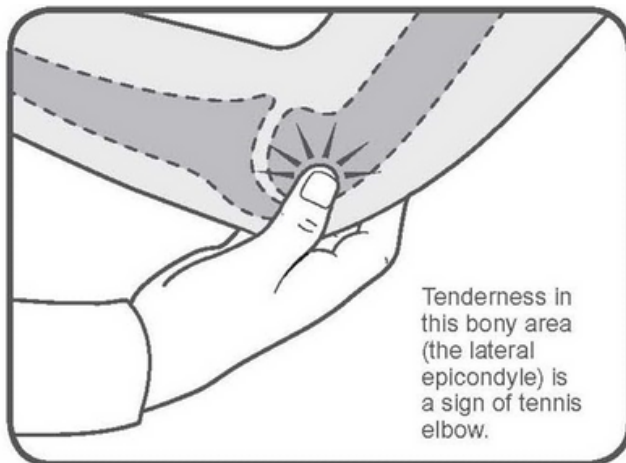
Tennis elbow (Lateral epicondylitis)

Dr S. Jeffe

Tennis elbow is a painful weakening of the tendons that join your forearm muscles to your bones.

It happens when you work your elbow too much by repeating certain motions.

The tissues that attach muscles to bones become overloaded, leading to inflammation, degeneration and potential tearing.



Who might get tennis elbow?

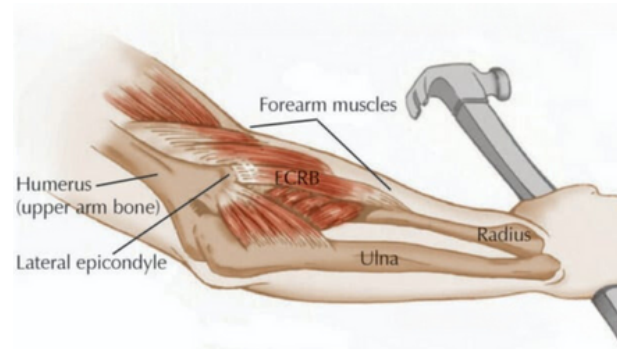
Anyone who regularly performs repetitive activities that vigorously use the forearms, wrists or hands can get tennis elbow.

Tennis elbow can affect recreational and professional:

1. Baseball and softball players.
2. Bowlers.
3. Fencers.
4. Golfers.
5. Tennis, squash, pickleball and racquetball players.

People who work in certain professions are also more prone to tennis elbow:

1. Assembly line workers and auto mechanics.
2. Butchers and chefs.
3. Carpenters, cleaners, painters, and plumbers.
4. Dentists.
5. Gardeners and landscapers.
6. Manicurists.
7. Musicians.



Common complaints in tennis elbow

1. Pain or burning on the outer part of your elbow.
2. Weak grip strength.
3. Sometimes, pain at night.
4. Swollen elbow joint that's tender to touch.
5. Increased pain when shaking hands or squeezing an object.
6. Pain when lifting something, using tools, or opening jars.

Diagnosis

1. X-ray
2. MRI (magnetic resonance imaging)
3. Physical examination

Physiotherapy treatment for tennis elbow

1. Rest: You may need to stop or decrease activities for several weeks to give tendons time to heal.
2. Icing the elbow to reduce pain and swelling. Do it for 20 to 30 minutes every 3 to 4 hours for 2 to 3 days or until the pain is gone.
3. Using an elbow strap to protect the injured tendon from further strain.
4. Ultrasound therapy reduces tissue inflammation and promotes a faster healing process.
5. Laser therapy to improve cell repair, which is ruptured due to repeated actions.
6. Performing range of motion exercises to reduce stiffness and increase flexibility. Do them three to five times a day.
7. Strengthening exercises to improve the power of forearm muscles to regain their normal functioning.

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Exercises for Tennis Elbow Relief

- 1 Eccentric Exercise**
10 reps x 3 sets



- 4 Forearm Flexor Stretch**
10 reps x 3 sets



- 7 Forearm Pronation**
10 reps x 3 sets



- 2 Forearm Extensor Stretch**
hold for 30 seconds x 3 sets



- 5 Ball squeezes**
hold for 10 seconds x 2 sets



- 8 Bicep curls**
10 reps x 3 sets



- 3 Tricep Stretch**
hold for 30 seconds x 3 sets



- 6 "Drawing the Sword"**
10 reps x 3 sets



- 9 Hammer curls**
10 reps x 3 sets



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Piriformis syndrome

Dr K. B. Ramya

Piriformis syndrome is characterised by the piriformis muscle's sciatic nerve compression, leading to inflammation.

The Piriformis muscle plays a crucial role in stabilising the hip joint and facilitating movements such as lifting and rotating the thigh away from the body.

These actions are vital for walking, weight shifting, and maintaining balance. Essentially, the piriformis muscle is involved in nearly every motion of the hips and legs.

Understanding and addressing piriformis syndrome is essential for individuals seeking to alleviate pain and discomfort in the lower body and improve overall mobility.

Causes

Sciatic pain can occur unilaterally or bilaterally, caused by the piriformis muscle's sciatic nerve compression.

This compression commonly happens during activities like sitting for long periods (such as in taxi drivers, office workers, and bicycle riders) or engaging in running.

Additionally, pain may be elicited when climbing stairs or exerting firm pressure directly on the piriformis muscle.

