

Flying Tips for Summer



Whether it be a short or long haul flight or even sometimes a long car journey, the inactivity of the trip can lead to stiff joints, tightness in muscles and spinal pain often as a result of poor posture. In addition many people suffer from swelling in their ankles due to poor circulation and the risk of DVT (deep venous thrombosis) has received a lot of attention in the press.

We've put together some tips and exercises to help avoid short-term muscle or joint discomfort/soreness that you may experience when travelling – they may also give you some activity to relieve the boredom!

- Try to avoid slouching and poor posture especially whilst watching the seat-back screens now common on many planes.
- Whilst sitting, try rolling your hips backwards and forwards; this tilts your pelvis back and forth helping to relieve tension in the lower back.
- Whilst sitting in your seat, wiggle your toes up and down, lift up your heels keeping your forefoot on the floor and do ankle circles in each direction. This helps pump your blood up towards the heart. It will help keep any swelling down and improve circulation in the legs, reducing the risk of DVT.
- If you want to sleep on the plane it may help to invest in a neck cushion, especially if you have any history of neck stiffness.
- For longer-haul flights, try changing your positions regularly by standing and if possible walking around.
- Adjust your seat to help improve posture whilst sitting. Placing a rolled up blanket or small cushion at the small of your back can improve the support for your lower spine.
- Last but not least, remember to drink plenty of water. Aside from combating the dehydrating effect of flying it will also help boost circulation and tissue health.

If you have ongoing symptoms, we would advise you to seek help from a physiotherapist on your return. In the meantime, we hope you enjoy your trip and your holiday this summer!

Leona Nwokeji

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Opening Hours:

Monday: 8.30am - 7.30pm
Tuesday: 8.30am - 8.30pm
Wednesday: 8.30am - 7.00pm
Thursday: 8.30am - 8.30pm
Friday: 8.30am - 7.30pm
Saturdays: 10.00am - 12.30pm (first & last Saturday of the month)



Editorial

It's been a busy start to the year at the clinic. I was very honoured to be invited to speak at the annual RSI (Repetitive Strain Injury) awareness event at University College London in late February on physiotherapy treatment. This day of presentations and an exhibition was well-attended and the feedback has been very positive.



Daniel Brown

We've had some staff changes here at the clinic. Helen Jeremiah our evening physiotherapist has left to have her baby. We wish her all the best for her upcoming new role and hope to see her back here in the future. Her position has been taken over by Daniel Brown who is a very experienced physiotherapist and also a qualified gym and fitness instructor and massage therapist. Daniel is a strong all-rounder but has a

special interest in sports therapy having been involved with the Chelsea Football Academy, athletics and marathon events. He will be a great addition to our team.

I'm also very pleased to announce our new Nutrition Service. Tracy Parker is a registered and sports accredited Dietitian and certified Health and Fitness instructor with 14 years experience. Tracy has unique skills in both nutrition and the sports arena having played squash at international level. She has worked in the UK and US, with experience in London teaching hospitals as well as being a specialist in the field of sports dietetics and wellness nutrition.

The service aims to provide personalised nutrition programs for better health & performance



Tracy Parker

including sports nutrition for recreational and elite athletes, weight control, heart health, diabetes, osteoporosis and women's health, including pre and post natal nutrition.

If you would like any further information on this or any of our services, please contact the clinic.

*With best wishes,
Helen Skehan,
Practice Principal*

Inside this issue

In this issue we look at an often overlooked condition that has relevance for everyone at any age – Osteoporosis. We also look at some tips to alleviate the discomfort of travelling.

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Osteoporosis - Catch it Young!

Osteoporosis is a debilitating disease, literally meaning 'porous bones' characterised by thinning brittle bones that are more susceptible to fracture. Osteoporosis has been called the silent epidemic, because often people don't know that they have it until they break a bone and because it affects so many of us. Latest figures from the National Osteoporosis society report that one in two women and one in five men over the age of 50 in the UK will break a bone, mainly because of osteoporosis.

Osteoporosis has also been described as the 'Paediatric condition with Geriatric consequences'. Bone density increases throughout the early years to peak in the mid-30's. From then on, there is a fairly steady decline accelerated in women due to the menopause as

oestrogen is a major bone stimulant. The key therefore to prevention of osteoporosis is to maximise bone density and bone health up to those crucial middle years and to lessen the bone loss later in life. Remember all those gym activities that were sometimes unwillingly participated in, in primary and secondary school – I particularly remember cross-country running. Those activities may have played an important role in whether or not you are at risk of developing osteoporosis. What is worrying is seeing the reduction in the importance of exercise in the school curriculum along with the increased computer and video-game dominance of young people's leisure time.

