

Newsletter



Spring/Summer 2016

Welcome to our bi-annual newsletter. It is always a special time of year as the days get longer and all the spring flowers and blossoms begin to appear.

The practice has had a good six months, busy and lots of stimulating courses and meetings. We have had several practice meetings of all the therapists and invited speakers to come and talk to us, or perhaps had one of the team present their speciality area of skill. They have proved stimulating, educational and also a good opportunity to catch up with each other. As we don't all work on the same day this is really important. It's actually amazing to realise the wealth of knowledge we have under one roof!

Our website has now been updated and you can take a look at everyone at Bramhall Osteopathic Practice. We have also leapt into the 21st century and now have a Facebook and LinkedIn page. Please follow us on Facebook. There should be some interesting topics featured each week.

Our osteopathic team all work on different days:-

Jo Cheaney	-	Tuesday/Wednesday/Thursday
Maureen Pickup	-	Monday/Friday
Liz Halsey	-	Friday/Saturday a.m.
Elizabeth Curphey	-	Wednesday
Jose` Fernandez	-	Thursday p.m.

With this newsletter I have included an article on texting necks and other therapists have included a few of interest too.

Justine Jackson, is still providing excellent treatments. She is very experienced in remedial massage, reflexology, aromatherapy, hopi-ear candles and Japanese face massage (Tsubo-ki) - She is always preparing wonderful smelling oils, creams and bath salts to suit individual requirements.

Justine works on Friday and Saturday mornings but has been able to extend her Tuesday to a full day, so we now have some afternoon appointments available.

Dee Woodcock, our physiotherapist, specializes in women's health problems, particularly linked with incontinence and pelvic floor problems and issues arising in pregnancy. Physiotherapy sessions are 45 minutes.

Dee is also offering one to one Pilates sessions. The initial session being 1¼ - 1½ hours to allow for full assessment of the body to locate weak areas that need addressing. Follow up appointments are then about an hour and will involve a progressive routine. People may then be ready to join a local class. Dee is happy to do the occasional re-assessment along the way.

She has recently had a very interesting article published in the SK Magazine.

Dee is available here on Wednesday afternoon and Saturday morning.

Fiona Bullock, our acupuncturist, combines both traditional Chinese medicine acupuncture and also five elements acupuncture. She treats a whole range of problems and ages of patients, but has a special interest in women's health issues, fertility and pregnancy. Treatment times are 1½-2 hrs initial, 1 hr subsequent.

Fiona is available on Monday morning.

Suzanne Gaskell, our chiropodist/podiatrist is available on Thursday morning. Initial treatment times are 45 minutes to allow Suzanne to examine your feet, give self-help advice and do a treatment. After this appointments will be 30-45 minutes, depending on the amount of work required.

Heather Coppard has recently joined our practice and is offering hypnotherapy and mindfulness to patients. These can be very useful tools to help manage day to day stress or management of more long-standing issues.

Heather is always happy to discuss whether either therapy is appropriate for individual needs.

All practitioners have leaflets in the waiting room to give you further information.

We have just had a big celebration at the practice. Karen Hackett, our practice manager, has celebrated 27 years with the practice and had a very special birthday in February. She has been a great asset to both practitioners and patients at the practice over all those years. We celebrated in style - have a great year Karen and thank you.

As to the rest of our team, Karen Hackett continues as practice manager and keeps us all in order! She is always a very efficient, friendly point of contact and is helped by our team of receptionists Ann Johnson, Margaret Schofield and Claire Currie. We are still helped out occasionally during the year by Marian Kidd and Bobby Hill.

As always, thank you to all our patients who have been so supportive to the practice. It is always lovely to receive recommendations/referrals and get to meet people's friends and families.

If there are any questions you need answering please ask any of the receptionists. If they can answer the enquiry themselves they will, if not they will refer it on to one of us.

Enjoy the sunshine and warmth when it comes!