Symptoms

Individuals experiencing piriformis syndrome may exhibit the following symptoms:

- Discomfort, tingling, or loss of sensation in the buttock and hip region.
- Pain while transitioning from a lying to a standing position.
- Inability to maintain a seated position for an extended period.
- Radiating pain along the posterior aspect of the leg.

Diagnosis

The diagnosis of piriformis syndrome involves a thorough evaluation of the patient's reported symptoms and a comprehensive physical examination.

The healthcare provider utilises specific movements to provoke pain in the piriformis muscle to identify any signs of the condition.

While the symptoms of piriformis syndrome can resemble those of other conditions, additional radiologic tests like MRIs may be necessary to exclude alternative sources of sciatic nerve compression, for instance, a herniated disc.

During the physical examination, the practitioner applies stretching manoeuvres to elicit irritation in the piriformis muscle and may also employ manual pressure around the sciatic nerve to reproduce the patient's symptoms.

Treatment & Management

Avoiding positions that trigger discomfort when experiencing pain caused by sitting or specific activities is advisable.

Employing a combination of rest, ice, and heat therapy can be beneficial in relieving symptoms.

Seeking guidance from a healthcare professional or physical therapist can provide insights into appropriate exercises and stretches to help alleviate compression on the sciatic nerve.

Osteopathic manipulative treatment has also shown potential in reducing pain and improving range of motion.

Treatment options may include short-term rest (not exceeding 48 hours), muscle relaxants, non-steroidal anti-inflammatory drugs (NSAIDs), and physical therapy involving piriformis muscle stretching, range of motion exercises, and deep-tissue massages.



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PIRIFORMIS SYNDROME REHABILITATION EXERCISES



REHABILITATION EXERCISES



Gentle Gluteal Stretch



Plank



Clam Exercise



Side Plank



Prone Hip Extensions



Resisted Hip Abduction



Supplementary treatment



Low-impact Movement

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Forward Head Posture

Dr Smith wiggles worth

Forward head posture is defined as an augmented extension of the upper cervical spine and augmented flexion of the lower cervical and upper part of the thoracic spine with head position around the sagittal plane showing forward head position from the gravity line.

Prevalence

Worldwide 60 % to 80% of people have pain in the spine. The neck pain is prevalent between 10 % and 20 % of females, approximately 50 years.

It is related to sudden movements, long stays in a forced position, stress, trauma and loss of range of motion.

According to the International Association for the Study of annual pain, the incidence of neck pain is 30 - 50 %.

During six months, 54 % of adults suffer from neck pain, and 4.6 % experience important activity limitations because of neck problems.

97 % of people in their 20s use such devices more frequently than any age group.

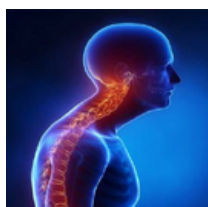
Causes & Aetiology

It has been proposed that repetitive use of mobile, laptop, computer, television, video games and even backpacks has forced the body to adapt to forward head posture and kyphosis.

Due to the wide diffusion of personal computers and smartphones, students and office workers who use devices frequently complain of musculoskeletal disorders in the neck and shoulders.

Forward head posture has several adverse effects on health and functioning, highlighting that these postural misalignments are of major societal concern.

The forward head is caused by tightness in the suboccipital muscles; there is an extension at the C1 and C2 cervical spine and flexion at the C3 - C7 cervical spine, with leads to tightness of suboccipital muscles.



Symptoms

Major symptoms caused by forward head posture are abnormal scapula movement, neck pain, migraine, and abnormality in the temporomandibular joint.

It also increases the lordotic curve of the head and neck joints and increases the tension and pain of the muscles under the shoulder and occipital bones.

Long-term use of visual display terminals such as smartphones may induce musculoskeletal disorders, including neck, low back, and shoulder pain.

Physiotherapy Management

In Physiotherapy, the Treatment method includes

- Global posture re-education,
- Active release techniques,
- Static stretching for major groups of muscles, Kinesio taping,
- Balance control training (static and dynamic), deep neck flexors
- Strengthening
- Neuromuscular integration approach, craniocervical flexion exercises,
- Suboccipital release
- Chiropractic techniques
- Maitland mobilisation and manipulation, manual traction,
- Massage
- Ergonomic and worksite interventions

Other modalities, such as

- Transcutaneous electrical neuromuscular stimulation (tens) EMG biofeedback
- Shortwave diathermy, stimulation of muscle
- Heat and cold applications, laser therapy
- Ultrasound
- Shock wave therapy, dry needling
- Mechanical traction
- Use of orthotics and supportive devices like cervical collars and cervical pillows

Above are the major treatment protocols for forward head posture and simple exercises for correcting forward head posture:

1. Neck isometrics

To start, the person should sit in a chair straight with your foot flat on the floor.

The weight of the person's body should be a touch forward so that you are balanced equably on the buttocks.

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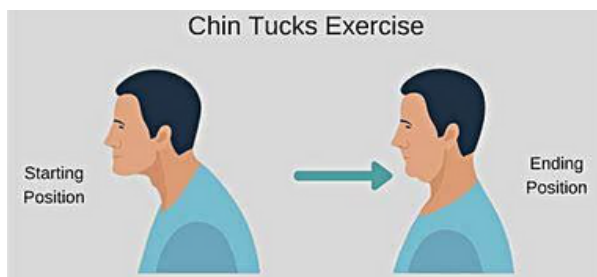
The person should relax their shoulders and keep their head level.

Using a chair with arms may aid you in keeping your balance.

