



AQUA
THERAPY
SPORTS
PERFORMANCE

Robinson Physical Therapy
& Health Center, Inc.

5635 Steubenville Pike,
Route 60
McKees Rocks, PA 15136

Phone: 412-787-8616
Fax: 412-787-8618
Email: staff@robinsonpt.com

Inside this issue:

Running Barefoot	1
Energy In a Can	2
Pearls of Wisdom	2-3
Strong Foundation	3
Insurance Update	4



Chris Marrone,
MPT, ATC
Director
Editor

Please feel free to reach me at any time via email, fax, or telephone. I hope that you enjoy this issue of Robinson Physical Therapy & Health Center News!!!

Robinson Physical Therapy & Health Center News

Volume 7, Issue 2

WE CARE FOR YOU!!!

December 2010

Running Barefoot...Is It For You?



Emily Marino,
MPT

Recently there has been a renewed interest in running barefoot. There are even shoes such as the Vibram 5 finger that act as a glove for your foot to mimic barefoot running. But is it safe, and is it for you? Here is a simple breakdown of the pros and cons of barefoot running to let you decide for yourself.

Proponents of barefoot running report a reduction in recurrent ankle sprains, chronic foot injuries, and plantar fasciitis. This is thought to be the result of barefoot runners landing on their forefoot, and preventing impact on the plantar fascia. This proposed injury reduction may also be a result of increased proprioception and tactile sensitivity by hitting the ground with a bare foot, and improving balance and coordination.

Without shoes a runner may develop a more natural gait and strengthen the muscles of the foot. Going barefoot also removes the heel lift provided by running shoes, thereby stretching the Achilles tendon and calf muscles, which could potentially reduce injuries.

Barefoot running is also thought to reduce the energy cost involved with running by approximately 4%. This may be due to the removed weight of shoes, which must be propelled forward and then halted to a stop after landing on the heel, causing more oxygen consumption, and energy expenditure.

Despite the above claims, well designed studies on barefoot versus shoe running are lacking. There are definite drawbacks to going barefoot. Shoes are meant to protect the foot from extremes in temperature and weather conditions, as well as to protect the plantar surface of the foot from abrasions due to stones, glass, or other punctures. Running barefoot may also result in plantar pain and blisters.

The right shoes can correct many biomechanical problems such as supination and pronation, which in turn reduce injury. Many of these same dysfunctions require orthotics or arch supports which cannot be offered in barefoot running.

In these modern times we do spend too much time in shoes, which may be corrected by simply going barefoot in your home to strengthen the foot musculature. If you are so inclined to try out barefoot running, be sure to go about it gradually. Starting by simply walking around barefoot in safe environments to toughen up the plantar skin, and slowly working up to short jogs. It is also necessary to strengthen the muscles of your foot and ankle, as well as stretch out your calf musculature. This can be done under the guidance of a Physical Therapist.

Until there is further research done to firmly find the benefits vs. harm of running shoes, if you're not having pain or problems, why change?

References:

1. *Barefoot Running-The Pros and Cons of Going Shoeless*, By: Elizabeth Quinn
2. *Should You Be Running Barefoot?* By: Amby Burfoot *Runner's World*, August 2004
3. www.Barefootrunningshoes.org/
4. *Barefoot Running*. By: Michael Warburton (www.sportsci.org/jour/0103/mw.htm)

Energy In a Can?



**Michael Smith,
BSEP**

Do you find yourself getting tired in the middle of the afternoon? Finding yourself feeling sluggish after lunch and wanting to lie down or dosing off at your desk? How do you usually help this problem? Do you get a cup of coffee or some type of energy drink or even a soda? Does this sound like one of those “5 Hour Energy” commercials yet?

Instead of reaching for the soda, coffee or energy drink lets look at why you may be getting tired and how we can possibly prevent it from happening. The fact is that around 2 or 3 pm your blood sugar is probably low. The reason for this is because when you eat lunch your body produces insulin. Insulin is needed for the body to process the sugar in the food we are eating. While this is something that happens naturally, most of us consume more than the recommended 50 grams of carbohydrates for one meal, causing our bodies to produce more insulin than our bodies need and can handle at that time. This extra insulin then proceeds to clear the glucose (sugar) from our bloodstream until it reaches too low of a level for our bodies to function properly, resulting in our bodies protecting themselves by causing us to feel tired and sluggish.

