

Rules of Prophylaxis for Hips and Spine - Children and Adults - in Points and Figures

Karski Tomasz

Professor Lecturer in Vincent Pol University, Lublin, Poland

***Correspondence to:** Dr. Karski Tomasz, Professor Lecturer in Vincent Pol University, Lublin, Poland.

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Abstract

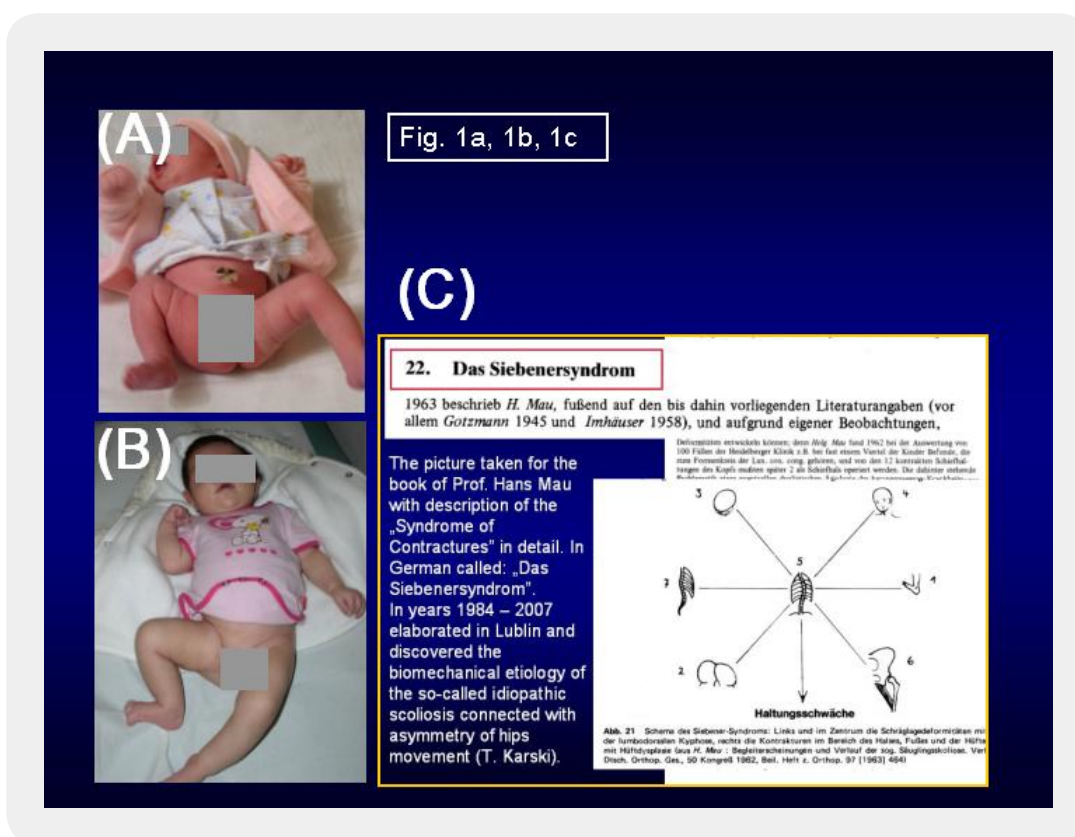
In the article the author described the cardinal rules of prophylaxis and therapy for hips in small children and in adults. In article is also presented fundamental knowledge about biomechanical etiology of the so-called idiopathic scoliosis, classification, rules of new therapy.