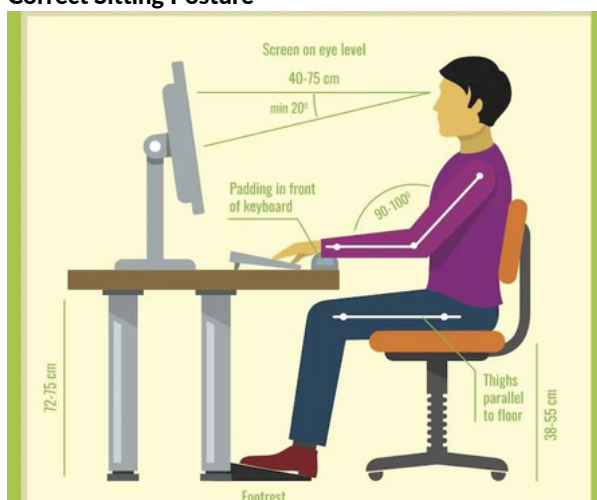


- Press your palm on the side of your head. Resist with your neck muscles. Repeat 5 times. Switch sides.
- Do the exercise again, pressing on the back of your head. Repeat 5 times.
- Press your palm against your forehead. Resist with your neck muscles. Hold for 10 seconds. Relax. Repeat 5 times.

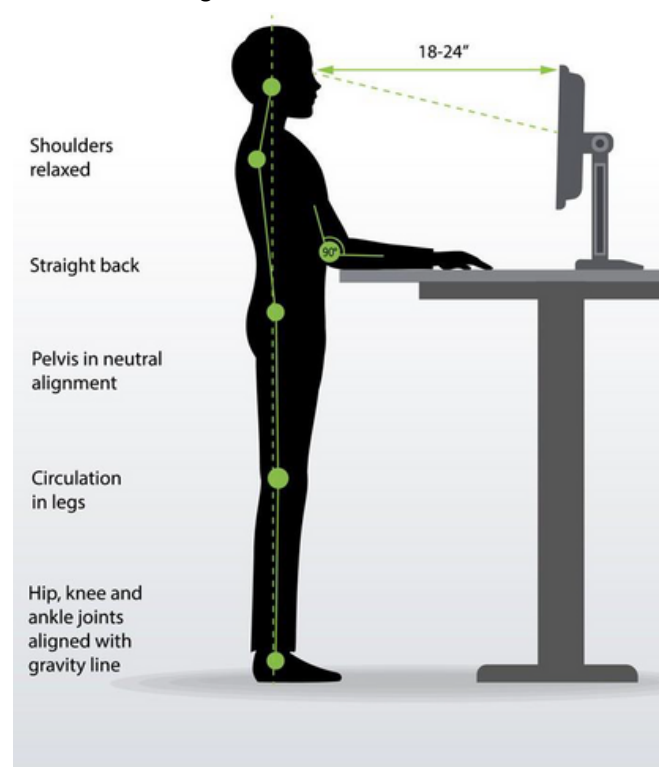
Chin Tuck Exercise



Correct Sitting Posture



Correct Standing Posture



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Plantar Fasciitis

Dr Immanuel Jacob

Plantar fasciitis (PLAN-tur fas-e-l-tis) is one of the most common causes of heel pain.

It is a condition in which the thick band (plantar fascia) that connects the heel bone and foot is inflamed and causes pain in the heel region.

This can be identified by stabbing pain in the morning, and the pain will be reduced later. Prolonged standing may cause severe pain.

The cause of plantar fasciitis is poorly understood. It is common in runners and in people who are overweight.



Who Might Get Plantar Fasciitis?

- Prolonged standing person - Repetitive stress during standing upright and weight-bearing.
- Athletes and sports person - Repetitive stress on the heel from a chronic or acute condition
- Ballet dancers - If dancers do not properly stretch their feet before dancing.
- Aerobic dancers - Activities that stress the heel and attached tissues.

A common cause is a repetitive movement that puts much pressure on the foot's arch.

Chief complaint of Plantar Fasciitis

- Sharp and stabbing pain in the bottom of the heel and mid-foot
- Pain during activities
- Swelling around the heel with pain
- Tightness in Achilles tendon (A band of tissue in the back of your leg - Tendon that links your heel bone to your calf muscle)

How to diagnose Plantar Fasciitis?

- Physical Examination
- X-ray
- MRI (Magnetic Resonance Imaging)

Treatment for Plantar Fasciitis

- Rest up: You may reduce the activity for some days, reducing further inflammation and increasing healing time.
- Icing at the heel surface may reduce pain.
- Ultrasound therapy may reduce inflammation and speed up the healing process.
- Strapping / Taping at the heel surface may reduce the strain on the fascia.
- Using laser therapy improves the cell repair of the ruptured fascia.
- Stretching and exercises may develop the movement without the pain.
- Myofascial release of the plantar fascia to release the trigger nodes.
- Increasing heel support using MCR footwear

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Plantar Fascitis Exercises



Towel stretch



Standing calf stretch



Plantar fascia stretch



A



B



C

Static and dynamic balance exercises



Towel pickup



Frozen can roll



Resisted dorsiflexion



Resisted plantar flexion



Resisted inversion



Resisted eversion

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Bell's Palsy

Dr K. V. Pandiyan

Bell's palsy is a temporary condition resulting in facial muscle weakness or paralysis, often due to viral or bacterial infection.

Causes

Bell's palsy results from inflammation or compression of the seventh cranial nerve, causing facial weakness or paralysis.

