

## The Big Four Polio Painful Body Parts

**Polio Shoulder** Because polio survivors usually have more leg than arm muscle weakness, they use their relatively stronger uppers to compensate for weaker lowers. So, when getting up out of a chair, climbing out of the bath or walking using crutches, the arms take the freight. The joint that complains most is usually the shoulder, the pain typically caused by bursitis or tendonitis. Sometimes, shoulder pain and an inability to lift your arm directly upward in front of you may be signs of a rotator cuff tear that could require physical therapy or, possibly surgery.

**Polio Neck** Polio shoulder can also be a part of polio neck, when the muscles that move the head and those that “shrug” the shoulders upward, go into spasm due to overuse, weakness and poor posture. Polio neck is also the number one cause of headaches in polio survivors.

**Polio Wrist** Polio wrist is usually caused by carpal tunnel syndrome, the squishing of the nerves that pass across the wrist. Polio survivors have much more carpal tunnel syndrome than the general population because pain in the wrists develops in the same way as polio shoulder – from overuse of joints – and in the case of wrists, with repeated hyper-extension (bending backward) as you push yourself upward from sitting to standing or walk using crutches.

**Polio Hip** Pain in the hips also is often the result of bursitis or tendonitis caused by weak hip muscles trying to keep you from wobbling back and forth. Polio survivors, and many doctors, immediately assume that all hip pain is due to arthritis. Polio survivors can have arthritis, but hip pain is almost never caused by arthritis. Again, it is irritated tendons and ligaments that are making you hurt. What's more, what you call hip pain may actually be caused by low back or butt muscles going into spasm as they try to compensate for weak leg muscles.

**What to do about the big four?** Since pain is triggered by overuse, you need to take the load off of angry joints, their weakened muscles and nerves and their abused ligaments and tendons. Raising the height of chairs, using a toilet booster seat with handles grips or a frame to help you stand and using a wide tub bench instead of standing in the shower or hauling yourself in and out of the tub will take the load off your upper body.

Once you are up, using light-weight Loftstrand (cuff) crutches is better than using nothing or even a cane. If you have “polio wrists”, crutches that have foam-covered handles or hand grips shaped to evenly distribute weight across your palms could be a big help. (see [www.walkeasy.com](http://www.walkeasy.com)). Crutches are also helpful for polio hip since they balance you from front to back and side to side, taking the load off of strained tendons and ligaments and weak hip, back and butt muscles. Of course, rolling in a power wheelchair or scooter is better than walking to ease all post-polio pain.

If taking the load off isn't helping enough, bursitis, tendonitis and muscle spasm can be treated by a physical or occupational therapist with ultrasound, heat, ice, deep muscle

massage, biofeedback or training for proper posture or gait. Your doctor may want to try a non-steroidal anti-inflammatory drug like ibuprofen or Celebrex. However, oral steroids should almost never be used to treat bursitis and tendonitis since their side effects are very unhelpful for most polio survivors. However, a few injections of cortisone and a local anesthetic into a joint or a muscle, followed by the above therapies can knock down inflammation and prevent spasm. Local injections of cortisone in the wrist can also help rescue inflammation and swelling in those with carpal tunnel syndrome.

**\*\*Remember that the best remedy is to NOT OVERUSE in the first place. If you start feeling pain or joint discomfort, that is the time to stop!! Rest is the best and easiest remedy for the BIG FOUR.**

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