

Horse Rider's Case Study

Posture, Stretching & Bodywork

Judith came for sessions in December 2009 to relieve pain and to help improve her riding.

Recent History: Torn right Achilles tendon January 2008
Broken left foot May 2008

Previous History: Crushed neck vertebrae C3-C5 age 9
Lumber arthritis – attributed by riding accident age 15

Medication: None
Doctor's care: No

ASSESSMENT

Head: Tilted to the right
Shoulder: Right higher and forward
Hips: Left hip higher and forward
Right hip higher and forward (lying)
Knees: Left higher (lying)
Ankle: Left higher (lying)
Feet: Right turned out (lying)
Right leg long (lying)
Left waist collapsed



Please note that the programme limited the angle of the lines

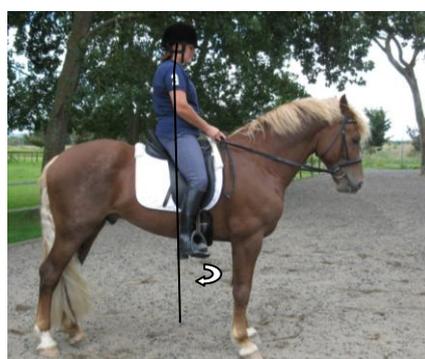


↑ White arrows showing anterior tilt both on the horse and standing. Left leg and knee forward – this is most likely due to Judith's left hip being forward, head forward, right toe further out than left. →



↑ If we compare on and off the horse, we can see the same postural lines and torsions (although we cannot see her hips in this photo). We could also compare weight distribution when standing and sitting on and off the horse – it looks like Judith has more weight down her left leg standing and on her left seat bone on the horse.

Unfortunately, Henry is not standing square. However, you can see that even though the opposite hind is back in each photo that Judith is sitting to the right of the saddle and that the right shoulder is higher and her hip is collapsed on the left which is the same in her standing posture.



SESSION 1 – 21/12/09

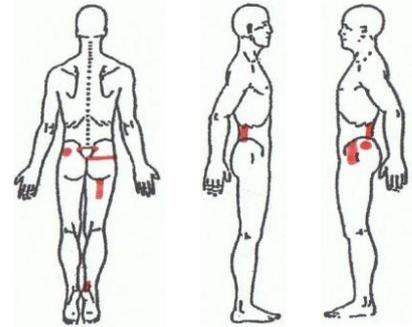
Areas of pain

Right leg: Top third hamstrings along linea aspera and tensor fascia latae

Right foot: Archilles tendon - pain 8/10; lateral (outer) edge 5th and 4th metatarsal pain 5/10

Left foot: 1st metatarsal pain 5/10

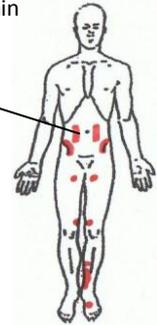
Left leg: Medial (inner) Archilles tendon and medial edge of lower half of calf muscles pain 8/10



Pain 10/10 in right calf cramping at night and disturbing sleep

Red showing areas of pain

- Worked with straightening hips with orthobionomy and releasing psoas, a prime mover when walking and bending the body: left psoas very sore - pain 7/10 including insertion; right psoas pain 6/10 not so sore including insertion
- Worked with releasing both ankles with orthobionomy



Please note: unless stated releases were done using remedial massage to specific muscles

End of Session

Hips even – in the photos below you can see Judith's longer leg in the left photo and the change after adjusting the hips



Self-Help

Pilates massage ball for calves and feet.

SESSION 2 – 28/12/09

Feedback: not so much cramping at night in right calf, pain down 7/10 was 10/10 and better sleep. Not much increased flexibility. Right foot pain down to 3/10

- Shooting pain across left foot – pain 9/10
- Focused on left foot to help ease pain and reworked the calf muscles, Archilles tendon and ankles

End of Session

- Pilates ball exercises to thighs (no pain)and buttocks: pain 6-7/10
- Check in the following day – no shooting pain

SESSION 3 – 14/01/10

Feedback: ball exercises were more beneficial than 10 months of physio and easier pain wise.