While the precise cause remains elusive, it is widely believed to be triggered by various viral and bacterial factors:

- **Herpes Simplex:** This virus, responsible for cold sores and genital herpes, has been associated with Bell's palsy.
- **HIV:** The virus that weakens the immune system, HIV, has also been linked to this condition.
- **Sarcoidosis:** Known for causing organ inflammation, sarcoidosis is another potential contributor to Bell's palsy.
- **Herpes Zoster Virus:** The same virus responsible for chickenpox and shingles, the herpes zoster virus, is on the list of possible culprits.
- **Epstein-Barr Virus:** This virus, causing mononucleosis, is considered a potential trigger.
- **Lyme Disease:** Caused by ticks infected with specific bacteria, Lyme disease is yet another factor that may lead to Bell's palsy.

The exact relationship between these infections and the development of Bell's palsy remains an active area of medical research, offering hope for a clearer understanding of this condition.

Symptoms

The symptoms of Bell's palsy can range from slight facial weakness to complete paralysis, with severity correlating to the degree of inflammation and compression on the affected facial nerve.

Recovery time also extends as the condition's intensity increases.

Typically, Bell's palsy symptoms emerge within 1 to 2 weeks following an episode of:

- Cold
- Ear infection
- Eye infection

These symptoms often have an abrupt onset, catching individuals by surprise.

They may become apparent upon awakening in the morning or while attempting to eat or drink.

Risk factors

Your risk of developing Bell's palsy is elevated when you have the following conditions:

- **Pregnant**
- **Diabetes**
- **Lung infection**
- **Family history of the condition**

Diagnosis

Your physician will initiate the diagnostic process by conducting a thorough physical examination to assess the degree of weakness in your facial muscles.

Simultaneously, they will inquire about the onset and progression of your symptoms.

The diagnostic tests may encompass the following:

- Blood tests to identify bacterial or viral infections.
- Additional blood tests to assess for conditions like diabetes.
- Imaging procedures such as MRI or CT scan to scrutinize the facial nerves and eliminate the likelihood of a stroke or brain tumour.
- An electromyography (EMG) test involving the insertion of fine wire electrodes into a muscle is performed to confirm nerve damage in the facial muscles and determine its extent.
- A lumbar puncture may be administered to confirm the diagnosis when Lyme disease is suspected.

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Treatment

In the majority of instances, Bell's palsy symptoms tend to ameliorate naturally.

Nonetheless, the process of regaining normal muscle strength in the facial area may extend over several weeks or even months.

Long-term outlook

The prognosis for individuals with Bell's palsy generally proves favourable, with recovery duration contingent upon the extent of nerve damage.

Milder nerve damage typically yields initial improvement within 2 to 3 weeks from symptom onset.

Conversely, more pronounced damage may necessitate 3 to 6 months before noticeable progress surfaces.

While rare, certain cases may entail recurring or even permanent symptoms.

Physiotherapy Management

Facial Rejuvenation

A Gentle Three-Step Technique

- Commence by softly and gradually engaging all facial regions.
- Employ your fingertips to gently elevate your eyebrows, showing restraint on the descending side.
- With your fingers, tenderly knead various facial zones encompassing your brow, nose, cheeks, and mouth.

Nose and Cheek Exercises

1. Perform the following facial exercises to help improve muscle strength on the affected side.
2. Gently push up the skin near your nose as you wrinkle your nose.
3. Scrunch your face, concentrating on the cheeks and nose.
4. Expand your nostrils and inhale deeply through your nose. Consider covering your unaffected nostril to engage the affected muscles further to enhance the exercise. Puff up the cheeks and blow the air out. Aim to repeat this sequence 10 times.

These exercises are designed to enhance muscle strength and mobility, promoting better facial muscle control and overall well-being.

Eye Exercises

To enhance eyebrow movement following Bell's Palsy, consider the following steps:

- **Eyebrow Exercise:** Begin by practising the controlled movement of raising your eyebrows up and down. If needed, you can use your fingers to gently lift the affected eyebrow. This exercise helps in regaining control over your brow's motion.
- **Eyelid and Brow Massage:** While looking downward, close your eyes and gently massage the affected eyelid and eyebrow. This massage aids in relaxing the muscles and promoting better blood circulation.
- **Open and Close Exercises:** Alternate between fully opening your eyes wide and then gently squeezing them shut. This exercise not only stimulates the muscles around the eye but also encourages a wider range of movement.

By incorporating these steps into your daily routine, you can work on regaining the strength and flexibility of your eyebrow and eyelid muscles, helping to mitigate the effects of Bell's Palsy.

Mouth Exercises

- Begin by alternating between smiling and frowning. Open your mouth with a smile, close it, and then reverse the motion to practice frowning.
- Next, create a gentle pucker with your lips and then allow them to relax.
- Experiment with lifting each corner of your mouth separately, using your fingers to assist if needed.
- Extend your tongue outward, directing it towards your chin for another facial mobility and muscle control exercise.

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Facial Paralysis Caused by Bell's Palsy



Inability to wrinkle brow

Inability to close eye

Drooping eye

Asymmetrical facial muscle tone

Loss of nasolabial fold

Drooping mouth

Asymmetrical smile

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IT BAND SYNDROME (ITBS)

Dr S. Jeffe

Iliotibial Band Syndrome is a discomforting issue where the connective tissue rubs against the thighbone.