Jo Cheaney

Mindfulness Article

Chronic Pain

Pain can take so many different forms and is really unique to each of us. Most of us will have experienced acute pain such as stubbing a toe or bumping an elbow. It is deeply unpleasant but usually short lived and quickly forgotten. But what about when the pain doesn't go away? This is the reality for thousands of people in the UK who are living with chronic pain conditions. The causes of chronic pain are vast, but may include long term illness or disease, injuries or ongoing conditions. It would be difficult to list every condition, but more common causes of long term pain include arthritis, fibromyalgia, cancer, multiple sclerosis and pelvic pain conditions.

Chronic pain can have a huge impact on our lives, potentially limiting our mobility and altering our ability to work and participate in social/exercise activities. The mental health of a person experiencing chronic pain can also be dramatically affected often resulting in feelings of depression and anxiety.

So what can we do to improve the situation?

Within the world of pain management, there is currently great excitement about the potential benefits of mindfulness in improving patients experience of pain.

You may well have heard about mindfulness in the news. Indeed recently there has been increased interest in the use of mindfulness in schools, businesses and health care, but what's it all about?

Mindfulness

Well, put simply, Mindfulness is learning to be present in the moment, without worrying about the past or being concerned about the future. The practice allows us to bring caring attention to our present experience but without being judgemental or critical of it.

So how can this help us with chronic pain?

Toni Bernhard (2015) explains that there are three components to physical discomfort: the unpleasant physical sensation itself, our emotional reaction to it (often anger or frustration) and the stressful thoughts we spin that may have no basis in fact (eg- thinking the pain will just keep getting worse). It is interesting to note that two of the three components that make up our experience of pain are mental in origin.

This does not mean that the pain is in your head or doesn't exist, but it highlights the importance of the brain-body connection and how the mind plays an integral role in our experience of pain.

Indeed we now understand that psychological factors can play a significant role in maintaining or exacerbating pain, for example:

- Worrying about the pain can lead to bodily tension and greater pain
- The experience of pain can lead people to avoid formerly pleasurable activities for fear of exacerbating it- this tends to bring down our mood, increasing a negative view of ourselves.
- Feeling that we can't control the pain can lead to a sense of helplessness and hopelessness- this lack of perceived control is likely to increase stress
- Our thoughts and emotions affect the intensity with which pain is experienced (Newbury Helps, 2015).

Mindfulness can help us learn to catch stressful emotions when they first arise, so we can mindfully note their presence and turn our awareness to self compassion, instead of launching ourselves into stressful stories (Bernhard, 2015). Indeed we may not be able to change the pain itself but we can change our response to it and prevent ourselves from piling up unnecessary secondary suffering.

Certain parts of our brains are now known to increase our feelings of stress or anxiety and heighten our response to pain. The amygdala is a primal region of the brain, associated with fear and emotion. This 'fight or flight' centre is involved in the initiation of the body's response to stress (Ireland, 2014). Amazing research from Harvard neuroscientists has recently shown that after undertaking just 8 weeks of regular mindfulness practice the amygdala actually shrinks. In real terms to us this means that it calms down and becomes less over reactive to stress.

The research also showed a fascinating change in the thickness of the pre frontal cortex. Indeed after the 8 weeks of mindfulness practice the area of the brain associated with awareness, concentration and decision making actually thickened.

For years people have been reported an enhanced sense of peace and well being after mindfulness practice, with many chronic pain sufferers also anecdotally reporting a reduction in their experience of pain sensation. This latest research, however, adds tangible evidence to support the benefits of mindfulness practice.

On a personal level I have used mindfulness techniques for the last two years to help manage a chronic pelvic pain condition. I believe it has been fundamental in my treatment and enabling me to live an active, enjoyable and fulfilling life.

I offer individualised mindfulness programs for patients at Bramhall Osteopathic Practice and look forward to meeting you.

Please contact me to discuss how Mindfulness could help you.

Heather Coppard
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Bramhall Osteopathic Practice.

Osteopathic Article

TEXT NECK AND WHAT YOU CAN DO TO PREVENT IT



As we continue to use modern technology more and more an increased number of physical problems linked with the mechanical and postural demands of this are emerging.

This applies to computers and ipads, but especially to mobile phones. Adults and children alike can spend hours with their heads bent forward texting on their handsets.

