

QUESTIONS

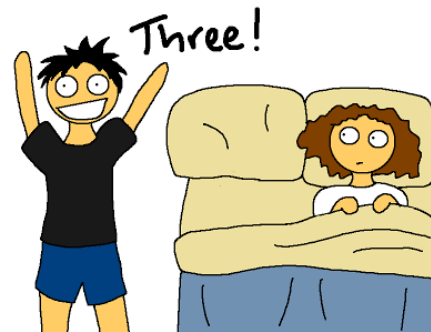
Does your spasticity . . .



help or limit your walking?



cause pain?



help or hinder your ability to get in and out of bed?



make it difficult to breathe or take a deep breath?



Affect your posture in a good way or bad way?

SPASTICITY: THE GOOD, THE BAD, AND THE NOT SO UGLY

Geralyn Bertellotti MS OTR/L

Amy Icarangal PT, NCS

UW Medicine: Harborview Medical Center

Seattle, WA

OUR DISCLAIMER



We report no commercial relationship with any of the mentioned products or equipment. We have posted links and mentioned brand names as a means of examples.

UW Medicine

PROS AND CONS OF SPASTICITY

Pros

- Increases function
- Maintains tone/muscle bulk
- Increase in venous return

Cons

- Decreases function
- Poor positioning in wheelchair, in sitting, or in standing
- Impairs respiration
- Pain
- Difficulty with managing hygiene
- Impairs sleep
- Impairs skin

NON PHARMACOLOGIC INTERVENTIONS

- Stretching
- Strengthening
- Weightbearing/Standing
- Whole Body Vibration
- Splinting
- Thermal Modalities
- Electrical stimulation

STRETCHING

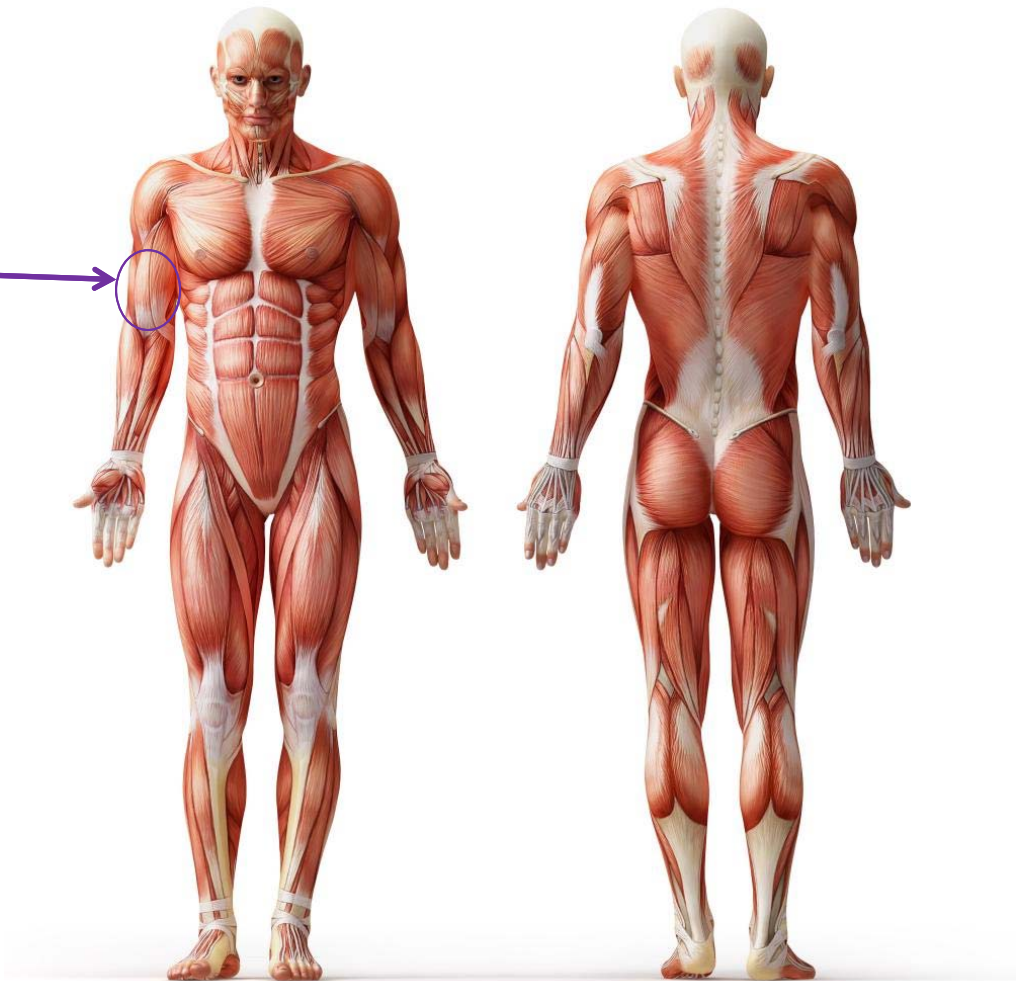
Why it works

- Temporary reduction in muscle tone
- Mechanical changes at the muscles and tendons
- Last several hours