Introduction

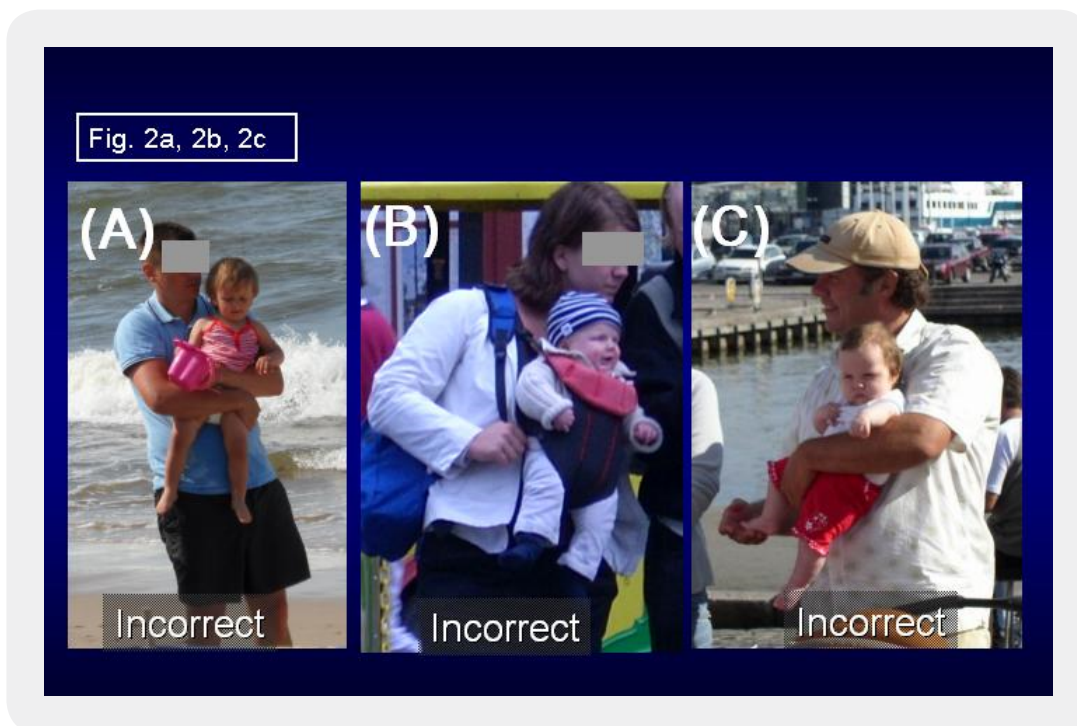
In orthopedics it is important proper diagnosis, proper therapy - in beginning period - conservative - and if is insufficient - surgery. According my knowledge - very often the prophylaxis and ease physiotherapy is sufficient to cure of many illnesses and deformations. So is in problem of hips and spine presented / described in the article. All observations are based on material of many thousands of patients from years 1961 - 2020, but especially from years 1995 - 2020.

Hips and Spine - Children and Adults - Prophylaxis and Therapy in 12 Points of Descriptions and Figures (Literature 1 - 39).

1/ Symptoms of the “Syndrome of Contractures and Deformities” (SofCD) according to Prof. H. Mau explain many of deformations in children and adults. In this Syndrome there are asymmetries of the spine, hips, knees, shanks, feet - in position and in movements. Smaller abduction of the left hip is the symptom of dysplasia. Differences of movement right: left hip-smaller adduction in „extension position” of right hip - important in the etiology of scoliosis - when child starts to stand & walk. (Fig. 1a, 1b, 1c).



