

If your posture looks like this..... then you are a candidate for postural rehabilitation therapy.

Fig. 1 Postural examination



Achieving success requires selecting a spinal adjusting procedure which will best assist the patient in regaining both the cervical and lumbopelvic structural function and alignment.

Rehabilitative Exercises

The muscles of the torso and pelvis play an important role in providing support and stability to the lumbar spine. Involving the patient in an appropriate low back and cervical exercise program has been found to be very beneficial. Flexibility and strength exercises can bring about rapid improvements in lumbar and cervical spinal function and decreases in pain levels.



Specific exercises must be developed to eliminate repetitive injury to the intervertebral discs, facet joints, and related structures. Recommending specific exercise(s) is not always clear-cut: some research supports the need for abdominal strengthening, other studies advise pelvic tilts,

and still other reports focus on the importance of strengthening the lumbar extensor muscles.

The needs of patients vary. The exercises that worked for one will not necessarily work for another. However, the first step toward a solution is to use clinical testing and postural evaluation to identify the most appropriate and effective cervical and lumbopelvic exercise routine(s). By evaluating the patient's three-dimensional posture in a reference frame and noting any specific deviations from the ideal, the doctor is able to identify the sources of excessive biomechanical stress and give specific corrective exercise recommendations. A general conditioning and flexibility program will complement the specific corrective postural exercises.



External Supports

The use of external supports to reduce excessive biomechanical forces on the cervical and lumbar spine is a significant treatment approach, it is one which is frequently overlooked by practitioners. Postural supports for sitting (postural back rests or ischial lifts for chairs and car seats), standing (such as custom foot orthotics and heel lifts) and sleeping (mattresses and pillows) can greatly assist in the management of lumbar spine conditions.

During standing and walking (not to mention running in athletes), the cervical, lumbar spine and pelvis balance on the lower extremities. If leg or foot asymmetries or alignment problems are present, abnormal forces are transmitted along the closed kinetic chain, interfering with spinal function. These forces can be decreased significantly with the use of custom-made, corrective orthotics. In patients with degenerative changes in the [lumbar discs](#) and facets, the external force of heel strike may aggravate and perpetuate cervical and [low back pain](#). This force can be easily reduced with the use of shock-absorbing shoe inserts or orthotics which contain viscoelastic compounds. An anatomical difference in leg length produces abnormal structural strains on the pelvis and low back. Such strains can cause not only chronic pain in the neck, hips and low back, but have also been shown to result in specific degenerative changes. The use of an orthotic and/or heel lift has been shown to reduce these structural strains and bring about significant clinical response.

Sleep postures can also have a detrimental effect on the structural stability of the cervical and lumbar spine. While most experts recommend a firm mattress, studies also suggest the use of a "sleeping roll" to maintain proper lumbar positioning during sleep.



Come check us out and see if we can help aide in your postural deviations.....