"Text neck" is a term that has been used to cover the variety of symptoms people can experience through regularly hanging their heads forwards using their mobile. These symptoms can vary from headaches, neck pain, pain across the shoulders and upper back - even extending into the lower back.

The reasons these symptoms appear links with the weight of the head and how this is affected by the position it is in. The average human head weighs 10-12 lbs and when we stand with our head upright, that is the weight our muscles have to support. As the head moves forwards this weight is magnified dramatically -

at	0°	-	10-12 lbs
	15°	-	27 lbs
	30°	-	40 lbs
	45°	-	50 lbs
	80°	-	80 lbs

our muscles start to complain more quickly the further forward the head goes and the harder they have to work.

The easiest way to combat this is to try and have a more upright posture where the ears are aligned with the shoulders - hold the phone up in front of your face. Try and minimise the time spent on your phone.

Combining this with generally looking after your posture with strengthening and stretching exercise always helps keep your posture strong and relieves stress. Gentle osteopathic treatment can also help you get back on track if symptoms have already started.

For any further information don't hesitate to contact us.

Jo Cheaney

Physiotherapy Article

INCONTINENCE AND PELVIC FLOOR PROBLEMS

The new series of Call the Midwife ran a story about Trixie, one of the midwives, who had qualified as a fitness instructor. During one of her exercise classes, one of the older participants, a mother of 7, quickly left the room and sat in the toilet, mortified with embarrassment as she had wet herself. Sadly, even now, 50 years later, many women suffer urinary incontinence and still aren't aware that something can be done about it. It is NOT a normal part of aging and the muscles can become weak for many reasons. In the UK there are 14 million adults with bladder control problems and six and a half million with bowel control problems. In November 2015, NHS England produced a new document 'Excellence in Continence care'. With an aging population, the cost of continence care and associated illnesses and accidents, is soaring. But plans move slowly and currently the investment in continence services is inadequate.

People at risk of incontinence include pregnant women, women who have had children, women going through menopause, women who have a hysterectomy and men who have radical prostatectomy. Men and women following bowel surgery can also experience faecal urgency and a strong pelvic floor will help.

Stress incontinence is leakage with activity. This is the one featured on Call the Midwife. We sometimes hear women saying they 'laughed so much they wet themselves' Or they avoid impact exercise to save embarrassment. This is usually a weakness of the pelvic floor muscles, often following childbirth. It can also be common in people with chronic cough, such as smokers. And people with high BMI – the pelvic floor will struggle to meet the pressure of all that extra weight and force from coughing.

Urgency and frequency often associated with menopause – though not exclusively. This is a sensation of urgent need to get to the toilet. Sometime triggered by hearing running water or putting the key in the door – almost there! Frequency is as it says a frequent need to go to the toilet. Some people find their lives ruled by location of toilets and this limits their activity and can cause social isolation and family tensions. Bowel incontinence and constipation are also problems associated with pelvic floor dysfunction. These muscles can also be high tone and cause frequency, urgency, hesitancy or incomplete emptying and painful urination as the muscles are unable to relax and allow the passage of urine down the urethra (the pipe from the bladder to outside). Tension in these muscles can also cause painful bowel opening and constipation, painful intercourse, general pelvic pain and sometimes low back or abdominal pain. Pelvic floor muscles need to be strong, but also able to relax appropriately.

If any of this is familiar to you, start by making a few lifestyle changes. Stress incontinence and urgency can be helped by avoiding irritants such as caffeine found in tea, coffee, green tea and hot chocolate. Also fizzy drinks and alcohol are bladder irritants. Aiming to drink around 2 litres of 'good' fluids per day is ideal and can help reduce constipation too. As can a diet which includes plenty of fruit and vegetables as

well as soluble and insoluble fibre. Daily pelvic floor exercises, including relaxing the muscles is essential. Building up endurance by squeezing and holding for up to 10 seconds, rest and then repeat up to 10 times. Then 'squeeze and release' up to 10 times.

A full, confidential assessment is available by making an appointment with me.

Dee Woodcock

Acupuncture Article

Acupuncture for Fertility

I am always delighted to have the privilege of working with couples trying to conceive a baby. It is an area that I am passionate about and which forms about 50% of my practice. My own personal experience has helped me in this as I have a beautiful daughter conceived through IVF treatment following years of trying for a baby.