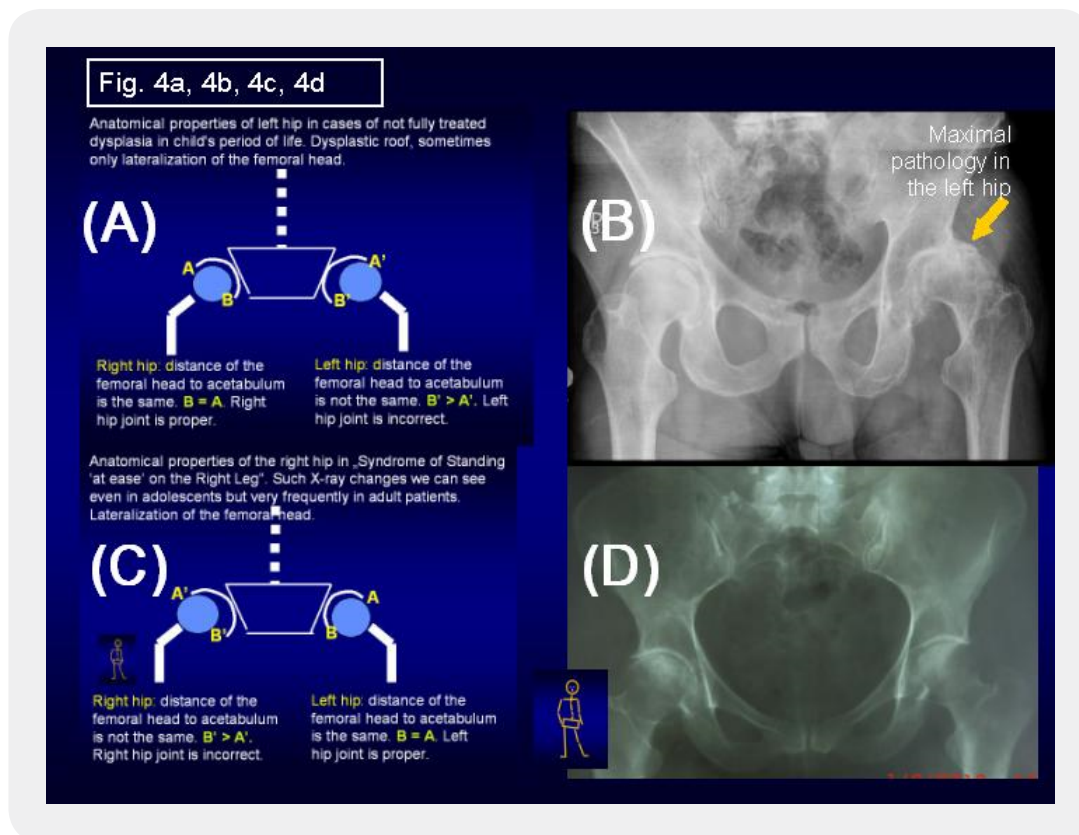
2/ Wrong way of carrying of children - without abduction of hips - its mean danger of development of dysplasia. Such carrying is recommended by “poorly” educated or “over - educated” doctors in many countries in Europe. Pictures taken in Poland - left and abroad - in the middle and on right (Fig. 2a, 2b, 2c).



3/ The correct way of carrying a child. Its mean - prophylaxis of the hips dysplasia (A) (B) (C). Proper therapy of the wry neck on left side (C). Permanent rotation stretching of the head to the wry neck side is only proper method. Articles about this therapy were published in Germany and in USA [T. Karski 1991 & 2017]. (Fig. 3a, 3b, 3c).



4/ (A) Example of advanced arthrosis in the left hip with heavy symptoms - pain, limping. This patient was in childhood never treated. (B) Both hips pain - in right hip because of permanent standing 'at ease' on the right leg. (Fig. 4a, 4c, 4c, 4d)



5/ Importance of standing. Methods of physiotherapy as prophylaxis of arthrosis of the hips. A special form of standing and sitting should be introduced at the age of 45 - 50. Standing in abduction and in internal rotation changes the loading on the femoral heads, enables regaining internal rotation. Such standing - should be perform - every day in every situation over many years (Fig. 5a, 5b, 5c, 5d).



6/ Importance of sitting. On pictures / figures is proposed the methods of physiotherapy as prophylaxis of arthrosis of the hips. A special form of standing and sitting should be introduced at the age of 45 - 50. Sitting - in internal rotation, what increases the range of this movement. Patients should sit in this position every day in every situation. Sport in the form of "Nordic walking" is also very important (Fig. 6a, 6b, 6c, 6d).

