

OSTEOARTHRITIS

The hip joint is another prime candidate for developing osteoarthritis! One sign of osteoarthritis in the hip joint is a deep pain in the front of the groin/hip crease. The bone spurs that can develop over time can cause damage to the surrounding tissue. Movement and hip circles are great for preventing osteoarthritis, and CAN be good for improving osteoarthritis in the hip - with careful, SLOW movements in a comfortable ROM that will hopefully increase over time.

Arthritis is painful, and the inclination is not to move. However, it is so important to keep moving! Otherwise the mobility continues to decrease and the condition will worsen. Help people find the balance - and micro movements can work wonders!!

The other thing to remember is that osteoarthritis can IMPROVE! Over time, with patience and prana, the body can reabsorb some of the bony deposit of osteoarthritis.

HIP REPLACEMENT SURGERY

Two approaches - Posterior/Lateral and Anterior

Posterior/Lateral has traditionally been the most common, but is also the most unstable.

Anterior approaches are done more often on younger, more active people and athletes.

Recovery for healing avascular tissue (ie. ligaments) is one year. The scar tissue that forms around the joint helps bind the hip back together.

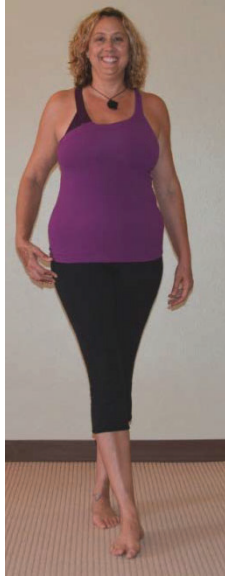
In the posterior/lateral approach, the hip is dislocated and the ligaments are cut.

PRECAUTIONS/CONTRAINDICATIONS FOR POSTERIOR/LATERAL APPROACH

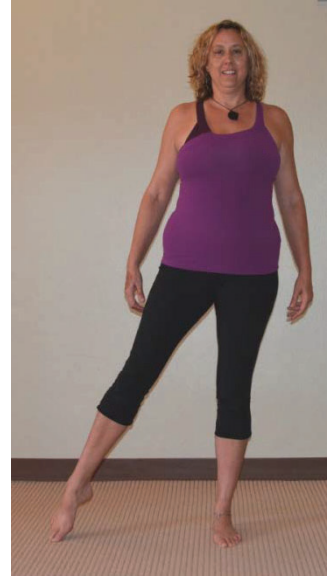
- Can't bend hip (flexion) past 70-90 degrees - even when sitting in a chair. You can dislocate the hip! For at least 3 months, sometimes forever.
- No hip adduction - taking the leg across the midline of the body. For at least 3 months, sometimes forever.
- If feeling funny deep in the joint - STOP.
- Supine twisting - ONLY with support between the knees and NOT past 90 degree hip flexion.
- No internal rotation from neutral.

PRECAUTIONS/CONTRAINDICATIONS FOR ANTERIOR APPROACH HIP REPLACEMENT

- Precautions are opposite of the posterior/lateral approach.
- No extension of the hip joint, no abduction (moving leg away from the midline) and no external rotation - any combo of these can cause dislocation - one at a time is okay.
- In regards to hip replacements, if you know the approach that was used physics will help you remember the precautions - for example, if the back of the hip was cut and someone pulls the knee to the chest, there will be pressure sent to the back of the hip risking dislocation.
- Always encourage your students to listen to their bodies first and foremost - and if anything doesn't feel right, don't do it! Back out immediately and rest.



Hip ADduction past Midline



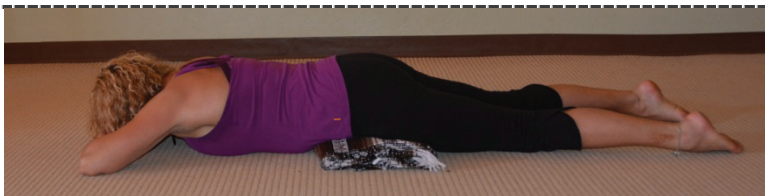
Hip ABduction

MODIFIED TWIST – POST HIP REPLACEMENT



In this twist (which can be done in bed if they can't get on the floor) we are limiting the rotation of the spine by placing the bolster under the bottom knee and keeping the legs symmetrical. ABduction of the top hip is blocked by placing the blanket between the knees to keep the thighs hip width apart. And notice that the hips are not past ninety degree flexion.

SUPPORTED CROCODILE



If the person can lie on their stomach, this exercise is good for relaxation and calming the nervous system - an important aspect of healing! Instruct them to imagine they are inhaling directly into their hips - as if that is where their lungs are - directing prana and healing to that area. NOTE: The blanket may need to be even higher to limit hip extension, make sure they are comfortable. This is for a posterior/lateral approach, not anterior.

LEGS ON CHAIR



This is a great pose for increasing circulation to the hips and pelvic region. Notice the set up - the hips are further back from the support so they are at less than ninety degree flexion. This is a wonderful 'assignment' to give them for home and is a lot more comfy with a couch! It has many powerful benefits, can you tell it is one of my favorites?!

JUSTINE'S FAVORITE HEALING TIPS AND TRICKS

- Soft tissue damage dehydrates the body, make sure you encourage drinking plenty of water.
- Turmeric is wonderful for increasing circulation and is also anti-inflammatory—it would take two different drugs to get the same effect! I recommend taking it in capsule form to get a therapeutic amount (300-600 mg/day) It has many other benefits as well. CAUTION: Make sure to ask if they are on prescription blood thinners, if so turmeric is a NO GO. If they are not sure, ALWAYS have them check with their doctor. I find it to be very benign, minus the blood thinner issue, however, it is always smart to defer to their doctor.
- Tendons and ligaments are hard to get nutrition to. I urge people to put organic oil on after their shower (sesame in winter, coconut in summer, olive oil year round), rubbing lengthwise on the long bones, and rubbing it in a clockwise motion on their joints. This can really help speed up healing in things like tendonitis, hamstring origin pain, etc.
- Avoid coffee if they are having a lot of joint pain, it is acidic and also dehydrating. I know people who have reduced their pain by cutting coffee out.