There are a number of risk factors for osteoporosis including genetic, smoking, alcohol and bulimia/anorexia. It is also thought to affect city dwellers more, due to less physical activity. Also physical activity levels throughout life especially resistance and weight-bearing exercises, along with a balanced diet, are thought to play a major

role. Tracy Parker our new Nutritionist has put together some details on bone boosters and bone drainers.

Bone Boosters

1. Calcium is a mineral your body requires for healthy bones, teeth, and overall functioning. Because your body cannot produce calcium itself, you must obtain it through calcium-containing foods. Fortunately, calcium isn't hard to find. It's available in:

- Dairy products such as low-fat or non-fat milk, cheese, yoghurt, and ice cream.
- Dark leafy green vegetables such as spinach, collard greens, bok choy and broccoli.
- Dried fruit, nuts and seeds, pulses, including baked beans, chick peas and kidney beans.
- Fish with soft edible bones such as tinned sardines, salmon and whitebait.

• Foods fortified with calcium, including orange juice, cereal, and breads, as well as products containing soy and tofu.

The body more easily absorbs the calcium in milk and dairy products than the calcium in most other food. Calcium also needs a balance of other nutrients such as magnesium and vitamin D to work effectively in building bone.

2. Vitamin D is an important part of your daily diet because it helps your body absorb calcium. Vitamin D is also called "the sunshine vitamin" because when your body is exposed to sunshine, it naturally produces vitamin D. Good dietary sources include:

Dairy products, oily fish e.g. salmon, mackerel, tuna or sardines and fortified cereals

3. Magnesium is involved in many varied processes in our bodies from nerve function and energy production to muscle relaxation and bone forma-

tion. It is needed to convert vitamin D into a form easily used by the body. Good sources are nuts, seeds and green leafy vegetables

4. Vitamin K plays an important role in blood clotting, but is also required for the production of osteocalcin, and together with Vitamin D helps to increase bone mineral density and reduce fractures. Green leafy vegetables and vegetable oil, especially Soya oil are good sources of Vitamin K.

5. Fruits and vegetables. Current evidence suggests that people who eat more fruit and vegetables may have a higher bone mineral content, which is associated with healthier bones. They are also a great source of all the nutrients thought to be important for bone health such as calcium, potassium, magnesium and vitamin K.

6. Exercise. Regular physical activity maximises the density of your bones while they are still growing and maturing and then minimises bone loss later in life. The type of exercise carried out is important, as only weight bearing exercise such as walking and strength training will have the direct benefits on bone.

Bone Drainers

1. Excessive protein. Foods high in animal protein, when taken in large amounts, can increase the amount of calcium the body gets rid of through urine. This does not mean you need to stop eating animal protein, as an adequate supply of protein is essential for maintaining strong bones and muscles and low protein diets may also increase bone loss. Try to include more vegetable protein, such as nuts, seeds, legumes, vegetables and fruits in your diet.

2. Caffeine. The National Osteoporosis Society (NOS) advises that although caffeine is not a risk factor for osteoporosis, coffee and tea may contribute to bone loss by increasing the secretion of gastric acid, which needs neutralising with calcium. They suggest drinking these drinks with milk and avoiding excessive intakes.

3. Drinking lots of fizzy drinks - phosphate, in the form of phosphoric acid, is used to improve the

flavour in a lot of fizzy drinks and too much can cause the body to use calcium to balance levels. While there is no hard scientific evidence about its effect on bone health it may be a good idea to only drink these in moderation, particularly for children who are still growing. Women, particularly those concerned about osteoporosis should limit their intake of cola to occasional.

4. Alcohol. Enjoying the odd glass of wine could actually help your bones, but drinking too much alcohol is damaging to our skeleton. The mechanisms remain to be clearly defined, but there is evidence to suggest alcohol in large amounts is directly toxic to osteoblasts, thus reducing bone formation, and may also directly affect bone mineral density.

5. Low body weight - being overweight is not good for general health, but being underweight puts bone health at risk. Oestrogen is the number one hormone for healthy bones in women. Oestrogen levels will naturally fall during the menopause at around the age of 50, but excessive diet-

ing and severe loss of weight in women also leads to low levels of oestrogen in the blood, which interferes with bone health and increases the risk of developing osteoporosis.

6. Smoking has a toxic effect on bone by inhibiting the construction cells from doing their work. It's another good reason to try to give up.

7. Salt. A high salt intake can increase the amount of calcium the body gets rid of through urine, which may have adverse effects on calcium metabolism and bone loss. Watch out for 'hidden' levels of salt in processed foods.

Helen Skehan and Tracy Parker.

(An extended article that includes information on recommended nutrient and food amounts is available from the clinic.