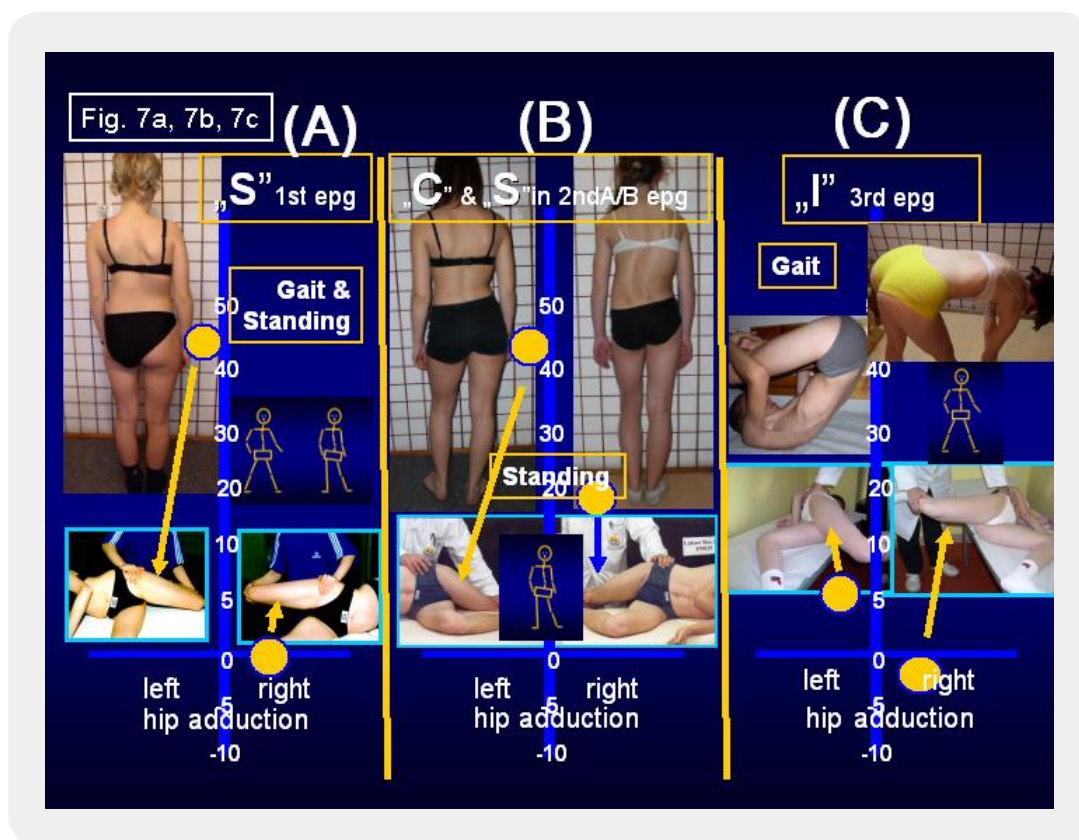


7/ Explanation of developmental of so-called idiopathic scoliosis. Important is range of adduction of the hips and type of scoliosis. Influence: „standing ‘at ease’ on right leg” and „gait”. 3 groups & 4 types. Groups:

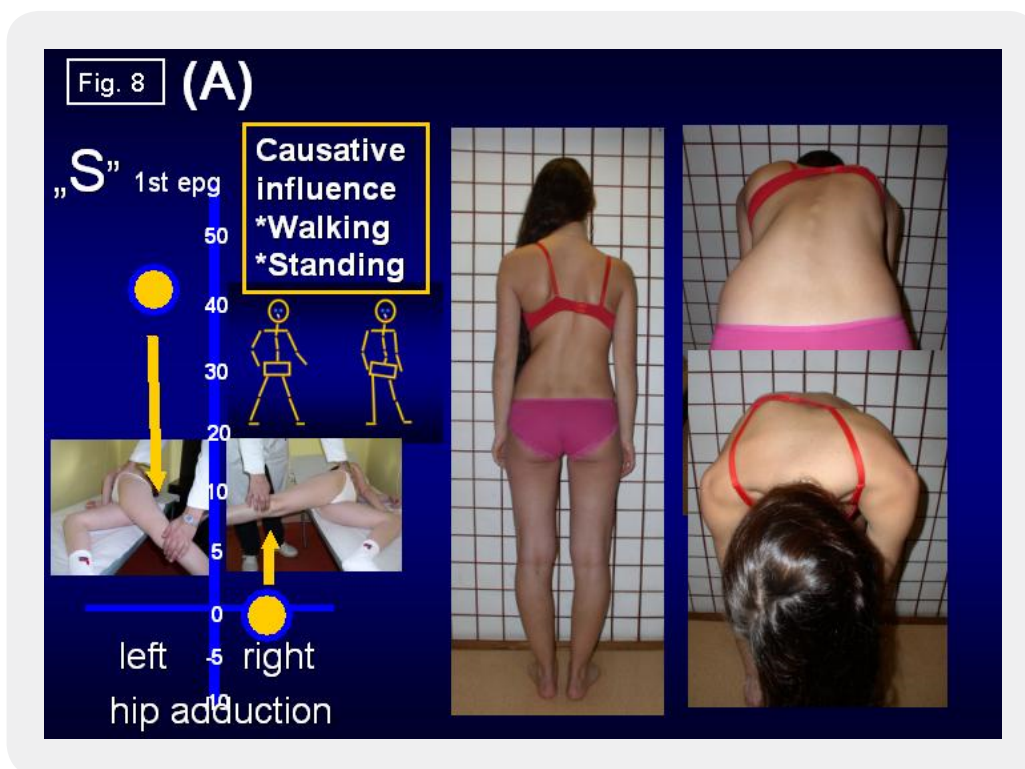
A/ Gait & Standing - “S” scoliosis, 3D - stiff spine, two curves, rib hump on right side of thorax.

