

Therapy and Prophylaxis of the So -Called Idiopathic Scoliosis. Old and New Exercises. Results. Examples

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Abstract

Till 1995 the aetiology of idiopathic scoliosis was not found and treatment by extension exercises was the most common method of therapy. The observation about scoliosis are finished in 2007 – T. Karski. On basis of our observations (1985 – 2014) we can underline that all extension exercises, other name - strengthening exercises, were and still are - wrong and harmful. All patients coming to our Department after such previous therapy suffered from huge deformities, bigger humps and stiffness of the spine. To explain these undesirable results of the treatment the term "the natural history of scoliosis" was coined. We studied that all strengthened exercises other name extensions exercises, in prone position exercises, "muscle corset" making exercises, were only bad, making huge iatrogenic deformity of spine and trunk.

Index terms— so-called idiopathic scoliosis, treatment, old and new exercises.

1 Introduction a) Exercises in scoliosis in past time

ill 1995 the aetiology of idiopathic scoliosis was not found and treatment by extension exercises was the most common method of therapy. The observation about scoliosis are finished in 2007 -T. Karski. On basis of our observations ??1985 -2014) we can underline that all extension exercises, other name -strengthening exercises, were and still are wrong and harmful. All patients coming to our Department after such previous therapy suffered from huge deformities, bigger humps and stiffness of the spine. To explain these undesirable results of the treatment the term "the natural history of scoliosis" was coined. We studied that all strengthened exercises other name extensions exercises, in prone position exercises, "muscle corset" making exercises, were only bad, making huge iatrogenic deformity of spine and trunk.

2 b) New tests for scoliosis as the condition of proper diagnosis

The test for scoliosis are presented in other article. Here we would like to repeat some importance information.

3 c) Old and new rehabilitations exercises -general information

Firstly, it must be stated that all extension exercises, all so -called strengthening exercises were Author ? : MD PhD -Paediatric Orthopaedic and Rehabilitation Department of Medical University in Lublin. e-mail: jkarski@vp.pl Author ? : Professor Emeritus in Medical University, Active as Professor Lecturer in Vincent Pol University in Lublin, Poland. e-mail: tmkarski@gmail.com and are wrong and harmful (Fig. 1, 2). All patients after such therapy were only with fix and big deformity (Fig. 3, 4, 5).

The proper solution of the spinal problem, in our opinion, is an early prophylactics based on the biomechanical etiology of scoliosis. The therapy must be based on the new exercises which are beneficial for the treatment but especially for prophylaxis of scoliosis. They include all exercises removing contracture in the region of hips, of pelvis and in the whole spine such as flexion -rotation exercises practiced as early in life as the age of 3 or 4

Fig. 6, ??, ??, ??, ??0). Very important aim of the therapy is to restore the full and symmetrical movement of both hips in very early period of life of children to prevent the start and progress of scoliosis.

4 d) General outline for the new rehabilitation exercises

The proper solution for the spinal problem is an early prophylactics based on the biomechanical aetiology of scoliosis. New exercises are beneficial both for the treatment and the prophylaxis of spine deformity. They include all exercises removing contractures in the region of the hips, of the pelvis and in the spine such as flexion-rotation exercises practiced as early in life as 3 or 4. All relaxation exercises which remove abduction, external rotation and flexion contracture of the right hip, as well as all exercises removing contracture on the concave side of curves are very useful. Additionally, it is important to stand 'at ease' on the left leg instead of the right, next to relax and sleep in foetal position and to practice sport, especially involving stretching for example karate, taekwondo, aikido, yoga and other.

The results of the new therapy (Fig. 11, 12, 13, 14) The results statistically were presented on the material from years 1985 -2005 (published g) The results in II epg group of scoliosis

We present the results in II/A epg "C" scoliosis one curve deformity and in II/B epg "S" scoliosis, with thoracic curve secondary. In this group of scoliosis the spine is flexible. a) In 39% of children, there were normal axis. In this group were children with 1st and 2nd stage of curvature according Cobb. These children primary were not treated by incorrect, wrong exercises outside of our Department. b) In 32% of children we see decreasing of curves. In this group were children with 1st and with 2nd stage of curvature according Cobb. These children primary were not treated by incorrect, wrong exercises outside of our Department. c) In 26% of children we noticed stop with progression.

In this group were children with 1st and with 2nd stage of curvature according Cobb. These children primary were treated by incorrect, wrong exercises outside our Department, some month. d) In 3% of children there were progression. These children primary were treated by incorrect, wrong exercises outside our Department, some years.