So now that we know what may be causing our sleepy state in the middle of the afternoon, let us look at how we can combat this tired feeling:

1. Eat small. A big heavy lunch always drains you of energy in the afternoon. Eat snacks or small meals throughout the day to keep your blood sugar up.
2. Drink plenty of water. Dehydration can make you lethargic and tired. Instead of grabbing that energy drink or soda, fill up on water. Caffeinated beverages actually dehydrate you faster which causes your body to crash. They also can stay in your system long after the desired side effects wear off, which can lead to them inhibiting your sleep at night, leaving you tired the next day.
3. Move around. A brisk walk around your building or some trips up and down the stairs may be enough to get your blood pumping. While you might feel too tired to “exercise”, it’s usually the thing you need to up your energy.
4. Engage in a little chit-chat. When you find yourself nodding off, when working on that paper work, head down the hall for a change in scenery. A good conversation may give you that burst of energy to finish the days work.
5. Always consider making your own energy bars and drinks. Using fresh foods to make a smoothie or energy bar are great alternatives for snacking instead of the off the shelf drinks.

Hopefully these suggestions help you over come your afternoon sluggishness in a more healthful way. As always, please feel free to contact me with questions or comments at 417-787-8616 or michaelsmith@robinsonpt.com

Pearls of Wisdom from the Desk of Wim Rogers PT, DPT, ATC



**Wim Rogers,
PT, DPT, ATC
Managing
Partner**

I sat down to think about a topic for this edition of the Robinson Physical Therapy Newsletter. I was unable to think about any one specific topic. So, I thought I would address several topics that I have discussed with patients over the last several weeks.

Surgery! For some reason, I have had multiple discussions concerning surgery recently. Many people believe if they go and have surgery, they will be “fixed”! As a patient, you need to be aware of the fact that most surgeries don’t “fix” anything. For example: a meniscectomy doesn’t “fix” the meniscus. A meniscectomy, as the word indicates, removes the meniscus or part of the meniscus. It doesn’t “fix” the meniscus. It may help alleviate some pain and it may keep your knee from “buckling” or “giving out” on you. But it does not “fix” the meniscus. It removes the part that is torn. But, remember that part of the meniscus had a responsibility. If it is removed, your knee is no longer normal.

Now, with that being said, a meniscus can be “repaired”, but only if the tear is in a certain part of the meniscus. A good surgeon can evaluate a knee and tell a patient if the meniscus can be “fixed”. A patient must be a healthy candidate and be able to listen to their physical therapist and surgeon for follow-up care and management.

Pearls of Wisdom (cont.)

A diagnosis of a torn meniscus doesn't necessarily mean you need to have surgery. An article from 2008 in the *New England Journal of Medicine*, found that approximately 50% of **normal male** subjects and 35% of **normal female** subjects over the age of 60 years old had meniscus tears. These subjects were diagnosed with a meniscus tear, but had no pain! So just because there is evidence of a torn meniscus, it does not mean you need to have surgery!

Another study, consisting of people over the age of 60 years old without any back pain, found that 21% had spinal stenosis, 36% had a herniated disc, and 90% had a degenerative or bulging disc. **90% had a degenerative or bulging disc!!!** Yet, most people think that if they have a disc herniation or disc bulge, they must have surgery! A study in *Pain*, 2006, found that cognitive intervention and exercises are likely more effective for disability than spinal fusion surgery!

Don't worry! Our Government will take care of everything!!! I recently received an email that I would like to share with everyone.

HEALTHCARE

"Let me get this straight. We're going to be gifted with a health care plan we are forced to purchase and fined if we don't, written by a committee whose chairman says he doesn't understand it, passed by a Congress that hasn't read it but exempts themselves from it, to be signed by a president who smokes, with funding administered by a treasury chief who didn't pay his taxes, to be overseen by a surgeon general who is obese, and financed by a country that's broke. What could possibly go wrong?"