STRETCHING – WHAT TO STRETCH

If you tend to **flex** when you spasm – stretch your front muscles

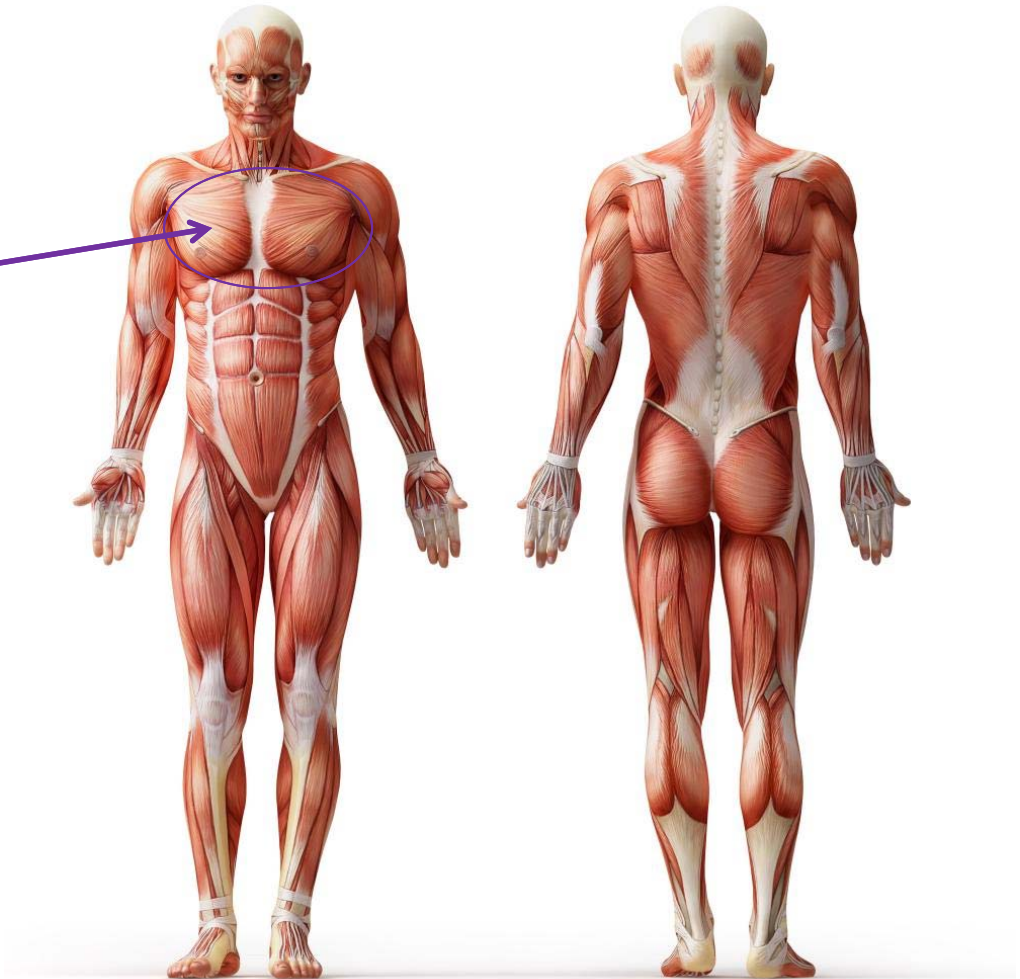
- **Biceps**
- Pectorals
- Abdominals
- Wrist flexors
- Hands
- Hip flexors
- Hamstrings