‘Unexplained Infertility’

Couples searching for a reason why they have not been able to conceive are often given the rather frustrating diagnosis of ‘unexplained infertility’. Acupuncture, however, recognises that problems with conception can stem from quite subtle imbalances in both men and women, which do not show up in Western medical tests. Treatment focuses on bringing balance back to the system and promoting the healthy circulation of ‘Qi and Blood’.

Sometimes, both of the couple attend (separate) treatments but often just one attends and this can still be very effective. Men who have been given a less than optimal sperm test result often attend treatment to address any underlying imbalances. For women, we time treatments so we can work closely with your cycle and help regulate any problem areas, for instance a short luteal phase.

I recommend a 3 month course of treatment and pre-conceptual care, so that acupuncture can influence the body during the 3 months that it takes for both egg and sperm to mature. Couples can choose whether they wish to continue trying to conceive in this time or to wait until the end of the 3 month period.

IVF Support

Many patients use acupuncture to help them whilst going through IVF or other assisted reproductive treatments. As well as addressing any underlying imbalances, the acupuncture therapy aims to help the patient to relax and cope with the ups and downs of the treatment. Again, a treatment course of 3 months leading up to the IVF is recommended, so that acupuncture can influence the body during the 3 months that it takes for both egg and sperm to mature. However, acupuncture can still be used to influence your body positively with a shorter course of treatments and is still worth starting shortly before the IVF therapy.

I also recommend a treatment called the Paulus Protocol which is used before and after the embryo transfer. A research study (1) found that the pregnancy rate was 42.5% in the group who had received the Paulus Protocol acupuncture and only 26.3% in the control group

Conditions Affecting Fertility

There are a number of gynaecological conditions that may sometimes affect fertility, including Polycystic Ovary Syndrome and Endometriosis. Where patients have been given a diagnosis of one of these conditions, we will aim to address the underlying imbalances with the acupuncture treatment. I have found acupuncture to be very successful in helping to improve fertility in these situations.

If you would like to find out more, please don't hesitate to call me or ask for a free 15 minute consultation.

Fiona Bullock Lic Ac MBAC. Traditional acupuncture practitioner.

1. **Influence of acupuncture on the pregnancy rate in patients who undergo assisted reproduction therapy.** [Fertil Steril](#).2002 Apr;77(4):721-4. [Paulus WE¹](#), [Zhang M](#), [Strehler E](#), [El-Danasouri I](#), [Sterzik K](#).

Massage Article

Preventative Maintenance Massage

Do you exercise regularly? You may be a runner? Or love tennis?

As the saying goes "prevention is better than cure" and having regular massage is an effective addition to a training schedule and to a programme of well being, but most of us are prone to go, go, go until our body bails and we are forced to pay it some attention. This reactive approach can lead to more serious injury and longer recovery times, with a potential for repeat injuries.

It's important to listen to your body and understand what it is telling you. Knowing what is your 'normal' so that you can tell when things aren't right. Respecting these early markers will be the difference between our strength and performance improving and injury time.

It's important when running and exercising to respect your body, wear the proper gear (footwear - not necessarily expensive) eat well and incorporate a stretching and strengthening regime to help keep our core postural muscles strong and pliable, and to stick to it.

Maintenance massage - is for in between training sessions, working areas of tightness, painful tissues, loosening off the soft tissue structures so to improve performance and prevent injury.

Massage can also be useful for pre events, this type is at a fast, brisk pace, not too deep to get the muscles ready, where as post event massage is a great way to soothe and ease tired, fatigued muscles and prevent (DOMS) soreness, the pace of this massage is slow, rhythmical and more gentle - an excellent way to relax after competing in a 1/2 or full marathon, or like me a 10k.

To make these treatments even more therapeutic, I use essential oils which are anti inflammatory and circulation boosting to improve the outcome. I also blend essential oils with Epsom salts so you can treat yourself at home.

If you would like any more information please feel free to contact me.

Take care and enjoy exercising!

Justine Jackson