After last session: felt better through her back, pain down and more improvement using the ball. Right Archilles tendon: pain down to 4/10 was 8/10

Orthobionomy again to all metatarsals, toes and ankles. General knee releases and hip work to realign hips again.

End of Session

Hips even; feet feel freer

Self-Help

Continue with ball exercises

SESSION 4 – 20/01/10

Feedback: good rides – much more energy to ride yesterday. (Rode 5 days this week) Definitely feeling better, improvement in energy; physically feeling better not as stiff, no physical stress, less stiffness in her back due to buttock releases with the pilates ball and mentally more positive.

Calves are achy – probably due to riding

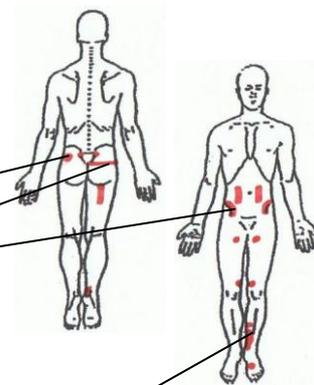
Right calf pain: 5/10

Left calf pain: 4/10

Right foot: no pain

Left foot: no pain; no shooting pain

- Focus right foot out
- Left medial thigh rotators tight – turns left foot in
- Right lateral thigh rotators tight – turns right foot out
- Refocus on hip flexors: psoas and iliacus
- Iliacus, hip flexors: pain – right iliacus 9/10, left between 4-7/10
- Craniosacral therapy to pelvis and sacrum
- Refocus right Archilles tendon: pain 3-4/10 then 0/10 (originally pain 8/10)
- Refocus left leg medial edge lower 1/3 of calf muscles was 8/10 down to 3-7/10



End of session

Pilates ball exercises to lateral hips and back against a wall.

SESSION 5 – 26/01/10

Feedback: Just been doing the ball rolling to my feet. My back is better – not sore or tight through top of shoulders. Only ridden twice this week.

Right calf: pain 0/10

Left calf: pain 0/10

Left foot: a little pain rolling the ball – feeling a bit stiff 2-3/10

Sitting trot

I feel like I'm gonna fall off, can't get legs down, feel insecure in saddle, no depth in saddle.

- Orthobionomy to lumbar reflex points L1 – L5, L2 sore 4/10
- Released thoracic back using the ball lying on massage table
- Refocused on hip flexors and releasing thigh rotators

Self-Help

Continue with ball exercises



SESSION 6 – 08/02/10

Feedback: Body is fantastic. Used the ball for knots in my shoulders and for my hips and buttocks.

Dressage Instructor, Coralie Williams said “never seen you riding so well”.

- Pilates ball used to release psoas which can cause anterior tilt of the pelvis (bum sticking out) – very sore 9/10 psoas (points just above the buttocks where muscles attach and where the pilates balls go for this stretch).
- Released thoracic back again using the ball lying on massage table
- Released thigh rotators again
- Started working on releasing the inner thighs

Introduced breathing into the abdomen and using out breath to start strengthening core.

SESSION 7 – 15/02/10

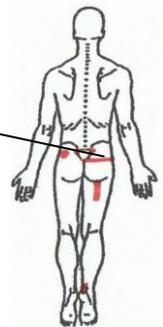
Feedback: 3 days of riding at the dressage champs. Sore lower back – this could indicate that she is not using her core muscles and using her back muscles and psoas.

- Refocused on iliacus: Right pain 4/10 was 8/10. Left is sore
- Left buttock medial rotators – sore insertion

This could indicate that Judith is riding unevenly. Her strong side is the right side and weak side is her left side. Need to strengthen left side.