STRETCHING – WHAT TO STRETCH

If you tend to **flex** when you spasm – stretch your front muscles

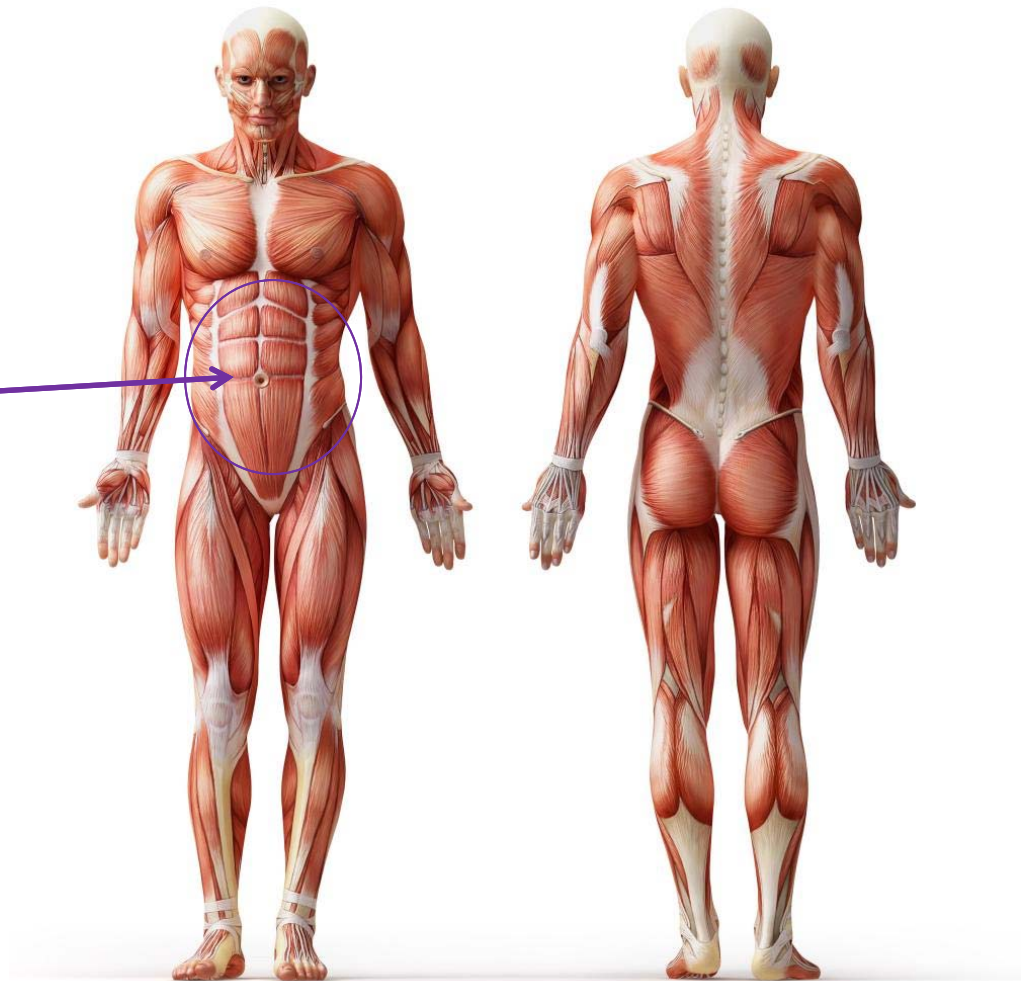
- Biceps
- **Pectorals**
- Abdominals
- Wrist flexors
- Hands
- Hip flexors
- Hamstrings