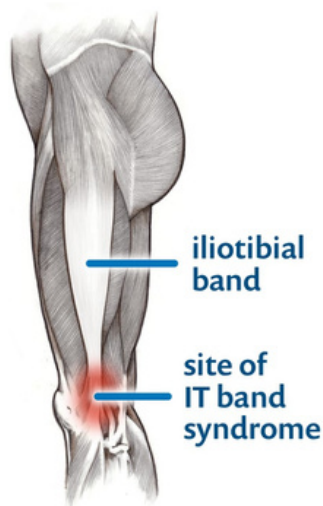
This occurs when a tendon, known as the iliotibial band, becomes irritated or inflamed due to friction with the hip or knee bones.

Situated on the outer side of the leg, the iliotibial band extends from the upper pelvic bone down to the knee.

It experiences rubbing against the bones when it becomes overly tense or tight.

Suppose you are feeling pain on the outside of your leg during movement, especially around the hip or knee.

In that case, it is essential to consider the possibility of Iliotibial Band Syndrome and seek appropriate care.



Types of iliotibial band syndrome?

Iliotibial Band Syndrome (ITBS) can occur in a single leg or affect both.

It is termed bilateral iliotibial band syndrome when it affects both legs simultaneously.

How does iliotibial band syndrome affect (ITBS)?

Iliotibial Band Syndrome (ITBS) poses a higher risk for those who are young and engage in regular exercise.

Athletes susceptible to ITBS are:

- Basketball players
- Cyclists
- Hockey players
- Runners
- Skiers
- Soccer players

Not limited to athletes, certain traits increase the likelihood of ITBS:

- Bowed legs
- Leg length discrepancy
- Knee arthritis
- Inward rotation of ankle, leg, or foot during movement
- Weakness in hip, butt, or abdominal muscles

Understanding these risk factors is crucial, even for non-athletes, as it aids in proactive measures to prevent or manage ITBS.

What are the Signs and Symptoms of IT Band Syndrome?

IT band syndrome often causes symptoms such as:

- Pain or discomfort on the outer part of the knee.
- A clicking or rubbing feeling on the side of your knee.
- Pain that increases with activity (and often only hurts with activity).
- Pain that spreads up the thigh into the hip.

How is iliotibial band syndrome diagnosed?

After discussing your exercise history and symptoms and performing a physical examination, your healthcare provider might diagnose you with iliotibial band syndrome.

When seeing your healthcare provider, keep an eye out for these signs of ITBS:

- If you hear or feel a grating sound when moving your knee or hip.
- Pain located over the greater trochanter in one or both hips.
- Pain at the lateral epicondyle in one or both knees.
- If your pain intensifies the longer you work out.
- Pain that gets worse when you are descending a slope.

Remember to share these details with your provider for a comprehensive assessment.

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Treatments

Some remedies for iliotibial band syndrome can be self-administered at home, while others may necessitate professional medical assistance. Common treatments include:

Rest

Refrain from exercising the affected leg until the pain subsides and your iliotibial band syndrome fully recovers.

It is advisable to consult with your physician to determine the appropriate balance between rest and activity tailored to your condition.

Pain medications

Nonsteroidal anti-inflammatory.

Manual therapy

A physiotherapist might show you how to use a foam roller for self-massage on your body.

Posture training

How you carry yourself during daily routines, sports, or any activity can impact your iliotibial band syndrome.

Physical therapy

A physiotherapist can guide you through stretches, strength exercises, and techniques to ease hip and knee discomfort.

These approaches may assist in loosening your iliotibial band reducing tension.

Additionally, they can instruct you on effective warm-up and cool-down routines for exercises.

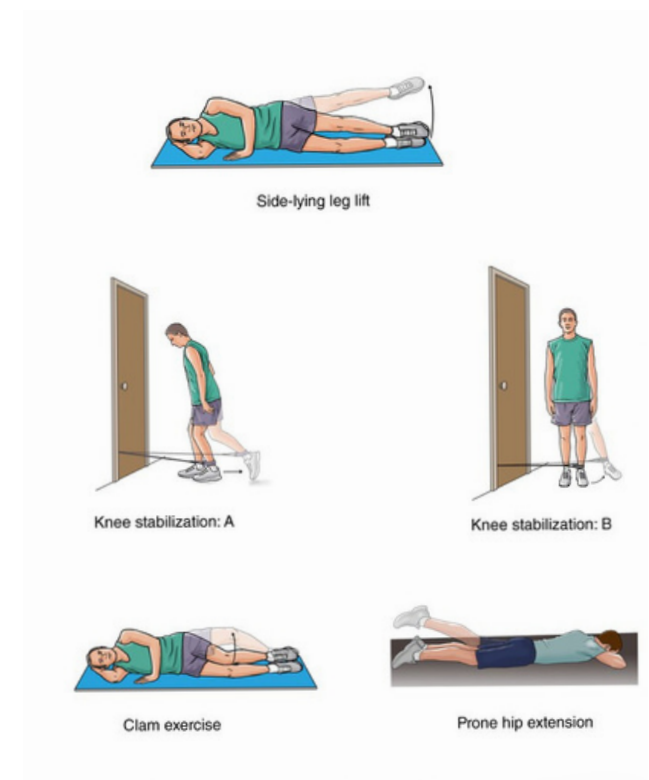
Steroid injections

Using corticosteroids can help alleviate inflammation in your iliotibial band.

Surgery

Surgery is not a common solution for iliotibial band syndrome.

Your healthcare provider may suggest it only if medications and physical therapy prove ineffective.

