Traumas, antalgic attitudes and postural alterations

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Everyone has suffered in his/her life at least one physical or emotional trauma. After the moment in which the trauma occurs and once the pain is over, nobody cares about something that is easy to forget. However, in the same way people forget, the body "remembers", i.e. records all of what happens to it, especially episodes related to pain. The body defends itself from the pain by using the endorphins mechanism and antalgic attitudes.

Although what it is being said is not new, only recently have these mechanisms been studied and taken into proper consideration. In order not to suffer, the body actuates "antalgic attitudes", i.e. ways of walking, moving, breathing, relating; a real organized system to survive with the minimum possible pain. To survive at its best, the body tries in fact to eliminate the current pain! It does not care if, keeping an antalgic attitude for a long time (for instance, a person limping for many days due to a bruise in the gastrocnemius muscle), knee, ankle and hip will tend to assume wrong attitudes permanently. This antalgic fixation is brought about by some mechanisms: the first one is related to muscular answer as a reaction to the trauma. The "offended fibers" will in fact remain basically tense for a mechanism of instinctive-animal defense (no matter if the action done by these fibers is of only few grams). The permanence in this condition over the time will determine a "fixity" (for a law of body economy) that will involve the whole muscle. The connective tissue will therefore tend to fix the "new" length of the muscle. People's attitude can reinforce such mechanism as well, since people, in order not to feel pain, will maintain a "protective" attitude towards the painful area, avoiding for instance to lean the foot entirely and properly to the ground. This antalgic mechanism will quickly involve the whole structure. Apart from creating altered postures, in fact, constant compression will be generated inside the joints themselves, due to the remaining tensions that evolve into real muscular retractions.

Of course, physical traumas are not the only element that can alter posture compromising our health. Any unpleasant emotional event will have an effect on the whole vegetative nervous and muscular system. Stress, which is often underestimated, acts first of all on the whole hormonal system, on all muscles by keeping them constantly tense – breathing muscles included – determining a typical

attitude of closure and fear with stiff and curved shoulders, stiff and painful neck, etc. If such condition lasts for enough time, it will tend to persist and become fixed!

Let's now resume the mechanism of postural alteration and the antalgic mechanism.

Every time we suffer from a trauma, there is an involuntary muscular response. Part of the involved fibers remains in a permanent state of defense. Such mechanism determines the fixation of this altered position, i.e. the "muscular retraction", involving the remaining fibers as well. A retracted muscle, having an altered length, will inevitably cause articular "compressions". A compressed joint will bring about lesions at the expense of the articular capsule and cartilage usury; the consequence is a premature ageing, inflammation, pain, arthrosis. As a result, the whole structure will become unbalanced. When a joint becomes painful, the body reacts trying not to use it as it should. Once again, therefore, a mechanism of defense is created in order to avoid pain.

Moreover, when a part of the body does not work properly, other functioning parts intervene to substitute that part in its work. However, such mechanism cannot last forever.

A REAL CASE

Giuseppe is a 17-year-old guy who plays rugby on a competitive level. He comes to our studio because of a spread pain in his hip and in the right hemipelvis. He has already made some attempts with anti-inflammatory drugs and physiotherapy sessions without any result. He says he has never suffered from any trauma in the painful area and he does not remember any significant trauma in general. We start a session involving all the posterior muscles of legs, thighs, back and neck, i.e. the muscles of the posterior muscular chain¹. The aim of the used method, Raggi Method®, is to prevent the muscles that are being stretched from creating compensations².

While Giuseppe is doing the exercise, he realizes that his blood does not flow properly in his right foot, as a matter of fact that foot is more compressed and white than the other one. Then, suddenly, he remembers a distortion he had in his right ankle playing rugby about two years before. He remember he suffered both when the trauma happened and later, in fact he could not play for about a month.

After that, he started to play again, even if he was still limping. A rugby player, though, cannot pay attention to these things. During the same session, Giuseppe tells me that about a year after the problem in the ankle, he started to feel pain in his right knee and some months later the pain reached the whole right hemipelvis, where he is feeling pain now.

Carefully examining his right ankle, we notice that it has less mobility than the other one; as a matter of fact, the closure of the tibio-tarsal angle is 2-3° closer than the other one. Although 2-3° may not seem

¹ A muscular chain is the interaction of different muscles with one another even if they are not anatomically linked;

² Compensation is a system actuated by the muscles in order to escape from the stretching tension they are subjected to.

important, try to imagine how many thousands of steps can be made in a day. An ankle that cannot

carry out its task in tibio-tarsal closure will involve with its low functionality also knee and hip of the

same side. The session is oriented towards the recovery of the ankle mobility, keeping the body in a

correct postural layout in order not to allow compensations and to restore the postural alterations the

pain had fixed in Giuseppe's posture. Although two years have passed since the trauma in the ankle, it

recovers its functionality brilliantly. Just two sessions are enough to fix the pain in his right ankle

completely, by using the Raggi Method®, i.e. the global non-compensated muscular stretching.

To summarize what has been said so far, it is possible to say that where there is a muscular-articular

pain (effect point) which has not been caused by a direct trauma or having a bacterial origin, there is no

cause. The cause has to be searched through a careful postural examination and global non-

compensated muscular stretching.

For more information on the Raggi Method®- Pancafit® please address to

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