STRETCHING – WHAT TO STRETCH

If you tend to **flex** when you spasm – stretch your front muscles

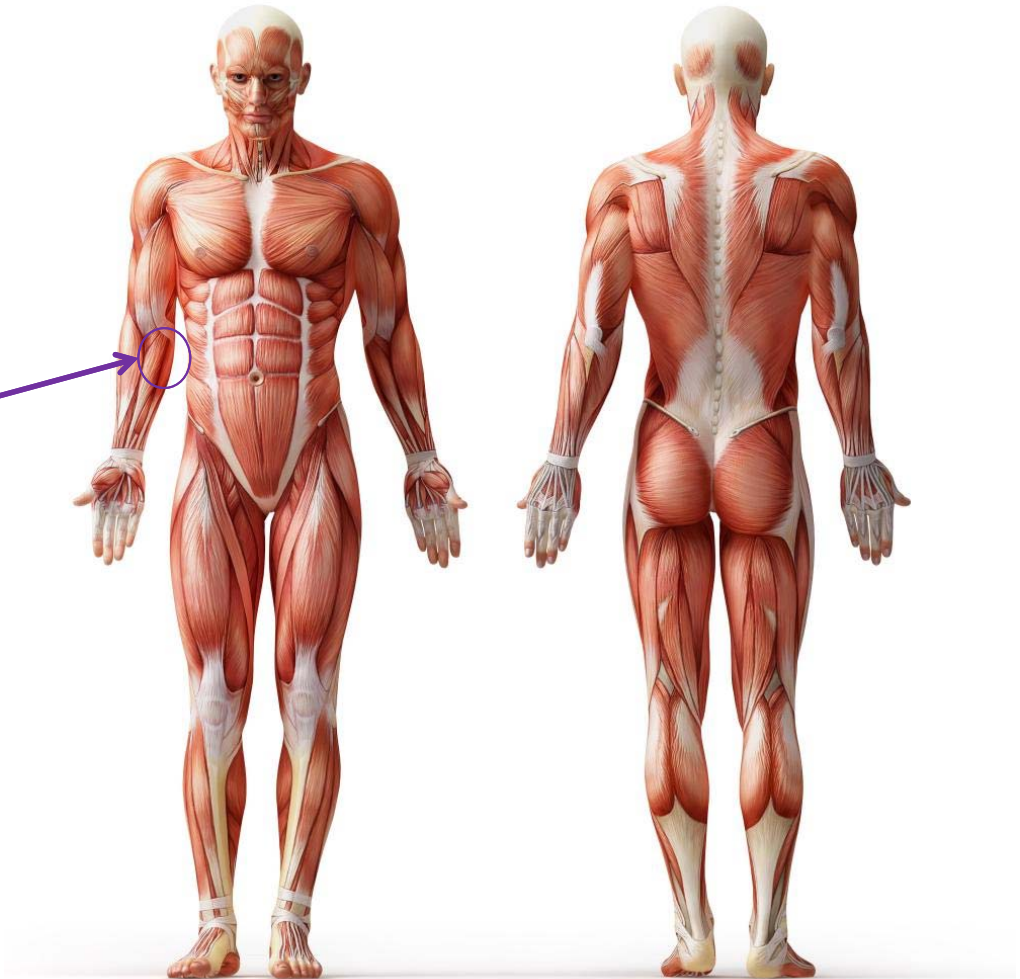
- Biceps
- Pectorals
- **Abdominals**
- Wrist flexors
- Hands
- Hip flexors
- Hamstrings



STRETCHING – WHAT TO STRETCH

If you tend to **flex** when you spasm – stretch your front muscles

- Biceps
- Pectorals
- Abdominals
- **Wrist flexors**
- Hands
- Hip flexors
- Hamstrings



STRETCHING – WHAT TO STRETCH

If you tend to **flex** when you spasm – stretch your front muscles

- Biceps
- Pectorals
- Abdominals
- Wrist flexors
- **Hands**
- Hip flexors
- Hamstrings



STRETCHING – WHAT TO STRETCH

If you tend to **flex** when you spasm – stretch your front muscles

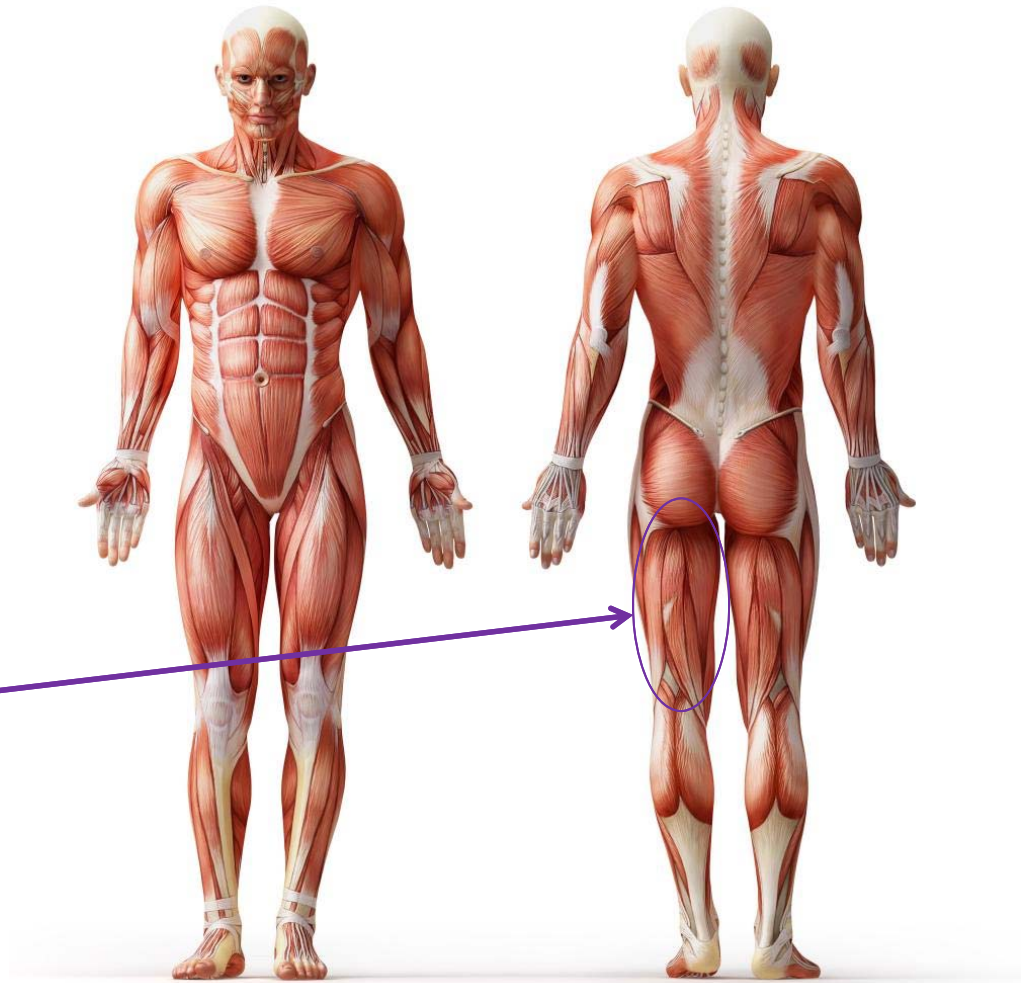
- Biceps
- Pectorals
- Abdominals
- Wrist flexors
- Hands
- **Hip flexors**
- Hamstrings



