



Getting You On **THE ROAD TO RECOVERY**

A Quarterly Newsletter from Peninsula Rehab & Sport Medicine

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Who are they? (see next page for answers on featured personalities)

“Generation Uch”, “Geezer Boom”, “Boomeritis”.

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These are all terms being used to describe the baby boom generation as we age. Experts have used all those monikers to identify the divide that seems to occur when our minds are willing, but our bodies are not quite as enthusiastic about the activities in which we are about to participate.

As a proud member of the baby boom generation, I find the notion that this is how “the experts” now see us as cruel, untrue and downright mean! As a physical therapist I have noticed that as much as I would like to denounce them and yell “liar, liar pants on fire!”, I can’t. There are real physiological changes that occur with aging.

Perhaps an analogy might help us to better accept the pronouncement the experts and our bodies are telling, and showing, us. Remember the little round red rubber ball of our youth, a pinky ball? We used it for all types of games, from stick ball to stoop ball to the bouncing ball game. “A, my name is Alice and I come from” When that ball was new you thought it would last forever. But as it got older and you used it more and more, it began to age.

It may have developed small cracks which led to larger cracks and maybe it even split in half. It was rarely from deliberate abuse, but generally the result of overuse; the natural aging process that occurred with rubber. It became less flexible and less able to withstand the demands placed on it. Sound familiar?

As boomers, our perception of our abilities and our enthusiasm for participating in activities we have enjoyed for the past 20 to 30 years has not wavered. In our mind’s eye, we cannot possibly be in our 50s or 60-plus. Those are serious numbers and they infer that our youth is becoming a more distant memory on a daily basis.

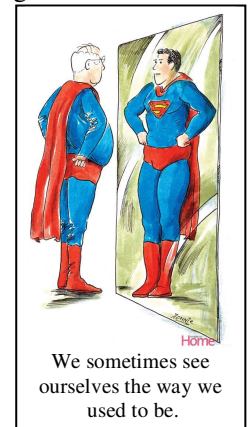
True or false – if we continue to participate in activities with the same level of intensity we always have, we can ignore our chronological ages and we are still the same as we always have been. **FALSE.** As sad as it is, our bodies have

experienced the passage of time too. The same way our pinky ball developed cracks and scrapes as it aged, no longer tolerating being used with the same frequency or level of intensity, our bodies have also experienced the passage of time and the effects of use and abuse. Our bones, ligaments, tendons and muscles are not as strong or as flexible as they were.

Playing in a senior league softball team is an excellent activity if you don’t delude yourself into thinking you can make the same plays you did when you played on the high school varsity team.

Tennis and golf are wonderful activities that can be enjoyed throughout a lifespan. However, even the professional athletes have realized that while they can still compete on a very high level, they cannot compete with players who are half their age.

It has nothing to do with their mental ability to compete, which may be sharper than ever. Their repertoire of soft tough shots and ability to finesse shots could quite possibly be better than ever, but they no longer have the power and the flexibility they used to possess. The ground has gotten a lot lower than it used to be, and simply bending over to take your golf ball out of the cup could be the straw that breaks the proverbial “camel’s back”.

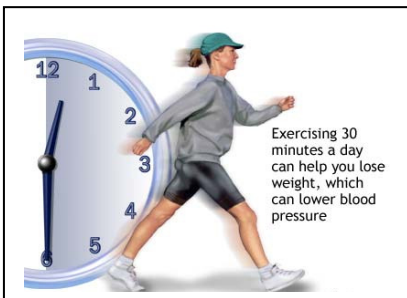


So does that mean we should give up and retire to our recliners? Not a chance! It does mean that we should use all the experience and knowledge we have spent a considerable time gathering and modify our approach to physical activity. Whoever it was that said we should play smarter, not harder, was right on target.

Overuse injuries are not a figment of your doctors' imaginations; they are very real and can be very painful and problematic (think back to your pinky ball). The best way to treat them is to try and avoid them, and if they have already occurred, don't ignore them and assume they will go away. They won't; they'll come back to haunt you at the most inopportune times.

The recipe for treating acute injuries has not changed since our youth, R.I.C.E. – rest, ice, compression and elevation. What may have changed is the fact that your problem may now be chronic. That does not mean you have to give up the activity you enjoy. Rather, you may need to monitor and modify what you do prior to, during and after you participate in some physical activities.

