Orthopaedic Connection

Worried About Walking?

By Thomas J. Haverbush, M.D.
Orthopaedic Surgeon

Transforming patient information into patient understanding.

Joints were made to move. That’s why we have them. Pretty obvious, right? But lots of patients stop walking because they are concerned about balance and falling. Another factor is the muscular weakness that sets in as people age.

In addition pain from a worn out joint (or joints) leads many patients to cut back or stop walking altogether. Unfortunately when that happens, the patient gains weight and stiffness and weakness are exaggerated.

Osteoarthritis

In its simplest definition osteoarthritis is the wearing out of the cushioning material that is in the joint and keeps the bones from rubbing together. Osteoarthritis has a slow onset and joint symptoms of pain, swelling and stiffness begin way before bones begin to rub together.

Bones rubbing together is accompanied by the surrounding tissues becoming inelastic and deterioration of the all important joint lubricating synovial fluid.

The Secret

Keeping the arthritic joint moving can do wonders. Movement of the joint helps to circulate the synovial fluid in a joint even if the fluid is sub optimal. The fluid provides lubrication and nutrition to the joint.

A lot of the pain comes from the joint becoming stiff which does not have to happen if it can be kept moving.

Movement can be aided in a number of ways. Non narcotic medication, heat, massage and perhaps physical therapy.

Physical therapy can be a very important component in a program to keep joints moving. Not only can PT do things in their department setting or even at your home, but the therapist will suggest and teach you and the family things that can be done on your own between therapy visits and after you are no longer seeing the therapist.

Biggest Barrier

People don’t want to appear old. It is hard to convince a lot of patients to use a supportive device. They would rather risk falling or be immobile. It is a shame, but I see it all the time.

So break the barrier.

Canes

Hold the cane on the unaffected side as you walk. As you move forward the cane and the affected leg should move together as you step. It seems opposite, but done in this way you are protecting and taking some weight off of the affected side.

There are many kinds. Whether a single one or quad cane is a personal choice. Adjustable aluminum ones work best. There are different styles, color and grips.

Rollator
Everyone has seen these. They have 3 or 4 wheels and hand brakes. Some have a seat which is a nice feature. They come in different styles and weights. It’s best to be able to test it out before buying one to be satisfied with weight, tires and features.

**Walkers**

They either have 4 legs or wheels. Walkers are the best choice if you need maximum support. It helps you to put more weight on your arms as you advance your legs.

**Get Moving**

If you can keep walking you will get stronger and joints will maintain or increase their mobility. Pain will decrease. Don’t forget good shoes. Medicare and most insurances will cover some or all of the cost especially if you have a prescription which I will provide if you need an assistive device.

*My patients put their trust in me and what I do improves the quality of their lives.*

**Gratiot County Herald Archive and Office Website.**

I sincerely appreciate all of you loyal readers and patients present and future and welcome all newcomers!

Besides what you read today there is a huge treasure trove of Orthopaedic and musculoskeletal information at [www.orthopodsurgeon.com](http://www.orthopodsurgeon.com). It contains the Website Library, Your Orthopaedic Connection and complete archive of every GCH article I have written.

I specialize in you. Be well.

Dr. Haverbush