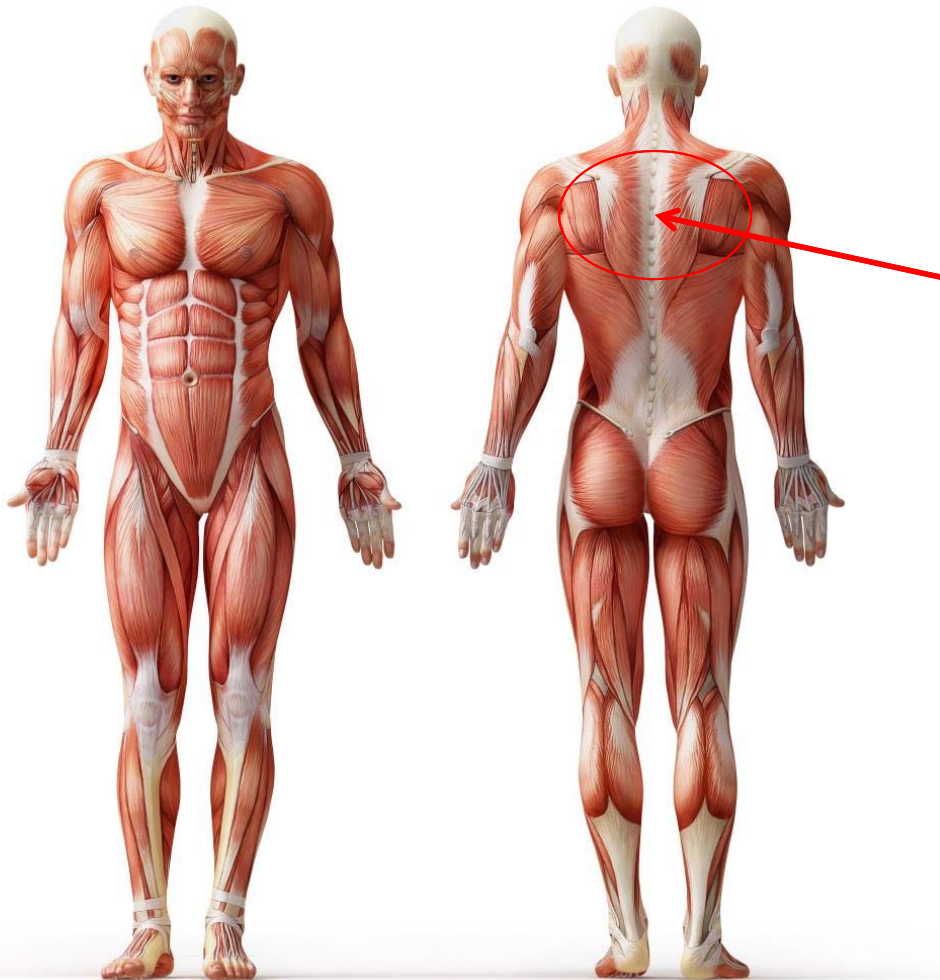
STRETCHING – WHAT TO STRETCH

If you tend to **flex** when you spasm – stretch your front muscles

- Biceps
- Pectorals
- Abdominals
- Wrist flexors
- Hands
- Hip flexors
- **Hamstrings**