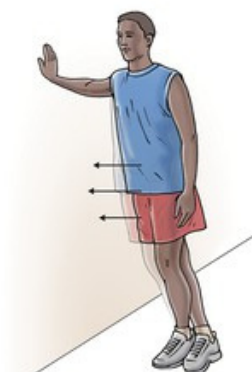




Iliotibial Band Syndrome Rehabilitation Exercises



Iliotibial band stretch (standing)



Iliotibial band stretch (side-leaning)



Standing calf stretch



Iliotibial band stretch (side-bending)



Hamstring stretch on wall



Quadriceps stretch



De Quervain's Syndrome

Dr K. B. Ramya

What is De Quervain's Syndrome?

Named after Swiss surgeon Fritz de Quervain in 1895, De Quervain's syndrome, or tenosynovitis, is a painful condition impacting tendons on the thumb side of the wrist. If you are dealing with this, turning your wrist, gripping objects, or making a fist might cause pain.

The muscles involved are abductor pollicis longus and extensor pollicis brevis.

Pain is exacerbated by thumb movement and deviation movements of the wrist.

The cause is attributed to the thickening of the sheath that, in turn, entraps the muscles mentioned above, causing pain and weakness.

The most common cause is **Chronic Overuse**.



While we are unsure about the exact cause of De Quervain's tenosynovitis, activities involving repetitive hand or wrist movements, like gardening, golf, playing racket-based sports, or lifting a baby, can worsen it.

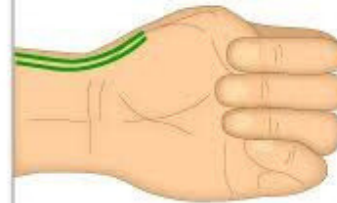
Activities such as golfing, playing the piano, carpentry, or activities by office workers and musicians can lead to chronic overuse injuries.

The classic patient population is mothers of newborns who repeatedly lift their babies.

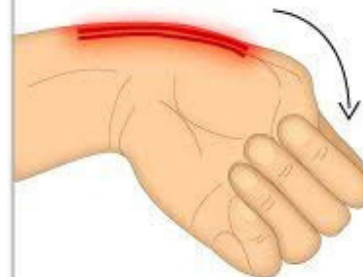
The primary complaint is wrist pain at the base of the thumb that radiates up the forearm with grasping or extension of the thumb.

Finkelstein Test

1. Place thumb in a closed fist



2. Tilt hand down



Pain felt during the Finkelstein Test is a positive indicator of de Quervain's syndrome.

It is described as a "constant aching, burning, pulling sensation."

Physiotherapy management includes the following:

- Ultrasound therapy over the area of pain and swelling
- Icing the area of inflammation.
- Rest: Avoid or minimise usage of the affected wrist in order to let it heal.
- Using thumb splints to support the area and restrict movement.
- Stretching and strengthening exercises and concentrate the affected group of muscles.



De Quervain's Tenosynovitis Rehabilitation Exercises



Opposition stretch

Wrist stretch

Wrist flexion



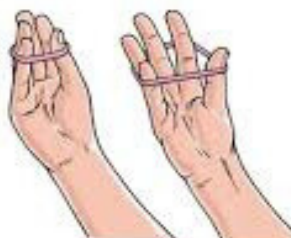
Wrist radial deviation strengthening



Wrist extension



Grip strengthening



Finger spring

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Jumper's knee

Dr Smith Wiggles Worth

Jumper's knee, or patellar tendonitis, is when your patellar tendon, linking your kneecap to your shin bone, gets inflamed.

If not addressed, it can weaken the tendon and even cause tears.

This tendon collaborates with your thigh muscles, enabling activities like kicking, running, and jumping.



Causes

Jumper's knee stems from overusing your knee joint, especially by frequently jumping on hard surfaces.

This injury, often linked to sports, happens due to the strain on your tendon caused by the force of hitting the ground during activities like basketball or volleyball.

Despite being common among athletes in jumping sports, it can affect anyone.

Known as patellar tendinitis, this overuse injury results from repeated stress on your patellar tendon, causing tiny tears that lead to inflammation and tendon weakening.

If this damage persists for more than a few weeks, it is referred to as tendinopathy.

Symptoms

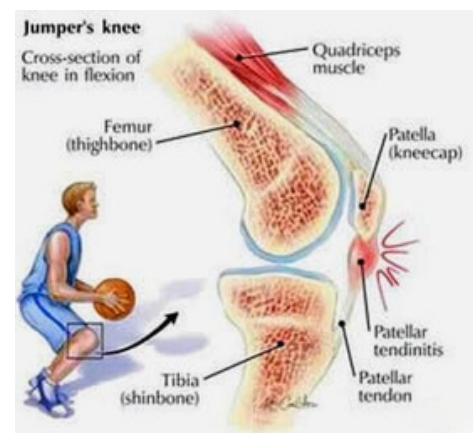
Patellar tendinitis often signals its presence through the initial twinges of pain situated between the kneecap and the shinbone during or post-physical activity.

As time progresses, this discomfort intensifies, becoming a hurdle in your athletic pursuits and daily tasks like climbing stairs.

Symptoms include pain and tenderness around the patellar tendon, swelling, and discomfort when bending or straightening the leg.

Tasks like jumping, running, or walking may also induce pain.

If you notice persistent discomfort around your knee, especially during movement, consulting a doctor is advisable for accurate diagnosis and appropriate management.



Diagnosis

X-rays are useful in ruling out other bone issues contributing to knee pain.

Another diagnostic tool, magnetic resonance imaging (MRI), employs radio waves and magnetic fields to create comprehensive images.