Strong Foundation

By Chris Marrone, MPT, ATC, Director

If you look at any great athlete, whether it is at the high school, collegiate, or professional level, they all have two key components in common that make them great; a common denominator that allows them to have that explosive power, agility, and speed. That common denominator is a balance between a strong foundation and flexibility. Whether you are an elite athlete, a weekend warrior, or someone who just enjoys being active, you still need to have these components.

So what makes up the foundation, the basis of all movement in your body? Simply stated it consists of "the core", and I am not just talking about the abdominals. The core consists of far more than just the abdominal muscles. In fact core strength training aims to target all the muscle groups that stabilize the spine and pelvis. It is these muscle groups that are critical for the transfer of energy from large to small body parts during many sporting or everyday life activities.

The second key component, flexibility, is just as important as core strength. Flexibility allows for the optimal alignment of musculature, allowing them the ability to act as proper mechanical levers. Without flexibility, those powerful muscles would not be able to produce such explosive power and speed and you would not be able to function on a day to day basis.

The benefits of strength and flexibility training are enormous; whether you are talking about athletic performance or everyday tasks. But strength and flexibility training must be done correctly in order to achieve balance in the body. Without balance, there is imbalance, and that is where most injuries occur. This is why it is so important to seek out the correct professionals, such as Physical Therapists, who can diagnose imbalance within the body. This serves as tremendous injury prevention, whether on the field, at work, or at home.

One specific tool that we have to measure this balance of strength and flexibility, whether it is for an athlete or the weekend warrior, is the Functional Movement Screen (FMS). The Functional Movement Screen is the product of an exercise philosophy known as Functional Movement. It is a ranking and grading system that documents movement patterns that are key to normal function. By screening these patterns, the FMS readily identifies the functional limitations and asymmetries that can reduce the effects of functional training and physical conditioning and distort body awareness. It is this tool among many others that help us to build a strong "core" foundation, allowing for flexibility, power, and balance in the body.

If you have any questions or would like to learn how to achieve balance and symmetry in YOUR body, please stop by and see us!

Robinson Physical Therapy
& Health Center, Inc.

5635 Steubenville Pike
Route 60
McKees Rocks, PA 15136

Phone: 412-787-8616

Fax: 412-787-8618

Email: staff@robinsonpt.com

www.robinsonpt.com



WE CARE FOR YOU!!!

All of us here at Robinson Physical Therapy would like to extend our warmest wishes for a Happy Holiday season and a healthy New Year!

Insurance Update

By Cheryl Betzler, Office Manager

Insurance is always changing. We have noticed over the last two years an increase of high-deductible plans. Many patients have not yet met their deductibles for 2010, and with 2011 just around the corner, many insurance plans will start over again. **Therefore, we are forced to collect co-pays and deductibles prior to or on the day of treatment.**

Our staff will provide you with an estimate, and/or an exact amount when possible before or on your initial visit. We request when scheduling your first appointment you provide our office with correct information, so we may verify your coverage and inform you of your financial responsibility. **We encourage you to contact your insurance company by calling the number on your card as well.**

When we verify your coverage, we also ask about visit limits. Many plans now have limits for Physical Therapy as well as Chiropractic. **If you have had any physical therapy or chiropractic during the calendar year or contract plan year, you must inform us.** Our office prefers to be informed as to not exceed your allotted number of sessions. We do not wish to put any surprise financial burden on anyone. Again, we stress that you attempt to provide our office with the correct information to verify your coverage on your behalf.

Remember, it is your insurance policy and it is your responsibility to know your coverage and limits.

Thank you!

PLEASE CHECK US OUT ON THE WEB AT WWW.ROBINSONPT.COM YOU WILL FIND OUT ALL THE LATEST NEWS, BE ABLE TO DOWNLOAD CURRENT AND PAST NEWSLETTER ARTICLES, AND CAN EVEN BUY FROM OUR NEW ONLINE SHOP! WE NOW SELL BIOFREEZE AND NORDIC NATURALS FISH OILS, AS WELL AS HOT PACKS/COLD PACKS, AND BRACES, THROUGH OUR ONLINE STORE AND IN THE CLINIC!!