B/ Standing - “C” and “S” scoliosis, 2D or 3D. Flexible spine. In “S” scoliosis in etiology additionally laxity of joints or / and incorrect previous therapy.

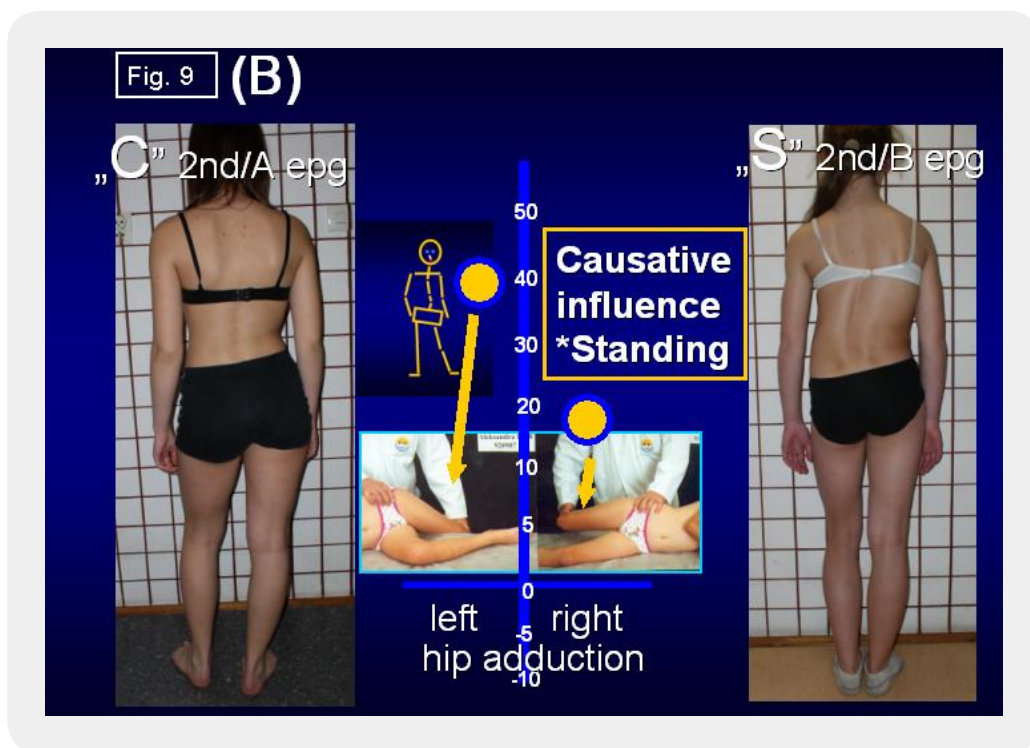
C/ Gait - “I” scoliosis 2D or 3D - stiff spine, No or small curves. In 2004 included to scoliosis group / type in Lublin classification (Fig. 7a, 7b, 7c).



8/ Example of “S” scoliosis in 1st group / type. Range of adduction of hips in 1st type of scoliosis presented on picture. Two curves. Gibbous. Stiff spine (Fig. 8).

