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healing process:

Inflammatory / Proliferation / **Maturation** (part 3 of 3)

As you were before the pain...and better!

by Mark McFadden, Physiotherapist



Welcome to the final component of the healing process, the Maturation phase. Our two previous articles brought you through key components - the initial inflammatory and proliferative phases; through the pain, swelling, reduced movement and painful day to day tasks. It dealt with activating muscles and mobility of the injured tissues. Upon reaching the maturation phase you are feeling pretty much back to normal, so much so, that you have stopped receiving care from your physiotherapist and other health providers. But, I must let you know that you actually haven't quite made it to full recovery, yet.

Recovery after an injury is much more complex than simply the recovery from the sensation of pain. Beyond the pain, movement and function problems that occur when you suffer an injury, you have also affected full strength, normal flexibility, adequate coordination & dexterity, balance, proprioception and have scar tissue to address. To fully recover from an injury, you should address the full range of changes that have occurred to your body as a result of your injury. By not addressing the full spectrum of changes you risk a recurrence of your injury and you are more likely to have a greater severity of the symptoms that were associated with the original injury. Common examples of this reality you might recognize are ankle sprains, tennis elbow and shoulder rotator cuff syndrome.

If you yourself have had such an injury or you know of an individual who has, you may very well have noticed that the

symptoms associated with these injuries often reoccur. << Multiple times on crutches after *another* ankle sprain, wearing a brace *again* for that tennis elbow, or unable to reach the top shelf file folders because of that bum shoulder.>> In most cases, a full recovery never took place following the initial injury because the care for the injury stopped before all components of the injury were properly addressed.

Strength recovery in the maturation phases addresses the specific injured muscles/tendons along with synergistic muscle groups that should be trained with resistance and endurance movements in order to correct for muscle group inhibition and imbalances that resulted from the injury or that were predisposing factors to the original injury.

Joint capsules, muscles and fascia tissue tension increases due to injury and pain. Return to normal ranges takes time and regain. Normal flexibility gained through specific stretching is essential for normal biomechanics of movement of a healthy body. Incomplete recoveries left with altered biomechanics is a frequent cause of additional muscle and tendon injuries and joint problems.

After most injuries there is often the factor of scar tissue. This tissue laid down during the proliferative phase needs to be mobile rather than thick and stuck to the surrounding layers which is often the case during the proliferative phase. During the maturation phase scar tissue is addressed with heat, movement, stretches and various scar tissue release techniques.

On a day-to-day basis, our bodies manage most coordinated tasks very well. Changes to your coordination & dexterity will be most evident during refined activities or when fatigued. Being conscious to this change and repeatedly putting your body through challenging exercises will help recover coordination & dexterity that were affected by your injury. Exercises can be either non-specific or task specific. A particular note to individuals involved in specific leisure activities/sports, these exercises should reflect the movements and demands of your preferred activity/sport.

Balance from our feet is a very familiar concept. Injury to any part of your lower body, especially ankles, causes important changes in the ability to maintain balance. Especially when your vision is obstructed, the surface is uneven or you are performing very dynamic tasks. Balance for the upper body is almost always overlooked. Consider how challenging it may be however to reach with one hand for the fine china on a tray from the top shelf and lower safely to the counter after having a shoulder surgery. Balance is a key skill to regain following any injury, especially for future injury prevention.

For your health, today and into your future, take the time and the best steps you can to ensure you have brought your injury through the entire healing process from Inflammatory to Proliferative to Maturation.

pumpkin facts

by Jean LaMantia, Dietician

As Halloween approaches many of us might head for the pumpkin patch to pick out the perfect specimen for this year's jack-o-lantern. Used as a decoration and then discarded, the pumpkin is actually a common food source in many cultures.

Pumpkins are a member of the squash family and rank in the top 5 of healthiest vegetables. This is largely due to their very high content of beta-carotene. Beta-carotene is a member of the carotenoids group. Also included in this group of 6 different beneficial plant nutrients are: lutein, lycopene, zeaxanthin, alpha-carotene and beta-cryptoxanthin. Easily distinguishable due to their pigmentation, fruits and vegetables containing a member of the carotenoid group are dark green, orange and red coloured.

One confirmed function of the carotenoids is as a pre-cursor to vitamin A. This means that the carotenoids will convert themselves to vitamin A once inside the body. There is a strong association between people who eat more fruits and vegetables in the diet and a lower rate of cancer and heart disease.

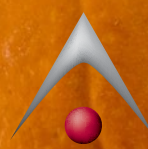
The flesh of the pumpkin is the most common food source that Canadians use. Pumpkin pie at Thanksgiving is a Canadian tradition. Although adding the antioxidant-rich pulp to pastry (usually made with white flour and shortening, lard or butter) is not ideal, it is what most Canadians are familiar with. Pumpkin is also a vegetable in its own right. Many of my West-Indian

clients will regularly report eating pumpkin as their vegetable choice at meals. It can also make a tasty soup.

In addition to its high beta-carotene content, pumpkin is also a good source of potassium (298 mg per ½ cup mashed) which is a mineral known to help lower blood pressure, and folacin (12 mcg / ½ cup mashed) (known as folic acid when it occurs as a supplement) which is known to help reduce cancer and heart disease risk.

Another beneficial component of pumpkin is the seeds. I often recommend pumpkin seed butter (available in health food stores under the brand Nuts to You ®) as an iron-rich protein choice that can be used similar to peanut butter. The seeds contain 19g of protein and 9 mg of iron in a 4 tbsp (60 ml) portion. The seeds are also high in magnesium, phosphorus and potassium and contain 11g of unsaturated fats.

A little known edible part of pumpkin is the pumpkin flower. Central Mexican cooking uses pumpkin flowers as a common ingredient. The flower, is very high in folate, vitamin A and beta-carotene. If you want to prepare a new fun and highly nutritious food for the family consider preparing some pumpkin. A great site to search for recipes is www.epicurious.com, it has 265 results for a search on "pumpkin" including some healthy sounding ideas such as pumpkin seed pesto, spicy pumpkin and split pea soup, warm pumpkin salad with polenta and pork and pumpkin stew. Enjoy!



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