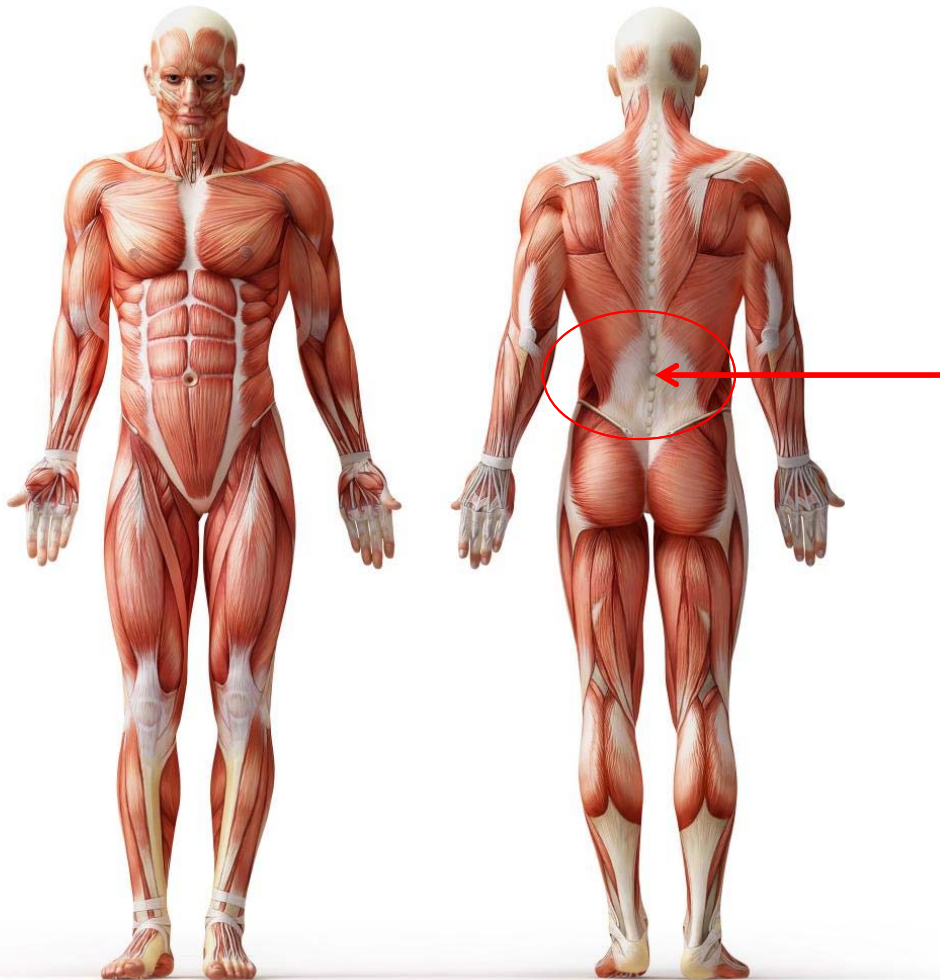
STRETCHING – WHAT TO STRETCH



If you tend to **extend** when you spasm – stretch your back muscles

- **Scapula/shoulder blades**
- Low back
- Hands
- Quadriceps
- Calf

STRETCHING – WHAT TO STRETCH



If you tend to **extend** when you spasm – stretch your back muscles

- Scapula/shoulder blades
- **Low back**
- Hands
- Quadriceps
- Calf

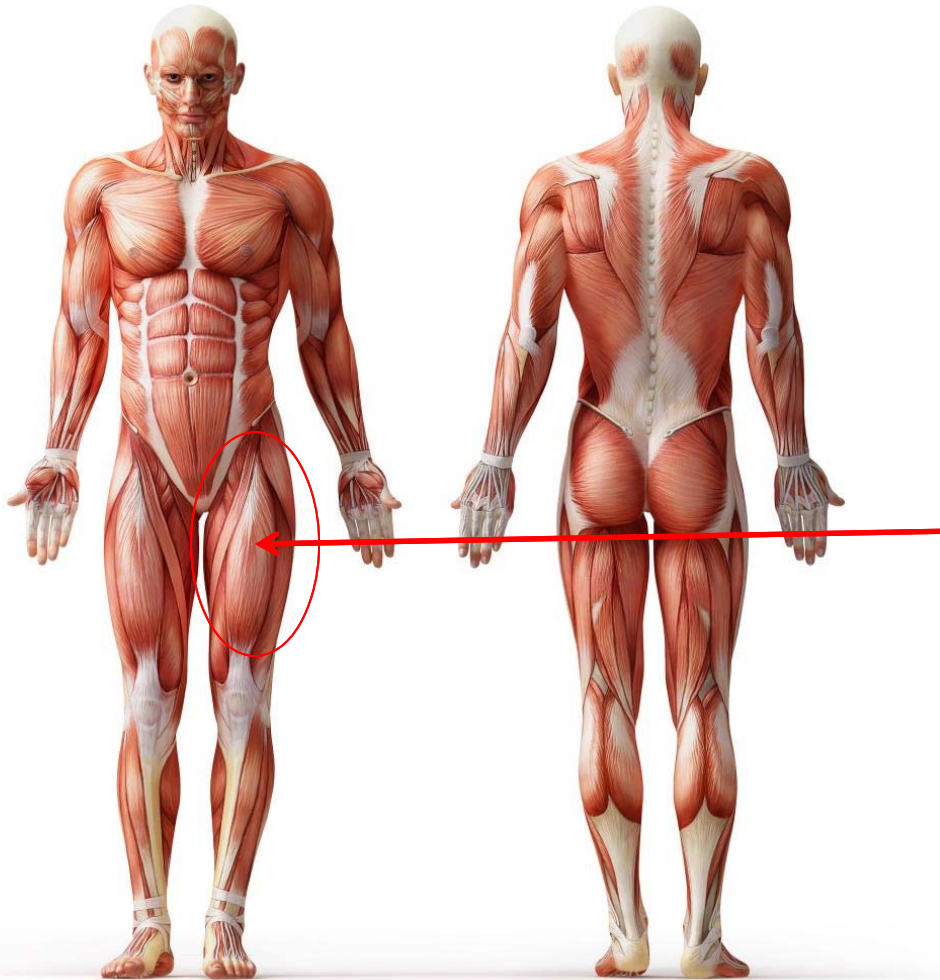
STRETCHING – WHAT TO STRETCH



If you tend to **extend** when you spasm – stretch your back muscles

- Scapula/shoulder blades
- Low back
- **Hands**
- Quadriceps
- Calf

STRETCHING – WHAT TO STRETCH



If you tend to **extend** when you spasm – stretch your back muscles

- Scapula/shoulder blades
- Low back
- Hands
- **Quadriceps**
- Calf

STRETCHING – WHAT TO STRETCH



If you tend to **extend** when you spasm – stretch your back muscles

- Scapula/shoulder blades
- Low back
- Hands
- Quadriceps
- **Calf**

STRETCHING - TYPES

- Passive versus active
- Low amplitude/longer duration versus higher amplitude/shorter duration



STRENGTHENING

Why it may work

- Exercising the opposing muscle will inhibit the spastic muscles
- Exercising the “spastic” muscle may actually decrease the excitability
- Most of the studies are from stroke and brain injury research

STRENGTHENING

American College of Sports Medicine Guidelines:

- 60-80% of 1 rep maximum
- 3 sets 12 reps maximum
- 3 times a week for a minimum of 6-12 weeks
- Incorporate functional positions

<https://www.acsm.org/docs/brochures/spinal-cord-injury.pdf?sfvrsn=4>

WEIGHTBEARING/STANDING

Why it may work

- Prolonged stretch to muscles that become tight primarily calf muscles, hip flexor muscles, and abdominal
- Possibly decreases the excitability of the over spastic muscles

May last until the next day – benefits are greater than stretching alone

STANDING EXAMPLES



<http://www.electro-medical.com/standing-table/>



WHOLE BODY VIBRATION



UW Medicine

WHOLE BODY VIBRATION

Why it may work

- “Vibration paradox” – inhibitory and excitatory qualities
- Last 6-8 days in people with incomplete spinal cords injuries