II.

5 Conclusions

1. The old, previous extensions or strengthened exercise in treatment of scoliosis were not proper, they lead to bigger deformity, to bigger the rip gibbous, to more rigid spine. 2. The term "the natural history of scoliosis" to explain the bad results of therapy of scoliosis, really were the result of improper treatment and they present the iatrogenic deformity.

3. The stretching exercises leading to full and symmetrical movement of hips and of spine are only one proper method of therapy of the so-called idiopathic scoliosis. 4. Children endangered with scoliosis should stand more or only on left leg. 5. The standing 'at ease' on the left leg and all sport arts from far Asia (from Japan, Korea, China, India) are very useful for therapy and for prophylaxis of spine deformity.

6 III. Acknowledgement

We would like to express ours many thanks to Katarzyna Karska MA for her help to correct the text.



Figure 1:



Figure 2: FiguresFigure

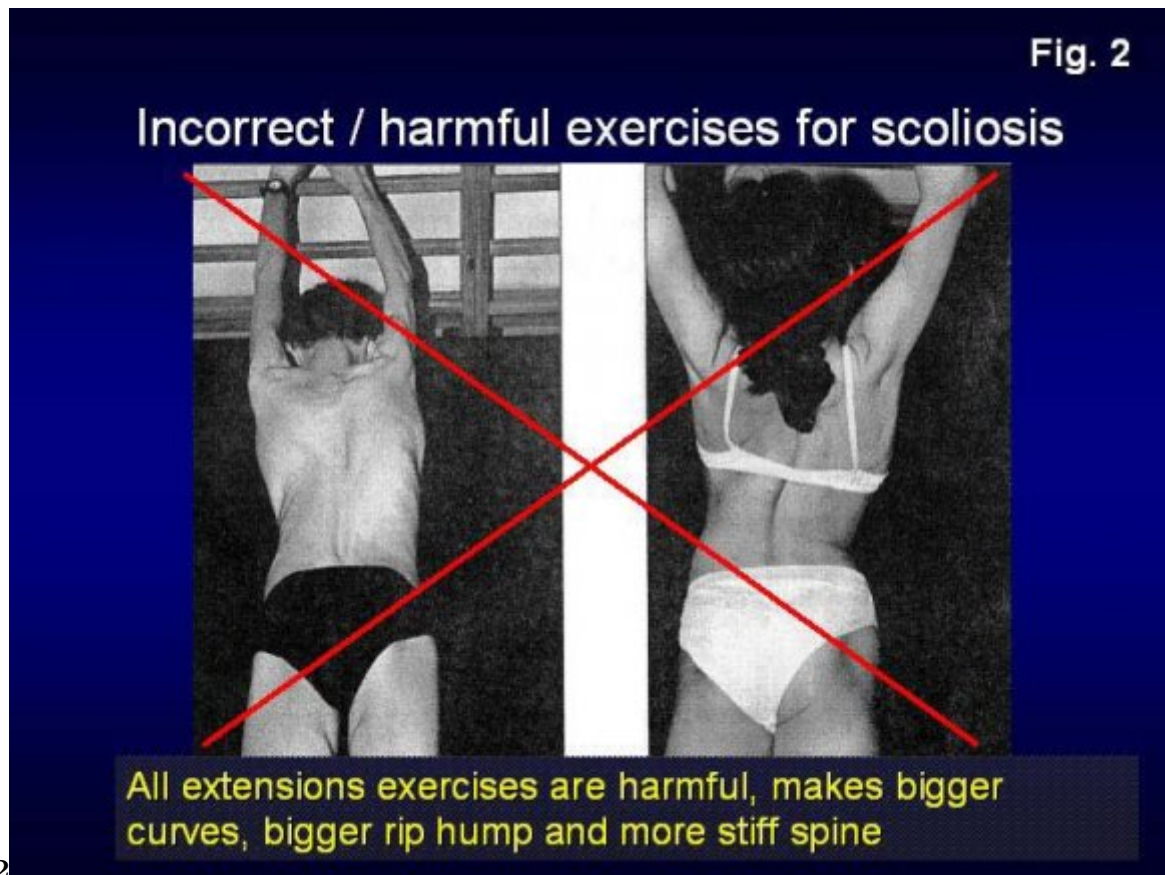


Figure 3: Figure 2 :



3

Figure 4: Figure 3 :



Figure 5: Figure 6 :



Figure 6: Figure 7 :