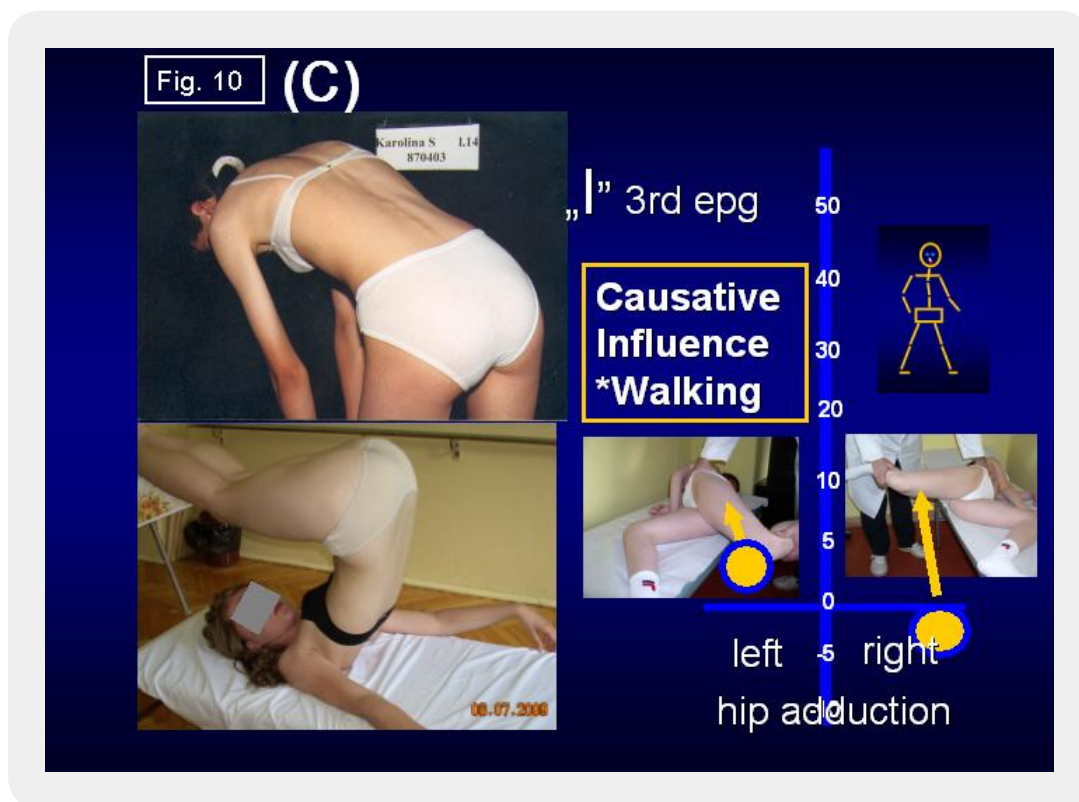


9/ Example of “C” or “S” scoliosis in 2nd group / type. Range of adduction of hips in 2nd/A “C” and in 2nd/B “S” type of scoliosis presented on picture. Flexible spine (Fig. 9).