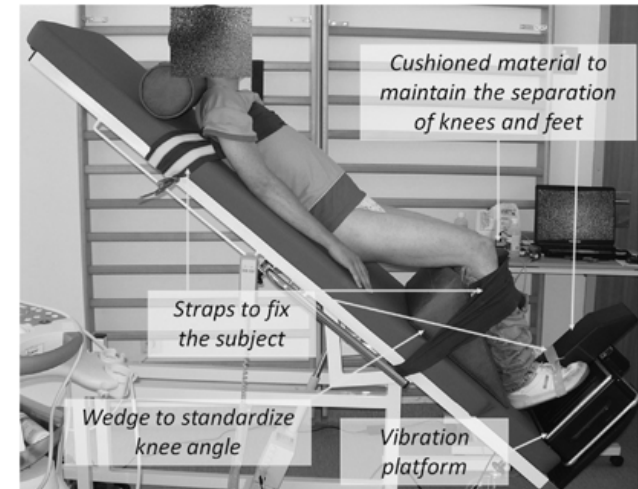
Dosing

- 3 days per week for 4 weeks
- 45 second bouts with a 1 minute rest break x 4 reps (studies range from 30-60 second bouts)
- Vibration frequency varies (20-100 Hz).
- It is unclear how much (frequency) and how long (duration) may be therapeutic.

WHOLE BODY VIBRATION



<http://powerplate.com/>



SPLINTING

Why it may work

- provides prolonged muscle stretch
- allows joint position that does not elicit spasm
- prevent contracture

DYNAMIC SPLINTING



<http://www.dynasplint.com/>



<http://www.bristolneurophysio.co.uk/services/saeboflex>

THERMAL MODALITIES

Why it may work

- Cold
 - Causes slowing of nerve conduction
 - Decrease muscle spindle activity
 - Decrease CNS excitability
 - Dose ~20 min, duration <1 hour
 - Protect skin

HEAT

Why it may work

-Heat

- Increases blood flow which can increase O₂ and nutrients to muscle
- Dose 20 min
- Protect skin

-Examples

- hot packs, hot bath, paraffin

ELECTRICAL STIMULATION

Why it may work

- Stimulation to antagonist muscle
- Stimulate tetanic contraction to spastic muscle
- Alternating stimulation to agonist/antagonist

TENS

- Decrease excitatory impulse to spastic muscle

Leg and arm ergometry with electrical stimulation

EXAMPLES



http://www.bioness.com/Products/H2O_0_for_Hand_Paralysis.php



<http://www.restorative-therapies.com/rt300-legarm>



<http://www.nchpad.org/VirtualTour/MotomedDemo3.html>



<http://www.medi-stim.com/stims/nmes/comfystim.html>

THE “OTHER” INTERVENTIONS

Hydrotherapy

Repetitive TMS

Massage

Acupuncture

Hippotherapy

Taping

Lycra garments

REFERENCES

- Adams MM, Hicks AI. Spasticity after Spinal Cord. *Spinal cord* (2005) Vol 43 577-586
- Barnes M. Management of Spasticity. *Age and Aging* (1998) 239-245
- Brashear A., Elovic E. Spasticity: Diagnosis & Management. 1st edition, 2010
- Elbasiouny et al. Management of Spasticity After Spinal Cord Injury: Current Techniques and Future Directions. *Neurorehabilitation and Neural Repair* (2010) 24 (1)
- Hou et al. Effect of Combined Treadmill Training and Magnetic Stimulation on Spasticity and Gait Impairments after Cervical Spinal Cord Injury. *Journal of Neurotrauma* (2014) 31:1088-1106
- Kesiktas et al. The Use of Hydrotherapy for Management of Spasticity. *American Society of Neurorehabilitation and Neural Repair* (2004) 18 (4)
- Ness and Field Fote. Effect of whole-body vibration on quadriceps spasticity in individuals with spastic hypertonia due to spinal cord injury *Restorative Neurology and Neuroscience* 2009
- Ness and Field Fote Whole-body vibration improves walking function in individuals with spinal cord injury: A pilot study *Gait & Posture* 30 (2009) 436–440
- Sadeghi M et al Effects of Vibration on Spasticity in Individuals with Spinal Cord Injury: A Scoping Systematic Review. *Am J Phys Med Rehab* (2014) Vol 93, No. 11
- Sayenko et al. Acute effects of whole body vibration during passive standing on soleus H-reflex in subjects with and without spinal cord injury *Neuroscience Letters* (2010) 482: 66–70
- Smania et al. Rehabilitation Procedures in the Management of Spasticity. *Eur J Phys Rehabil Med* (2010) 46: 423-438
- Tamburella et al. Somatosensory inputs by application of KinesioTaping: effects on spasticity, balance, and gait in chronic spinal cord injury. *Frontiers in Human Science* (2014) Vol 8 Article 367