Psoas: right shooting pain into buttock - worked piriformis which was sore but relieved the shooting pain.

Note: Shooting pain or sciatica can come from the piriformis muscle being tight; it can also be from a tight psoas muscle or subluxation or a problem with lumbar vertebrae (3 or 4). Joint issues can be tested and referred on.



SESSION 8– 22/02/10

Feedback: Good after the last session. Right Archilles tendon slightly strained through overuse – sore 6-7/10.

- Focused on releasing right peronius and Archilles tendon
- Started working on releasing quadratus lumborum (QL) – this muscle contributes to a collapsed hip
- Left QL very sore the side that is shorter; right sore
- Refocused on right piriformis – muscle body more sore than the insertion
- Refocused on inner thigh muscles – adductor magnus insertion both very sore

End of session

- Stretches for lateral side of the body – crossing foot over the other foot and stretching the body away. Right foot difficult to keep on the ground with the left foot crossed over.
- Invited Judith to try core breathing whilst riding



Valee More working with Judith, applying orthobionomy

I did another 3 sessions with Judith a week apart

Feedback: I'm loving the ball, it deflates muscle tension and pain. Able to do core breathing whilst walking.

Summary

New feedback 12/08/10

“Gosh, when I read back over the case study I had forgotten how bad I was. Especially with the back pain and leg cramping. My back has been amazingly good since and my legs are not really giving me any strife at all. I am sitting trot again. It does help to have a lovely soft horse as my new one is”.

- The focus for Judith was to help heal and relieve chronic pain in her right Achilles tendon – tendons take time to heal and require stretching, but it is important never to overstretch and therefore one has to find one’s stretching (and muscle strengthening) threshold. The other major focus was helping to relieve the chronic pain in her left foot after it had been broken by unwinding the tissues and mobilising the joints.
- The secondary focus was to help Judith ride more comfortably
- Judith’s body became more mobile and was much, much freer of pain. She also has tools that she can use as and when she needs them to keep her muscles free.
- The neck wasn’t addressed and work could have been done there to address her posture although Judith can use the pilates ball on her mid shoulder muscles.
- I also didn’t address the forward right shoulder which you can see in her horse photo.
- I did a lot of work on the hip flexors to help straighten her and release the lumbar spine (anterior tilt).
- More work could have been done on the left QL as it was tight and short, and also through the inner thigh which may have helped with her sitting trot.
- I needed to also release other lateral thigh rotators such as the adductors (inner thigh) to help resolve the right toe out. However, other contributors could be due to the lateral thigh rotators being stronger and being used in a repetitive way and also a built up anterior tibialis which is used whilst driving using the accelerator and some of the rotation coming from the knee.
- I needed to follow up on her sitting trot and investigate what was happening, although that seems to have resolved now.

Other considerations

It is important to be aware of how we use our body especially when it is one sided use. Unfortunately, some things we can’t avoid like getting in and out of the car the same side and driving which also twists the hips, however, some things like getting in the same side of the bed, bending down to pick up heavy objects, how we sit whilst relaxing, working, in our car; is our computer screen not straight etc... can be modified with awareness and knowledge.

Recommendations for horse riders and people in general

- Learn to stretch tight muscles and strengthen weak muscles
- Never overstretch or cause pain when stretching – optimum stretching time is 30 seconds
- Know and use correct posture sitting and standing – does your car seat, sofa and bed support your back
- Stretch during and after doing repetitive work such as using a computer or bending over
- Stretch during the warm up whilst riding and especially after riding
- Receive bodywork after injury as the therapist will help to relieve pain, realign tissues that are out of alignment and help mobilisation. (It is very important to realign joints that have been injured as injury could contribute to arthritis later on or worse an operation.)
- Receive bodywork if you are in chronic muscular pain especially if you have had it a long time
- Treat acute injuries with rest and ice; Reiki is good too as it has shown that it can help accelerate the healing process