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## Mobile Physical Therapy April 2010 Newsletter

### Welcome to Our New Newsletter!

In this issue we have added some new features including the "Exercise of the Month", Mobile Physical Therapy News, and news about research on rehabilitation and exercise geared toward the older adult. Look for other changes to the newsletter in the coming months.

**Do you know someone (friend, colleague, family member) who would benefit from the information in our newsletter? You can forward this email to them using the "Send to a Friend" link at the top of this email.**

Brad Abrams PT, DPT

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### Exercise May Improve Cognition in the Older Adult

Two recent studies are adding to the growing body of evidence that exercise is good for you mind too! German researchers found that high to moderate physical activity helped reduce the risk of developing cognitive impairments in patients older than 55, while a Canadian study found that resistance training actually improved the cognitive skills of women 65-75.

The German study followed a group of 3909 patients every two months for 3 years. The patients were divided by activity levels: none, moderate, and high. Moderate to high activity was defined as strenuous activity (walking, biking, hiking, swimming) performed 1 or more days per week. At the end

of the 2 years, those in the moderate to high activity group were half as likely to show cognitive decline (compared to those who had no weekly strenuous activity).

The Canadian study enrolled 155 women between 65-75 years of age. Half of the group performed resistance exercises (weight lifting) while the other half performed balance/toning exercises twice a week. At the end of one year, the resistance training group improved task performance by 10-12%, while the balance/toning group declined.

[For more information on this article, click here.](#)

### Mobile Physical Therapy Attends Seating and Mobility Seminar



Power Wheelchair

Many of you are familiar with the power wheelchair commercials--where people are driving their power chairs around the Grand Canyon. There are, however, many types of wheelchairs, both power and manual (one's that you push) for many different situations.

Wheelchair prescription depends on many unique factors, including the patient's condition, activity level, where they want to use the wheelchair, etc. One of the main considerations in wheelchair prescription is the seating...*what the patient will actually be sitting on, what their back will rest against, how the arms will be supported, etc.* There are a large variety of seating options--depending on the user's conditions, abilities, and needs.

As part of our commitment to continuing education, Mobile Physical Therapy will be attending a full day course which will allow an in-depth look at the science of seating, seating and mobility evaluations, and using various cushions (gel, air) and custom molded seating options.

[For more information on this seminar, click here.](#)

### MU Research--Fall Risk in the Young?

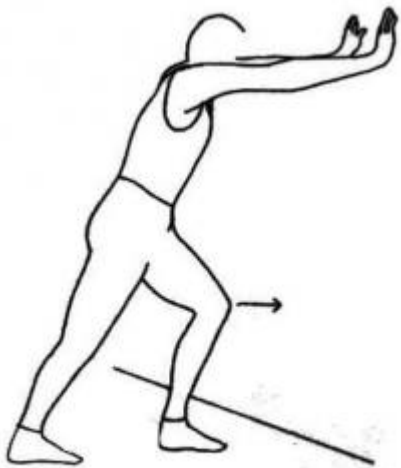
A researcher at the University of Missouri, Carmen Abbott PT, PhD, has identified several key areas which are affected by the aging process and can contribute to fall risk. **This study is unique because its participants**

were from various age groups starting at age 20. Abbott says that even people in their 20s and 30s can have significant risks for falling. **This information is relevant for those far below the considered fall risk age of 65.**

Abbott research shows correlations between ankle range of motion and balance abilities on walking tests. Range of motion (ROM) in the ankles generally decreased as we age, but in this study, younger people age 20's had slightly less ROM than those in their 40's (10 degrees vs. 12 degrees). Future "Exercises of the Month" will also be based on this valuable research.

Start doing this exercise to decrease your fall risk, no matter what your age.

### Exercise of the Month--Calf Stretches



**Standing calf stretch**

[Click on picture for printable version.](#)

This exercise is based on fall risk factors which impact even young (20's) people. See the above article "MU Research--Fall Risk in the Young?"

The calf muscle is also known as the "gastrocnemius" muscle. It is a large muscle located on the back of the leg below the knee. The calf muscle functions to "plantar flex" or point the toes. The tendon that connects the calf muscle to the heel bone is commonly referred to as the Achilles tendon.

The calf muscle is involved in standing, walking, running, and jumping. It allows us to maintain our balance in stance as well as push ourselves off the ground. It works in conjunction with the soleus muscle, a muscle deep to the gastrocnemius that also acts to plantar flex the foot.

**The calf muscle often becomes shortened due to a variety of reasons, and is common in both younger and older people. Calf shortness has been identified as a risk factor for falling.** The position we sleep in, the high heeled shoes we wear, and our choice of exercise activities and sports all lead to a tightening of this muscle. This tightness occurs more often as we age, and if severe can impair walking and can cause the knee to become stiff as well.

To prevent injuries, it is important to stretch the calf muscles. When stretching you should feel a moderate pull in the muscle. Again, you should

feel pull, not pain. In general, the longer the stretch the better, build up to 2-3 minutes at a time--and no bouncing.

### CALF STRETCH

- 1) Face a wall and stand 12 inches away from it.
- 2) Extend one leg behind you, keeping both feet flat on the floor and your rear knee straight.
- 3) Lean toward the wall until you feel tension in the calf muscle of the extended leg. (You can put your arms on the wall for support.)
- 4) Hold for 1-3 minutes. You should feel the stretch in the calf of the back leg.
- 5) Repeat with the other leg.

[For a printable version of this exercise, click here.](#)

### Mobile Physical Therapy Information

Mobile Physical Therapy provides physical therapy services to seniors and others in their homes. Our services are covered by Medicare Part B, PPO's, some private insurances, and private pay. Our office can verify benefit coverage prior to beginning treatments.



[Click here for a referral form, or call us at 314-558-1385.](#)

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