You may also need to realize that lifting a grandchild may exceed the weight limit you were given by your physician. A gallon of water or milk weighs approximately 8 pounds. Perhaps carrying four grocery bags at once is no longer the best plan. While walking is probably one of the very best activities in which you can participate, jogging is one of the worst, as far as the strain it places on your joints and muscles. I can almost guarantee that your dog will love you as much if not more if you take him/her for a long walk rather than a jog. They love your time, not your speed or power.



The same goes for competing with your children or grandchildren. Teach them some of the smooth, smart moves you have learned, rather than try to out drive them on the golf course, or beat them with your power serve in tennis.

So the moral of this story is being a couch potato is bad, but so is pretending to be 25 years old. We just need to apply our accumulated experience to yet another

segment of our lives.

Before you begin a physical activity program of any type consult with your physician.

If you haven't participated in a given activity before, get help, not from your spouse or partner, but from a professional in the activity.

If you have a history of joint or back (or neck, or knee, or shoulder ... etc., etc) pain then you may also want to consult with a physical therapist prior to becoming more active. There are ways to stretch and modifications we might suggest that may make your experience more enjoyable. They may even make it pain free.

Did you name the featured BOOMERS correctly?

John Belushi	Bill Clinton	X	Michael Jordan	Spike Lee	Madonna	Roseanne Barr	Magic Johnson
Howard Stern	Ben Cohen	Bill Gates	X	X	X	X	Bruce Springsteen
Steve Jobs	X	Hillary Clinton	Oprah Winfrey	Stephen Spielberg	X	Karen Silkwood	Oliver Stone
Michael Milkin	OJ Simpson	Rush Limbaugh	Michael Jackson	X	Stephen King	David Letterman	X

what is the difference between physical therapy and occupational therapy?

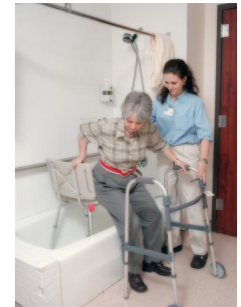
A physical therapist focuses specifically on one injury, a set of injuries, or recovery from orthopaedic surgeries. They work to help rebuild muscle groups.

Patients who have had a hip replaced, for example, may need some home care initially, utilizing occupational therapy to learn how to function independently again. They might be taught the best ways to move around the house safely, or how to get in and out of the shower or tub safely, etc.

A stroke patient might need to re-learn feeding themselves, buttoning a shirt, or just getting up and down

from a chair.

OT's are in the business of re-teaching people basic skills, fine motor skills, etc. The



patient may then be referred to a physical therapist where they would work on motion and strength, gait training, balance and proprioception. (From the Latin proprius meaning "one's own" and perception.) Rather than sensing external realities such as the sense of smell, or touch, proprioception is the sense of the orientation of one's own limbs in space – like knowing where to place one foot in front of the other.

Just like a hip replacement, a patient who has had a shoulder replacement may or may not need Occupational Therapy, however, they would need to work on regaining range of motion and

strength in muscles that have lost strength due to lack of motion during recovery. The physical therapist would also use modalities to help alleviate pain and swelling.

So you might say an Occupational Therapist is in the business of helping patients to regain independent living, and a Physical Therapist is in the business of helping patients by reducing pain and swelling and regaining strength and range of motion.

Rear End Collision: Most common type of car accident.

This time of year brings many thousands more drivers to the Eastern Shore and Ocean City Roads. We see all too many patients who have come to us due to injuries caused by being hit from behind. They have neck and back problems for weeks, months or even years.

If you spend a lot of time in traffic, chances are you've either had or almost had a traffic accident. One of the most common accidents is rear-end collision. There were 1,800,000 of them in 2006 -- that's 29% of all the injury crashes in the United States;



Obviously, no one deliberately runs into the back of another car. The plain and simple fact is that the person was not looking where they were going - even if it was for just a split second. That's all it takes. Reach for a tissue, your cell phone, text a message, or drop your cigarette!

Anything that takes your eyes off the road for any time at all creates the potential for you to smash into back end of someone else. The result: injury to people, damage to cars, lost time at work, and medical bills. All of it could have been avoided if only someone hadn't taken their eyes off the road.

