

the NEXT STEP

Fall/Winter 2019 Newsletter

We are excited to welcome Sarah Niederbuhl, PT, DPT, OCS to Excel. She grew up in the Adirondack region of upstate New York. She graduated from Pacific University in Oregon with a major in psychology and minor in neuroscience. Then went on to pursue a Doctor of Physical Therapy Degree from the University of Utah and has now been a PT for 4 years. She is also an Orthopedic Clinical Specialist (OCS) and has a long history in massage therapy. Sarah's areas of expertise include:

- Jaw pain (TMJD) and headaches
- Benign Paroxysmal Positional Vertigo (BPPV)
- Post-surgical rehabilitation
- Rib cage dysfunction
- Running and gait analysis
- Manual Therapy: Soft tissue and joint mobilizations
- Post concussive rehabilitation, baseline testing, and screening



Sarah's passion for working with people started as a massage therapist and a ski instructor prior to moving out west—she has now lived in Victor, Idaho for 3 years and will be spending her 5th winter in the Jackson area this year.

Both as a massage therapist and ski instructor, she enjoyed the unique challenges each person presented with and helping them achieve something greater—whether that is a pain-free day at work or successfully skiing a black diamond for the first time.

Physical therapy, in the same realm, is geared toward personal goals and achievement—a process that she is excited to share with each of our patients.

Sarah's physical therapy thought: *"Happiness is the highest form of health" – the Dalai Lama. There is simply no separation between the body and mind, as if one begins where the other ends; each has a profound impact on the other.*



We continue to strive to do what's best for our patients and community. Thank you for your continued support.

Maria Lofgren, PT, Francine Bartlett, PT, DPT, ATC & Erin Downey PT, DPT, CAFS, CIDN, CCRT Owners Excel Physical Therapy

Blood Flow Restriction Training (BFRT)

BFRT is a training strategy involving the use of cuffs placed around a limb or limbs during exercise. The applied pressure is sufficient to maintain arterial inflow to the extremities, while preventing venous return. This recreates a hypoxic environment in the muscles, which simulates the response muscles experience from high intensity exercise. The goal of BFRT is to enable patients to make greater strength gains while lifting lighter loads, thereby reducing the overall stress placed on the joints. This makes BFRT perfect for patients who are post-operative, or have chronic pain or other conditions where high load, high intensity exercises are not clinically appropriate. Therefore, BFRT can be used with light resistance training, or other activities, including walking with the same gain in muscular power and endurance as more high intensity exercises. Other benefits include; muscle hypertrophy, cardiovascular fitness, hormonal optimization, coordination, and even improvement in bone density over time. Here at Excel PT we use BFRT to give our patients the maximum benefit of early strength training and improvement in athletic performance to help meet their rehab goals.



Are you moving enough?

Review by the American Physical Therapy Association of the Physical Activity Guidelines set by the US Department of Health and Human Services

“Adults should move more and sit less throughout the day—some physical activity is better than none.” A recent review of the physical activity (PA) guidelines set by HHS, found that 80% of all Americans are not meeting current physical activity recommendations—a failure that is contributing to the prevalence of a host of chronic health conditions.

"These revised guidelines create a clear roadmap for where we need to be as a nation, and the physical therapy profession is here to help people get the movement they need to optimize their health," said American Physical Therapy Association (APTA) President Sharon L. Dunn, PT, PhD

Here are the current recommendations:

Preschool-aged children (3 to 5 years): HHS recommends that this age group "should be physically active throughout the day" and that caregivers "should encourage active play that includes a variety of activity types."

Children and adolescents (6 to 17 years): The guidelines recommend 60 minutes or more per day of moderate-to-vigorous PA; with at least 3 days of vigorous-intensity PA per week, at least 3 days of muscle-strengthening PA per week, and at least 3 days of bone-strengthening PA per week.

Adults: 150 minutes per week of moderate-intensity PA, or 75 or more minutes per week of high-intensity PA is recommended for adults; at least 2 or more days per week should include muscle-strengthening activities.

Older adults: If possible, 150 minutes per week of moderate-intensity PA, tempered by an individual's "level of [PA] relative to their fitness," and a clear understanding of how various chronic conditions can affect the ability to reach PA goals. No matter what PA activities should include balance training, aerobic, and muscle-strengthening activities.

Women who are pregnant and postpartum: The guidelines recommend at least 150 minutes of moderate-intensity PA per week, spread throughout the week, during both pregnancy and postpartum. The guidelines also advise that women "who are habitually engaged in vigorous-intensity aerobic activity or who were physically active before pregnancy can continue these activities during pregnancy and the postpartum period."

Adults with chronic health conditions and/or disabilities: These adults should follow the same targets as non-symptomatic adults, but with a recommendation that should a chronic condition or disability interfere with their ability to meet these guidelines, PA should occur to whatever extent possible; individuals should avoid inactivity. The guidelines also recommend that people with chronic conditions "consult with a health care professional or [PA] specialist about the types and amounts of activity appropriate for their abilities and chronic conditions."



SOME OF OUR TEAM IN ACTION

Reference:

<http://www.apta.org/PTinMotion/News/2018/11/13/HHSPAGuidelinesRevision/>

Got Dizziness or Vertigo?



- Vestibular rehabilitation is an exercise-based program, designed by a specialty-trained vestibular physical therapist, to improve balance and reduce problems related to dizziness and vertigo. Dizziness can be described as; feelings of unsteadiness, swaying, tilting, lightheadedness, feelings of passing out, and spinning and/or whirling (also known as vertigo). These feelings or sensations can occur when you are standing still, lying down or changing positions. The symptoms can be constant or episodic in nature, only lasting seconds, minutes or hours.
- Patients typically referred for vestibular rehabilitation therapy are those diagnosed with dizziness, imbalance, vertigo, Meniere’s syndrome, benign paroxysmal positional vertigo (BPPV), neck-related dizziness and migraines. Other candidates are patients who have had a stroke or brain injury or who frequently fall.
- Here at Excel, we have 2 physical therapists that specialize in vestibular rehabilitation, Gillian Berrian, PT, DPT and Sarah Neiderbuhl, PT, DPT, OCS. At your appointment, they will evaluate your symptoms and review your medical history. Your assessment will include all or part of the following areas: balance and/or leg strength/flexibility, gait (how you walk), visual stability and mobility, neck mobility and neck and arm strength, and positional testing.
- Based on the findings, a personalized plan of care will be developed. The goal of your treatment plan will be to improve any deficits that were identified. Which, in turn, will improve your ability to function in activities of everyday living, reduce your risk for falling and ultimately, improve your quality of life.
- If you suffer from dizziness or vertigo, please call to schedule—we can help!