



# ACHES and PAINS

If you hear a strange noise in your car's engine you check it. If you notice that the threads on your tyres are bare, you replace it. These problems also happen to our body parts – muscles and joints are used a lot, sometimes stressed too much, that it becomes worn and threadbare. Don't ignore it. Like in your car, find the problem and have it checked. This month, we tackle two common problems: shoulder pains and knee joint problems

## Shouldering the problem

Is shoulder pain keeping you from doing the things you love? If so, you are not alone. Every year millions of sufferers the world over seek medical attention for many common shoulder conditions.

The muscles and joints of the shoulder allow it to move through a remarkable range of motion, making it one of the most mobile joints in the human body. It is thanks to your shoulder joint that you can hit a winning backhand in tennis, stretch to hang curtains or lift heavy items. The shoulder also helps to position your hand correctly so that you can carry out movements such as waving goodbye or operating the mouse on your computer.

Unfortunately, this tremendous range of motion also makes the shoulder extremely unstable and far more prone to injury than other joints. A shoulder injury can involve one or more of the shoulder's complex arrangement of bones, muscles, tendons and ligaments, and the associated pain and lack of mobility can be severe enough to affect your ability to work and to enjoy the normal activities of daily life.

Therese Stjernberg, a sports and musculoskeletal physiotherapist at The Physio Centre in Dubai Healthcare City, says, "Shoulder pain and dysfunction is a common problem amongst people here in the UAE and in the Gulf



region as a whole. Because of the increased amount of sitting we do, both at work and in traffic, we have developed a 'forward' neck and shoulder posture. This means that our shoulders roll forward and we hunch more through our back."

Stjernberg, who recently completed a Masters in Musculoskeletal Physiotherapy continues, "The shoulder is a very complex joint involving the upper arm, collar bone and shoulder blade. It likes to be kept in its natural posture; with the shoulder blade pulled down toward the centre of the back and the shoulder itself positioned centrally in the socket. When we drive or sit at our desks, our shoulders do the opposite of what they naturally like. Too much of this and the shoulder could flare up and become painful."

With her professional focus on the manual treatment of sporting and orthopaedic conditions as well as pain management, Stjernberg stresses that it is important to take good care of the shoulder complex to avoid ongoing discomfort and pain.

"Many different issues can arise in and around the shoulder joint," Stjernberg says, "And diagnosing the cause of shoulder pain involves assessing the posture, degree of movement and strength in the joint, and possibly taking an x-ray and/or ultrasound." Some of the conditions that commonly cause shoulder pain include: muscle strains, tendinopathy, shoulder joint instability, 'frozen' shoulder, dislocation, collar or upper arm bone fractures, and crowding/impingement.

"Shoulder pain should not be disregarded," advises Stjernberg. "Early diagnosis and treatment can prevent further injury and chronic shoulder problems from developing."

"The Physio Centre provides expert physiotherapy services for people at all levels of physical activity," Stjernberg says. "From elite and amateur athletes to office workers. We provide assessment, diagnosis, treatment and rehabilitation, enabling all to return to their desired activity with optimal performance in as short a time as possible."

## Knee problems

Knee joint replacements are called total knee arthroplasty, also referred to as TKA and can be caused by diseases such as chronic osteoarthritis and rheumatoid arthritis. However, it can also be caused by injury or infection. If the necessity is not created by injury or infection, patients usually fall within the age range of 55 to 90 years old, explains visiting knee replacement specialist and orthopaedic surgeon Prof. Dr. C. A. Lil MD, PhD from Munich, Germany. Dr. Lil, who was recently in Dubai to promote Isar Hospital as a specialist centre to visit in Munich, is a professor at the University Heidelberg.

Dr. Lil focuses on minimal invasive joint replacement, especially knee replacement surgery. He shares that patients usually try to push the replacement surgery as far back as possible but patients who get them, also usually report relief from the pain they used to live with. With the modern advances in science, knee replacement is now a non-invasive procedure.

"Before, the only problem was with the anaesthesia used but the modern anaesthesia is mild so we no longer encounter the complications we saw 10 or 20 years ago," he explains. The bigger problem is complications if a patient has other medical conditions. He adds, "Sometimes, elderly patients have problems with their lungs, heart and kidney. This can make surgery or rehabilitation challenging."

Many patients suffer from episodes of pain, swelling, and stiffness in the knee, some have persistent pain and disability that interferes with daily activities and some have extremely limited mobility. Non-surgical interventions, such as medication, physical therapy, and the help of a cane or other walking aid, are sometimes unsuccessful.

To diagnose the specific condition of each patient, Dr. Lil will perform a thorough examination of the knee, analyse x-rays, and conduct physical tests. The decision to have total knee replacement surgery is made very carefully with both the patient and doctor discussing the pros and cons and taking every condition into consideration. The actual surgery takes about one and half hours with a pre-surgery preparation of about three hours, including cardiogram, x-ray of the lungs and other necessary check-ups.

"Depending on how the patient feels, he can go to a normal ward after the operation or stay for one night under intermediate care for supervision. He has to go through therapy, starting a day after surgery. As part of his maintenance, the patient also has to get physiotherapy using a motion device for 3-4 times a day. In Germany, patient must do three weeks rehabilitation in a special rehabilitation clinic and after that, it depends on how much the patient needs, which can be one or two times a week," Dr. Lil explains.

After the whole rehabilitation program, the patient can go back to his normal life. Most report being free of pain that they suffered from before, and even regret not doing it earlier. They even enjoy sports as long as it is not too aggressive and does not put too much pressure on the joints. New technologies have also opened up specially-shaped implants for men and women. Women used to be fitted with joints designed for men but about one and



Dr. Lil

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half years ago, medical suppliers were able to fashion specially-designed female joints which gives patients five more degrees to flex their legs.

"After knee joint implantation, a patient usually gets reduced flexion of the knee joint. They can flex it from 90 to 100 degrees only. But with the new type of joint, they can flex it to about 120-130 degrees. It is better especially for Middle Eastern patients, because they can do their prayers, the 'sojood'," Dr. Lil explains and adds, "It's only a few degrees and a few millimetres but it makes a huge difference. Every little improvement in the biomechanics of the joints help. How much, we don't know yet. But every year, with every improvement, is a big help for patients."

**For more information** on the Physio Centre, please call + 971 4 437 0570, email [info@physiocentre.ae](mailto:info@physiocentre.ae) or visit [www.physiocentre.ae](http://www.physiocentre.ae).

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