DISTRACTED DRIVING (Source: US Navy Fleet Statistics)

The Problem: Driving instructors estimate that a driver makes 200 decisions for every mile of driving. If you're mentally solving business or family problems while driving, you're adding to the total cognitive workload. *If you take your eyes off the road for three or four seconds at 55 mph, the car travels the length of a football field.* Other factors, such as fatigue, weather and traffic conditions, can make distractions even more potent.

The Clues: How do you know when you are distracted? Consider how many of these things have happened to you:

- ✚ A passenger in your car screamed or gasped because of something you did or didn't do.
- ✚ You ran a stop sign or red light unintentionally.
- ✚ You swerved suddenly to avoid an animal, a car, or another highway hazard.

- ✚ You slammed on your brakes because you didn't see the car in front of you stop.
- ✚ You didn't remember driving from one place to another.
- ✚ You drifted in your lane or into another lane of traffic.

These events are clues that you're distracted while driving. The next time you decide to read a road map or a work report, referee an argument, or even engage in an intense conversation on a cell phone or with occupants in the car, ask yourself this question: Who's driving? The answer is YOU are – and you're not paying attention.

KEEP YOUR EYES ON THE ROAD.

Use common sense – when you are in a higher traffic area where there are traffic signals and intersections there are going to be cars that are slowing and stopping.

If you are going 60 miles an hour approaching the traffic signal at Race Track Road, it would be a good idea to put down the cell phone and finish the text message later.

If you are driving at 60 miles an hour approaching the WalMart from either direction, it might be a good idea to put down the newspaper to see if there are any cars in front of you that are slowing down and may have to stop at the traffic signal. (Yes that's right, people actually do read the newspaper while they drive – propped right up there on the steering wheel.)

Did you know you can report aggressive, reckless and negligent drivers? If you see someone driving aggressively

or talking on the phone while reading a newspaper and eating a hamburger all at the same time, **when you can safely do so**, dial # 7 7 and report them. If you can get a license number, make and model, all the better.



The Smooth Operator program specifically is a regional effort to combat aggressive driving in the mid-Atlantic region. Our media ads and collateral materials are intended to educate the public about the dangers of aggressive driving as well as to support the concentrated enforcement efforts during the campaign. This program is fully supported by law enforcement across the state, and over sixty agencies in Maryland alone, including every barrack of the Maryland State Police, actively participate in the Smooth Operator enforcement waves.

To learn more about the Smooth Operator Program and for more tips and information on dealing with aggressive and reckless drivers, follow this link to the MDSHA Highway Safety Program

www.smoothoperatorprogram.com

Hopefully by reporting aggressive drivers more frequently, we can all help to reduce the chances of being the victim of their actions.

NEW!

Some of you already receive our newsletter electronically. It is now available to *everyone* electronically in a PDF format. If you would like to receive this newsletter electronically, just send an e-mail to maggiepenrehab@hotmail.com, and your e-mail address will be added to our list for electronic delivery.

We will not use your e-mail address for any other purpose than sending the Newsletter quarterly, and we will not share your e-mail address with any one else.

Save a tree.  Get your Newsletter electronically!

More links you might find useful and interesting:

The Wear and Tear Theory of Aging:
http://longevity.about.com/od/research/handmedicine/p/wear_tear.htm

Discovery Health: Staying Young Center – Tips on feeling younger. “Baby Boomers Get Another Shot at Growing Up”
<http://health.discovery.com/centers/aging/secondadulthood/secondadulthood.html>

The Fear of Falling: Your confidence level has everything to do with your chances of falling:
[http://www.ptjournal.org/misc/RESEARCHFYH04\[1\].pdf](http://www.ptjournal.org/misc/RESEARCHFYH04[1].pdf)

October Issue Features:

Backpacks – Kids and Their Backs

Raking Fall Leaves – Don't let it leave you injured

..... and more

Peninsula Rehab & Sports Medicine

is a state-of-the-art Physical Therapy facility specializing in:

- * Orthopedics
- * Sports Medicine
- * Industrial Rehabilitation
- * Ergonomics
- * Manual Therapy
- * The needs of the active retirement community

with the goal of getting you on the road to recovery and back to the activities you enjoy.

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