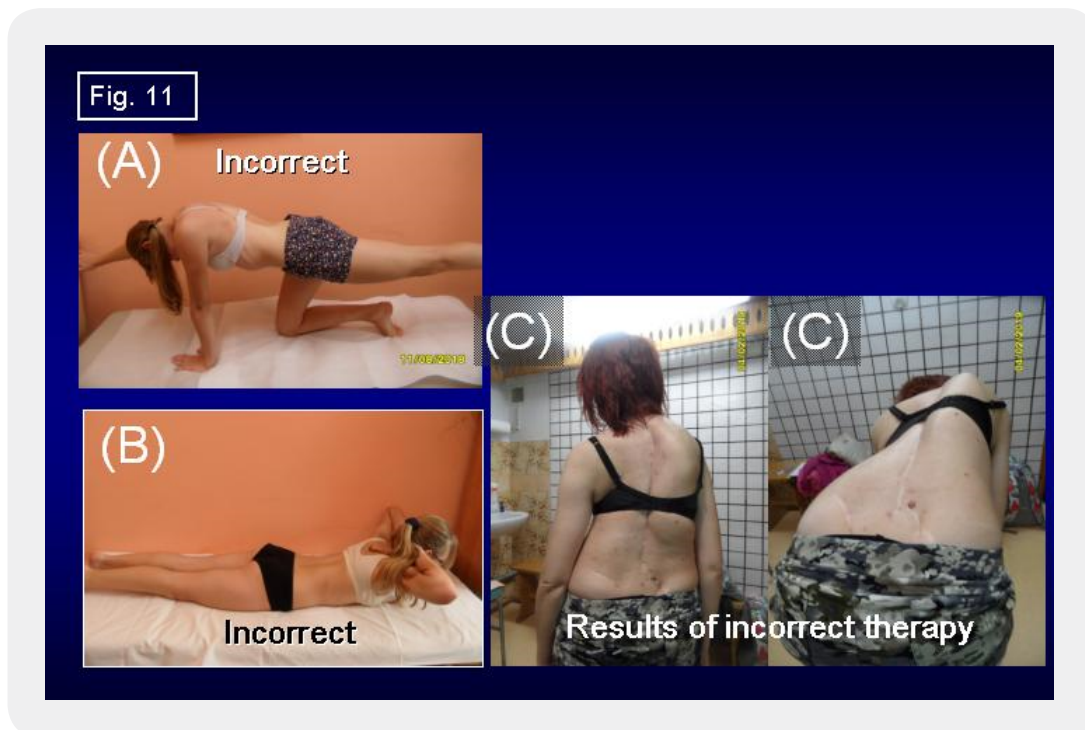


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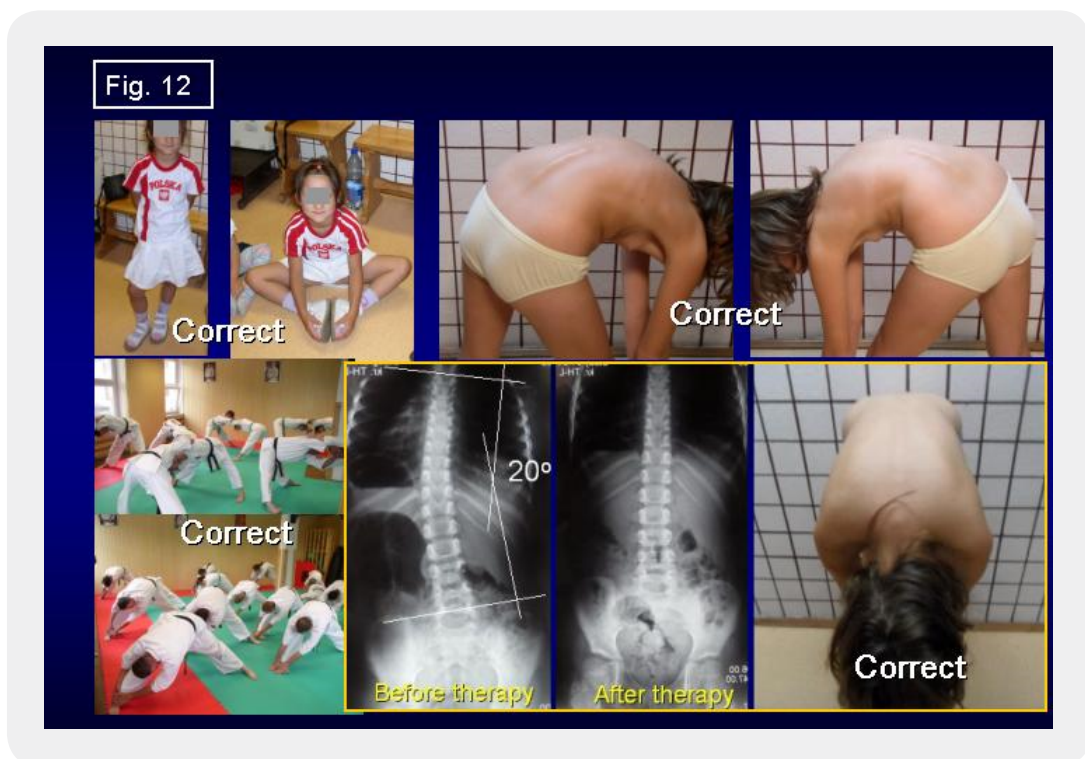
10/ Example of “I” scoliosis in 3rd group / type. Range of adduction of hips in 3rd “I” type of scoliosis presented on picture. No curves or small. Stiffness of spine (Fig. 10).



11/ Example of wrong and harmful exercises (A) (B). After such incorrect therapy and in this case (C) also surgery - iatrogenic deformity, big curves, big rib hump and maximally stiff spine (Fig. 11).



12/ Stretching exercises are proper for scoliosis. Important standing only on the left leg & sport - karate, taekwondo, aikido, kung fu, yoga from first years of child's life (Fig. 12).



Discussion and Conclusions

Many of older ill people have the symptoms of hips arthrosis, many of youths persons have scoliosis. The prophylaxis of dysplasia of hips is very important, because it is the first step in prevention of hip arthrosis in adults. Proper carrying of children is very important - but till now not sufficient "admitted and understandable" by many parents in the world, mostly in Europe.

Already 25 years I present the biomechanical etiology of the so-called idiopathic scoliosis. The explanation in Poland is also "not sufficient admitted and not understandable". I hope - this article will "one important input / step in new knowledge" of both problems and will be transmitted from Canada to other countries.

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