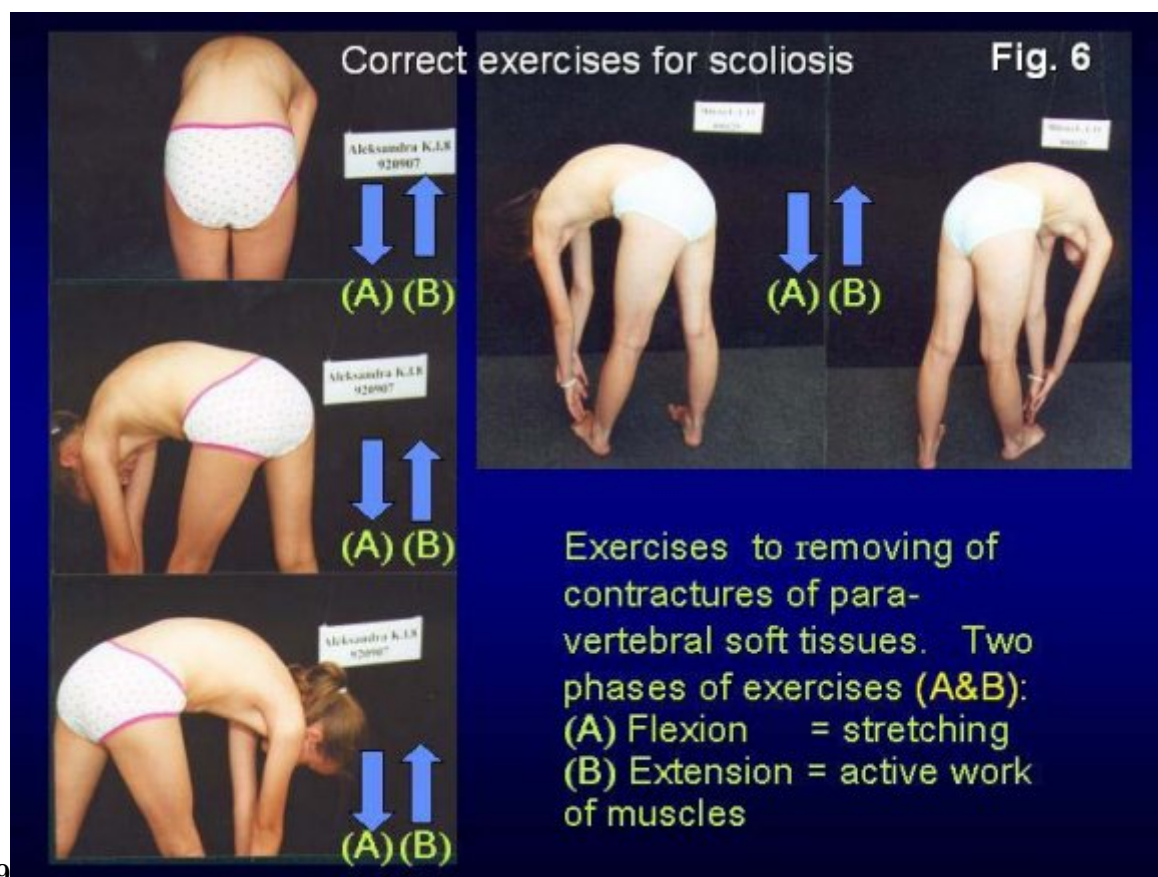


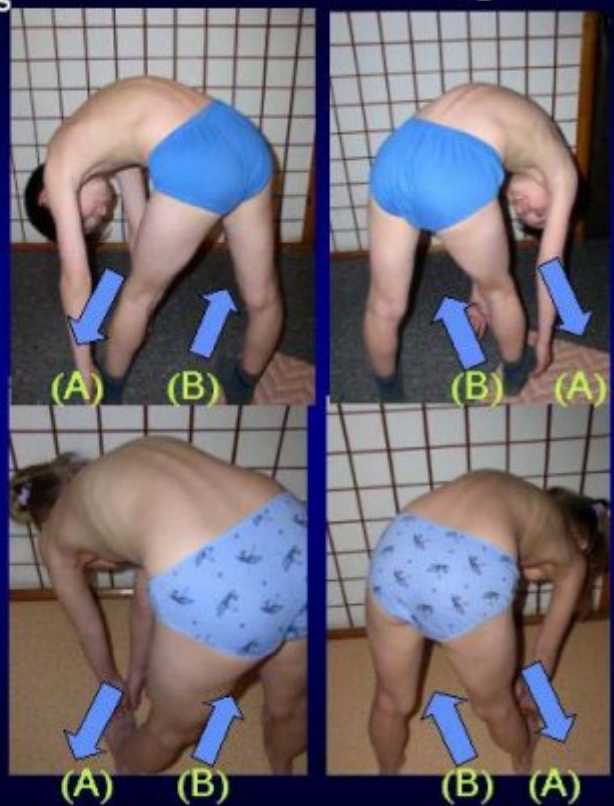
Figure 7: Figure 9 :

Correct exercises for scoliosis

Removing of contractures
of para-vertebral soft
tissues.