These images are beneficial in identifying subtle alterations in the patellar tendon.

Prevention

To minimise the risk of developing patellar tendinitis, follow these steps:

- Do not push through pain. If you feel knee pain after exercising, give it a break and apply ice. Stay away from activities stressing your patellar tendon until the pain subsides.
- Strengthen your muscles. Having strong thigh muscles can handle the stress that may lead to patellar tendinitis. Include eccentric exercises, slowly lowering your leg after extending your knee, in your routine.
- Refine your technique. Ensure proper body usage by taking lessons or seeking professional guidance when starting a new sport or using exercise equipment.

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Treatment

Cold therapy

Applying ice packs to the patellar tendon can reduce inflammation.

Strengthen the patellar tendon.

As the initial pain and swelling ease, you can slowly start putting more stress on the tendon to strengthen and aid in its healing process.

Isometric exercises for quadriceps muscle.

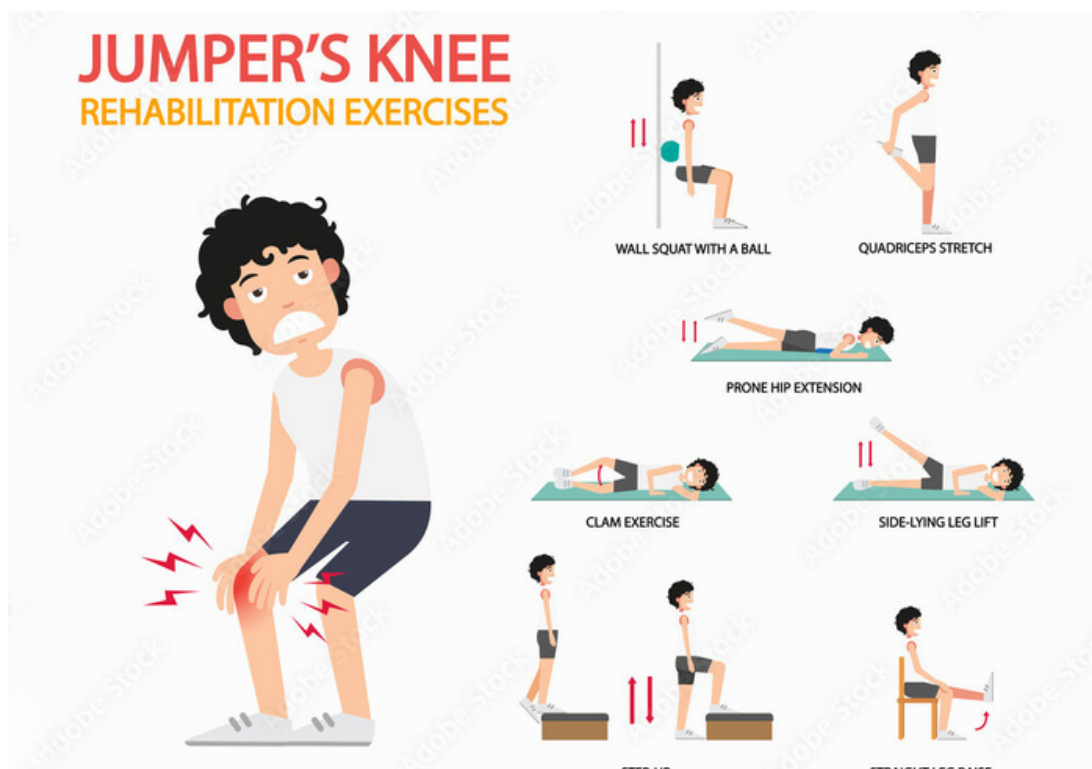
- Wall squats.
- Straight leg raise.
- Side leg raise.
- Clamshell exercise.
- Step up and step down.

Stretching exercises

- Stretching for quadriceps muscle in standing position.
- Stretching for hamstring muscle self with a towel.

Other Treatments

- Use patellar support or straps.
- Use a knee brace or knee socks.
- Kinesio taping.



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Saturday Night Palsy

Dr Immanuel Jacob. A

Saturday night palsy refers to a condition where the radial nerve in the arm gets compressed due to pressure against a hard surface, often occurring after a deep sleep on the arm, especially after alcohol consumption.

It is also known as **Honeymoon Palsy**, when one's mate sleeps on and compresses the nerve in your arm overnight.



An object or surface pressing directly onto the upper medial arm or axilla for a prolonged period causes Saturday night palsy, a compressive radial nerve neuropathy.

The radial nerve is formed by nerve roots from C5 to T1, originating from the back part of the brachial nerve plexus.

It begins by running deep to the axillary artery, then passes inferiorly to the teres minor before wrapping down the medial aspect of the humerus and resting in a spiral groove.

Signs and Symptoms

- Wrist drop.
- Numbness in the hand and wrist.
- Inability to straighten fingers.
- Inability to straighten the wrist due to the loss of function in the forearm muscles.
- Weakness or paralysis in some of the forearm and arm muscles.
- Sharp or burning pain.

Complaints

- Numbness, weakness, tingling, pain, or any combination of these symptoms may be reported by patients.
- Physical examination may reveal a characteristic wrist drop caused by the loss of extensor muscle function.
- The triceps reflex, controlled by radial nerve innervation, may also be lost in patients.
- Sensory deficits affect the lateral three-and-a-half digits' posterior forearm, posterior hand, and posterolateral aspect.

Treatment

- Suggest soft wrist splints like dynamic splints and cock up splints to maintain wrist extension and develop movement.
- Transcutaneous Electrical Nerve Stimulation (TENS) reduces neuropathic pain in affected regions.
- Exercise for the radial nerve helps strengthen your arms to avoid the risk of radial nerve injury. It teaches proper balance exercises to prevent falls.
- The correct posture at the workplace and during sleep is also taught to the patient.



Medical Messenger

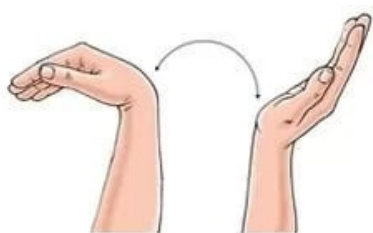
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Wrist active range of motion: Flexion and extension



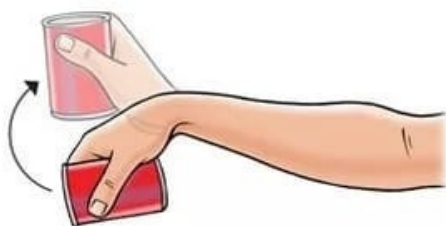
Forearm pronation and supination



Active elbow flexion and extension



Wrist flexion



Wrist extension



Wrist radial deviation strengthening



Forearm pronation and supination strengthening



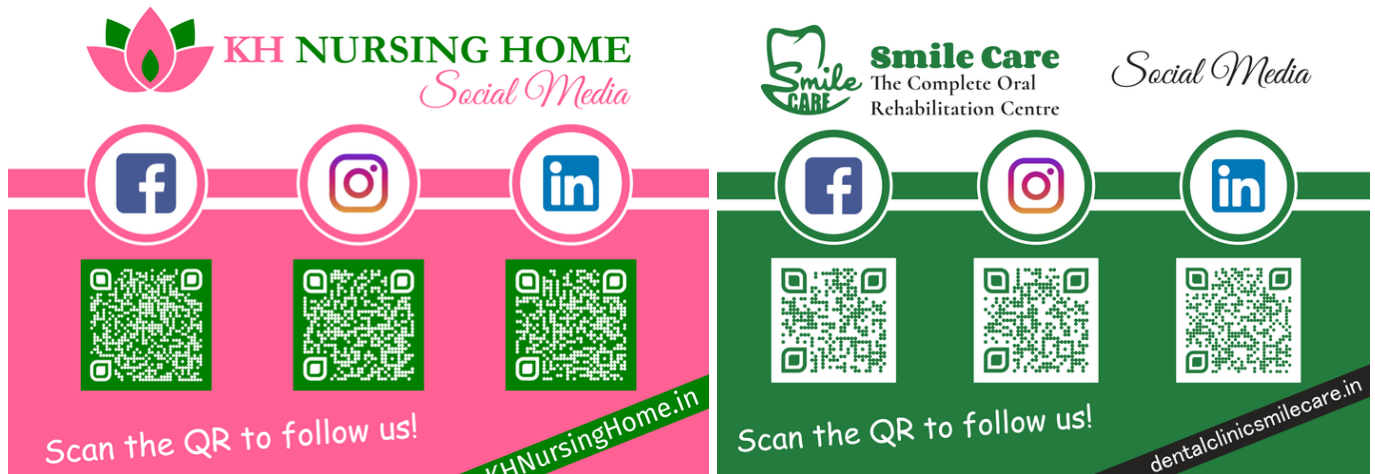
Wrist extension (with broom handle)

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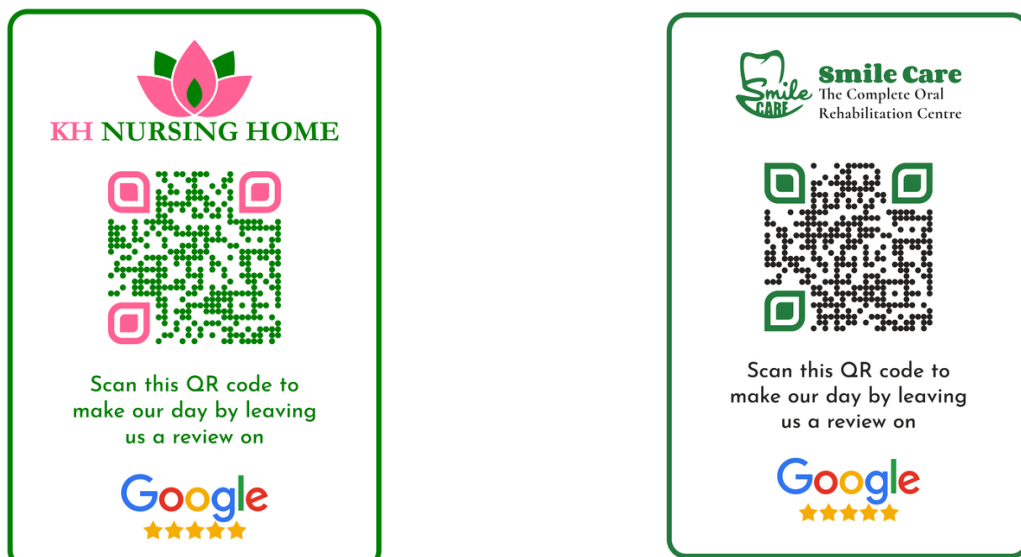
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We thank Shri V. Ramachandran for sharing his personal experience about K H Nursing Home - <https://youtu.be/CoEI8i51FKw>

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