



## Resolution is Possible



Listening, observing, and palpating tell us where to go and what to do, far more than MRI or X-ray. Experience and training guide us in knowing what interventions will likely work best for each individual. These may include:

- ♦ **Fascial Manipulation® - Stecco®:**  
Targeted soft tissue techniques aimed at restoring pain-free mobility to tissue layers.
- ♦ **Dry Needling:** For resolution of fascial densifications, fibrosis and myofascial trigger points that cause pain and limit motion.
- ♦ **Movement Re-education:** Using verbal and tactile cuing to retrain the trunk and extremities in normal movement patterns.
- ♦ **Individualized Exercise:** Not an impossible long list to do for the rest of your life, but a few key exercises to sustain gains.
- ♦ **Education:** Learning how to get and stay out of pain and dysfunction.

## Explore Your Options.

Learn more about the non-surgical and non-pharmacological options we offer:

- ♦ **Call** and speak with one of our therapists.
- ♦ **Go to our website**—it's loaded with information!
- ♦ **Visit** one of our offices and pick up an informational brochure.
- ♦ **Schedule a screening**—15 minute consultation with a therapist, free of charge.
- ♦ **Schedule an evaluation** - for the first time, or if it's been a long time. We are constantly learning new approaches to better serve you.



*In many cases a referral is not necessary, and insurance may cover.*

*Se habla español*

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**Appalachian Physical Therapy**  
*"Always Getting Better"*

## Knee Pain



## Exploring Options

### Broadway

171 East Springbrook Rd.  
Broadway, VA 22815  
540-901-9501

### Harrisonburg

2035 East Market St., Suite 45  
Harrisonburg, VA 22801  
540-209-8977

### Strasburg

105 Stony Pointe Way, STE 211  
Strasburg, VA 22657  
540-252-3892

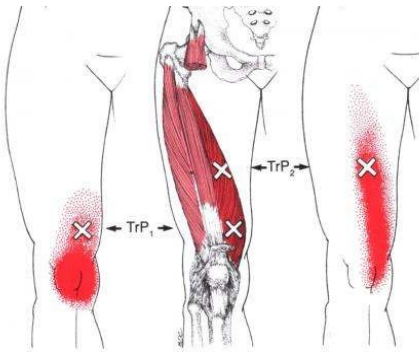
### Pinehurst

211-L Central Park Ave.  
Pinehurst, NC 28374  
910-215-0541

[www.aptfc.com](http://www.aptfc.com)

## Truth is...

- One-third of all Americans report experiencing knee pain at some time or another.
- With the current trend over 78 million people will be diagnosed with arthritis by the year 2040.
- More than 600,000 knee replacements are performed each year in the United States.



## You're Not Alone...

Seems like everyone—regardless of age—can tell a story of their knee pain: athletes, executives, young, old, heavy, thin, male, female, truck drivers, farmers, and secretaries. Interventions and “cures” abound with braces, magnets, medications, ointments, taping, exercises, injections, and surgeries. Yet in spite of all these options, an alarming number of people do not find lasting relief, and many worsen in spite of them. While all these may temporarily alter symptoms, they share one characteristic: none of them really serve to address the root cause.

## What is the Root Cause of Knee Pain?

Arthritic joints and osteoarthritis (OA) are often blamed for causing knee pain. However, it's good to note that a diagnosis of OA is typically based on symptoms, age, and imaging such as X-ray or MRI. Yet multiple research reports conclude that imaging is not a reliable tool for determining the cause of the problem or the best approach in management. Some studies show that awareness of such joint problems can actually adversely affect the course of care—cause a patient to pursue options that they would not have if they did not know about the findings on imaging. After all:

- Studies show that many people who have positive findings on imaging do not have knee pain.
- Other times imaging is negative yet the pain is very real. Or the imaging indicates one side is a problem, yet the other side hurts.

***“..imaging is not a reliable tool for determining the cause of the problem or the best approach in management.”***

Research does support the high incidence of soft tissue involvement in knee pain, which does not even appear on X-ray. While MRI does display soft tissues, it does not reveal anything about movement of those tissues. After all, you have to lie still for an MRI. Yet altered mobility is a **huge** factor in knee pain. Abnormal movement is what causes joints and meniscus to wear out! Research also supports a multimodal approach including resolution of movement dysfunctions, non-surgical and non-pharmacological pain reduction measures, education, exercise, and lifestyle changes. This completely lines up with our experience and our approach.

## Resolving knee pain begins with an intense evaluation that includes:

- ♦ **HISTORY**: Past episodes of knee symptoms; Old problems in other areas (ankle sprains, etc.) that can be influencing the current problem; Surgeries; Fractures; Internal dysfunction (constipation, urinary incontinence, IBS, etc.) all play into the current knee issue.
- ♦ **INSPECTION**: Bunions, hammer toes, flat or high-arched feet; Enlarged knee joints; Shifts or rotations in the trunk; *These all tell a story of a body that is being pulled into dysfunction.*
- ♦ **MOVEMENT ASSESSMENT**: Gait abnormalities; Tri-planar trunk movement forward, backward, sideways, and rotating; Extremity mobility (squat, hip rotation, arm reaching, etc.); Strength and endurance testing. *Quantity of movement (too little, too much); Quality of movement (speed, ease, compensations, crepi-tus, pain); These simple tests reveal much about the status of the myofascial, nervous, and skeletal systems.*
- ♦ **PALPATION**: Tissues tell a story and guide treatment. A skilled pair of hands can identify dysfunction in the muscles, fascia, tendons, bursa, ligaments, and joints.