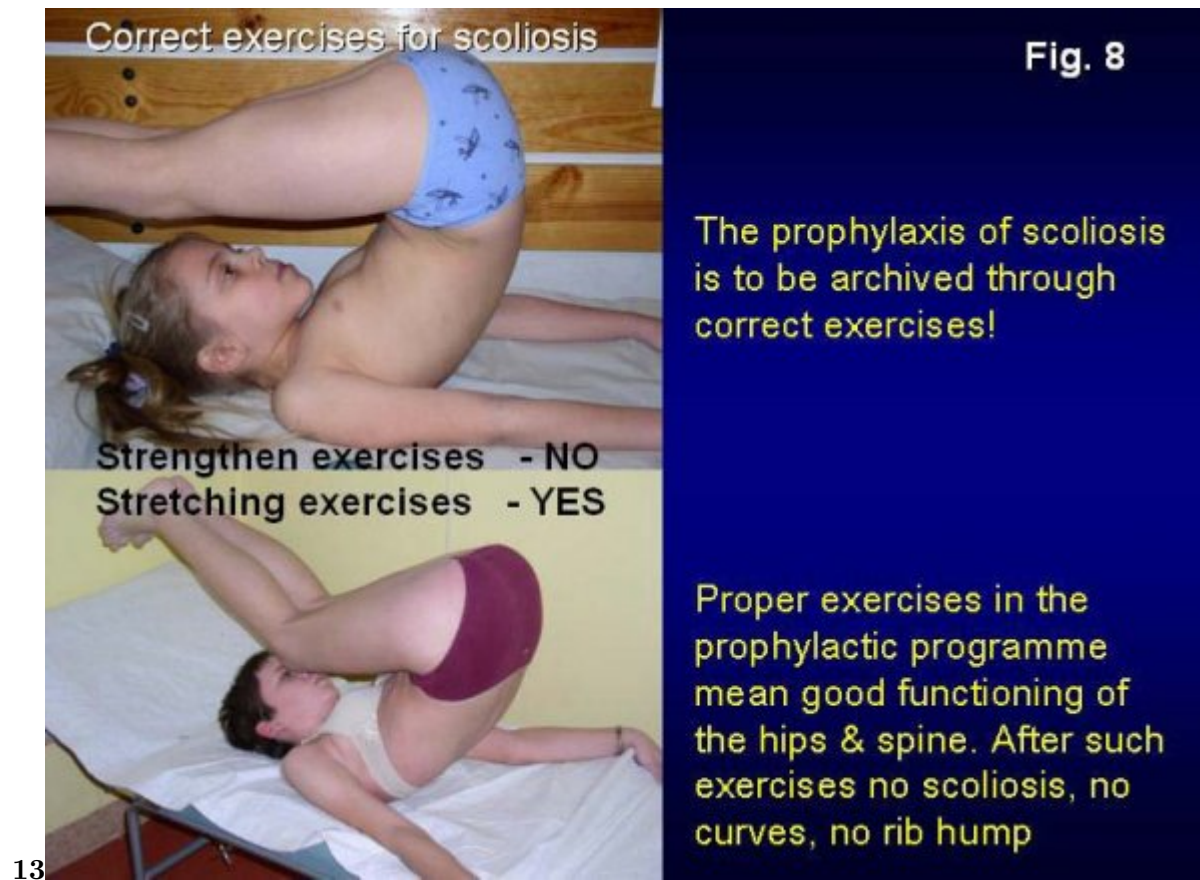
Two phases of exercises
(A&B):
(A) Flexion = stretching
(B) Extension = active
exercises of muscles

Fig. 7



11

Figure 8: Figure 11 :



13

Figure 9: Figure 13 :

Correct position & exercises for spine!
Stretching through flexion

Fig. 9



14

Figure 10: Figure 14 :

Figure 11:

