



# H I G H F I V E



## LIVING WITH RAYNAUD'S PHENOMENON

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It's that time of year again. Cold wind is blowing. We've all felt the pain of cold in our hands and feet when exposed to extreme cold. Just scraping the windows without gloves can be a painful experience. For those with Raynaud's Phenomenon, mild exposure to cold, (e.g. a walk down the frozen food aisle or air conditioning), can set off a very painful response.

Raynaud's Phenomenon results in a decrease in surface temperature of the extremities, (hands & feet), usually due to an over response to cold temperatures. Blood flow to surface tissue is temporarily reduced. This condition most often affects women between the ages of 20 and 40 years and is more prominent in cold climates.

The cause of Raynaud's may be the results of another disease, (eg. Lupus or rheumatoid arthritis) certain meds, using vibratory tools, smoking or having frost bite. Cold exposure is the most common trigger of Raynaud's attack. Emotional stress and certain meds. can also trigger an attack.

During an attack of Raynaud's, fingers or toes feel cold and numb and turn white due to blood flow constriction. As blood flow returns, fingers warm, turn blue then red and begin to throb and become painful. These attacks typically last a few minutes to an hour.

To prevent an attack, avoid the triggers of Raynaud's.

- Keep your body warm at all times
- Reduce anxiety
- Quit smoking
- Avoid caffeine & cold meds with pseudophedrine
- Wear mittens
- Use oven mitts to get something out of freezer
- Drink hot liquids
- Warm hand in warm running water
- Swing arms rapidly in a circle at the side of your body (wind milling)
- Don't wear tight clothing that can cut off circulation
- Stay dry & eat a hot meal

**Denise Claiborne, MS,OTR, CHT**

### RAYNAUD'S PHENOMENON RESOURCES

1) Arthritis Foundation  
1-800-568-4045  
[www.arthritis.org](http://www.arthritis.org)

2) National Heart, Lung & Blood Institute  
(301)592-8573  
[www.nhlbi.nih.gov](http://www.nhlbi.nih.gov)

3) Scleroderma Foundation  
1-800-722-4673  
[www.scleroderma.org/](http://www.scleroderma.org/)

## SPORT SHORTS

How many of us enjoy to ski or snowboard during the winter months? How many of us actually prepare and condition for the slopes?

Each year, over 250,000 people suffer from injuries associated with skiing and snowboarding. Most injuries occur in the afternoon, between 1:00 and 4:00, when skiers are tired. Some common injuries are fractures to the wrist and thumb, sprains to the knee, and lower back strains. Most of these inju-

ries occur due to weakness in lower body and core strength, and decreased balance/proprioception.

Assessing different musculature imbalances in your physical condition will help prepare you for an injury-free season. Lower body strength is an important area that will keep you on your feet and your head out of the snow. Core strength consisting of abdominal and lower back strength will reduce the risks of a lower back injury. Bal-

ance and proprioception exercises will improve your performance down the hills and keep you out of the first aid room. Lastly, cardiovascular conditioning consisting of 30 minutes, 3-5 times a week will keep you enjoying your day with plenty of energy.

For those interested, MHSRC is offering a 6 week ski and snowboarding program at our Warren clinic. Please call (586)573-8890 for more details.

Mike Perkins, ATC



## GETTING TO KNOW OUR SPECIALISTS

**Q:** What is Hand therapy?

**A:** Hand Therapy is the Art & Science of Rehabilitation of the Upper Quarter of the human body. Hand Therapy is a merging of OT & PT theory and practice that combines comprehensive knowledge of the upper quarter, body function, and activity. Hand Therapists promote the goals of prevention of dysfunction, restoration of function and/or the reversal of the progression of pathologies.

**Q:** What is a CHT?

**A:** A Certified Hand Therapist (CHT) is a PT or OT who has specialized in upper extremity Rehab. In order to become a CHT, one must be out of school for at least 5 years and have accumulated 2 + years of direct practice in upper extremity rehab. Once these requirements have been met, candidates are now eligible to take a rigorous national exam. For those who are fortunate to pass, they can use the credentials CHT. Also to keep these credentials, CHT's must stay up

to date on the latest surgical techniques and therapy principles via attending several continuing education courses each year.

**Q:** What are the benefits of working with a CHT.

**A:** CHT's are recognized as specialists by Allied Health professionals (Doctors, Nurses, Lawyers, etc.) and are designated to evaluate and treat highly complex and more sophisticated injuries. While MHSRC employs CHT's at all five locations, there

are several therapists that are not yet eligible to sit for the exam but are actively preparing to achieve CHT status.

The CHT credential is recognized as a benchmark for excellence in advanced specialty credentialing in Health care. So the next time you or a loved one needs rehab of the Upper Extremity, look for the credentials you can place trust and confidence in.

James Riley, OTR, CHT

### MHSRC proudly staff's CHT's at all locations.

#### WARREN

Kay MacConnachie, OTR, CHT  
James Riley, OTR, CHT  
Andrew Sharpe, PT, CHT  
Amy Barber, OTR, CHT

#### DEARBORN

Eileen Foley, OTR, CHT  
Kurt Krueger, OTR, CHT

#### LIVONIA

Denise Claiborne, MS,OTR, CHT  
James Riley, OTR, CHT

#### DETROIT

Tina Truhol, OTR, CHT

#### ROCHESTER

Sue Doherty, OTR, CHT



## SKIER'S THUMB

'Tis the Season! As winter approaches as does a common injury called "Skier's Thumb".

The "Skier's Thumb" is an acute injury to the ulnar collateral ligament (UCL) of the thumb. When a skier falls with his hand caught in a ski strap, the thumb is yanked outward. If the UCL is pulled far enough, it will tear.

The UCL is a band of tough, fibrous tissue that connects the bones at the base of the thumb. This ligament prevents the thumb from pointing too far away from the hand.

The common symptoms of UCL injury is pain and swelling directly over the torn ligament at the base of the thumb. Difficulty grasping or holding objects is a common complaint. The treatment depends on the extent of the injury, how long ago the injury occurred, the age of the patient, and the physical demands of the patient. If the tear is incomplete, and the thumb is not "too loose", the patient is usually placed in a cast or a splint called a thumb spica for 4 to 6 weeks.

If the tear is complete, or the patient has significant instability, surgery may be needed. It is recommended you see

your doctor as soon as possible. Surgery is most effective when performed within the first few weeks following injury. If it is possible, the surgeon will repair the torn ends of the ligament back together (direct repair). If the ligament is torn from the bone, the ligament will be sutured down to the bone.

If the injury to the ulnar collateral ligament is older, then it is likely that a direct repair will not be possible. In this case, either another structure will be transferred to reconstruct the UCL, or one of the muscles at the base of the thumb will advance to compensate for the torn ligament.

### Rehabilitation Program:

Patients with hand injuries are referred to an Occupational Therapist, particularly one with special training in hand therapy "CHT". During the acute phase, local modalities (icing) is helpful to decrease the pain and swelling on non-surgical cases.

Following the surgery to repair UCL, the thumb and wrist is immobilized for 4-5 weeks. After this period, it should be removed several times a day for AROM exercises and progressive strengthening exercises.

Sue Doherty, OTR, CHT



## SAFE SNOW SHOVELING

Winter in Michigan conjures images of snow covered pine trees, skiing, sledding and snowmobiling. But with all of the good comes the not-so-good, including frigid temperatures, snow and ice, and of course, snow removal. Every year numerous injuries occur while snow shoveling. The most serious are heart related conditions, but there are also numerous orthopedic injuries that occur as well; these include fractured wrist from slip and fall accidents on slick surfaces, rotator cuff strains and lower back injuries.

These injuries can in most cases be prevented by using proper technique and a healthy dose of common sense.

Most wouldn't consider shoveling of snow to be a form of exercise, but it most certainly is. A study performed by Barry Franklin PhD at Beaumont Hospital (Journal of the American Medical Association, 1995) clearly showed that heavy snow shoveling demanded just as much from the heart muscle as a maximal treadmill stress test—which is considerably more difficult than the average bout of aerobic exercise. It is

important to be realistic about this and limit the time involved shoveling. Most don't exercise for 30-60 minutes daily, and shoveling should follow suit. Another tip would be to shovel early and often—this keeps the amount of snow that must be moved to a minimum, allowing you to push rather than lift snow. This also keeps the snow from freezing or partially melting and becoming harder to remove. Perhaps most importantly, the signs of heart dysfunction should be taken very seriously. Chest discomfort, persistent shortness of

breath or excessive sweating could all be signs of a potentially serious heart condition; if these occur you should cease activity immediately and seek medical advice!

Other tips for avoiding injury include:

1. Dress properly for the conditions. Wear layers of clothing so that as your body temperature increases you can take off layers
2. Take frequent rest breaks
3. Use proper equipment: this includes boots (for better footing on slippery surfaces) and shovels designed specifically for snow removal.

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**We are on the web!**

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

## **MICHIGAN HAND & SPORTS REHABILITATION CENTERS**

### **\* CORPORATE OFFICE**

WARREN LOCATION  
11012 13 Mile, Ste. 200  
Warren, MI 48093  
Phone: 586-573-8890  
Fax 586-573-2706

### **DETROIT LOCATION**

4160 John R, Ste. 1026  
Detroit, MI 48201  
Phone: 313-831-1235  
Fax: 313-831-0715

### **\* DEARBORN LOCATION**

22731 Newman, Ste. 100B  
Dearborn, MI 48124  
Phone: 313-791-0616  
Fax: 313-791-0632

### **ROCHESTER HILLS LOCATION**

455 Barclay Circle, Ste. B  
Rochester Hills, MI 48307  
Phone: 248-853-6965  
Fax: 248-853-6972

### **LIVONIA LOCATION**

15250 Levan Rd.  
Livonia, MI 48154  
Phone: 734-464-6311  
Fax: 734-464-6233

### **\* FULL SERVICE FACILITIES**

INCLUDING Work Reconditioning  
and Physical Therapy.

## **HEATED GLOVES**

*Heated gloves are an efficient accessory that not only cover delicate fingers, but also add heat. Available through special order at MHSRC. Several styles and a wide range of sizes available. See your therapist for details.*



**2006 Sas Claw Gloves**

**Black Combo Mitts**



## **SAFE SNOW SHOVELING CONTINUED FROM PAGE 3**

4. Push snow. Don't lift it unless you need to. If you have to lift, be sure to use proper lifting techniques. Use the stronger and larger muscles in your legs for power as opposed to the back muscle.
5. Don't throw snow over your shoulder or to the side, as your back will be less tolerant of rotation than straight ahead movements.

**Greg Golden, PT**

## **TWO THUMBS DOWN TO HIGH-SPEED**

Is high-speed the answer, especially when it comes to our hands? Our fast-paced society has enabled us to communicate in ways that were never possible. With this fast pace comes hand tendonitis, carpal tunnel syndrome and the dreaded trigger thumb. Text messaging, video games or too much computer activity are causing these injuries. A new term,

Texter's thumb, has been identified. Smaller buttons on handset controls are increasing pressure on thumb through texting. Some individuals are texting up to 50 messages per day or playing video games for hours, putting excessive strain on their thumbs. Symptoms become apparent when the individuals are unable to button their clothes, perform sporting activities or

feel cramping in their arms. Numbness, tingling or hand pain may be indications for medical intervention. Some preventative measures include limiting time and vibration modes on games, using a pillow to support the arms, utilizing stretching and frequent rest breaks. By using these techniques, hopefully we can decrease the pain and have two thumbs up for high-speed.

**Tina Truhol, OTR, CHT**