

Patty's PT Tips

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"Neuropathy and Spasticity-Bad Actors in the Same Neighborhood"

Part Two

Now that you have more of an understanding of what is happening in your body, let's figure out how to "tame the beast". Spasticity and spasm are commonly treated with medications, physical and occupational therapy. These will include lifestyle modifications and require very individualized solutions to be most effective. It most likely will require advocating for yourself and educating yourself on your options for specific interventions. It will require consistent communication with your providers, so they are aware of what is or is not working for you to diminish your symptoms. Controlling spasticity helps you to take back control of your life!

Medications: Oral: Baclofen, Benzodiazepines, Dantrolene sodium, Imidazolines, Gabapentin

Medications for musculoskeletal pain may also help-i.e. Analgesic medications, NSAIDs

Bowel and Bladder management: Consultation with a urologist

Botox injections-could be very helpful but are limited in their duration and frequency of use. They are injected into very specific areas and last up to 12-16 weeks. Only a limited number of injections are allowed.

Surgery: Intrathecal Baclofen pump. It releases a steady dose of baclofen directly into the spinal fluid. It is used rarely and for more extreme forms of spasticity.

Selective Dorsal Root Rhizotomy-is used for only the most severe forms of spasticity affecting the lower extremities. It rebalances the electrical signals sent to the spinal cord by cutting selective nerve roots. It would be the most invasive form of intervention so is usually recommended when all other interventions have failed.

All of the above interventions should be paired with physical and occupational therapy.

Physical Therapy Interventions: Bracing, Neuromuscular reeducation, Functional Electrical Stimulation, Gait training, Home Exercise education for stretching and strengthening the appropriate muscle groups.

Occupational Therapy Interventions: Splinting, Home modifications, Work simplifications/modifications, appropriate recommendations for adaptive equipment that will reduce the demands on the spastic muscles and enhance the better functioning muscles.

Wellness and pain management play a vital role in the management of spasticity as well.

These interventions can be helpful and this list may not be exhaustive:

- Meditation/mindfulness training/biofeedback
- Community or online exercise classes
- Massage or self-massage
- Consultation with integrative medicine specialists
- Nutrition therapy

- Smoking cessation
- Sleep Hygiene
- Aquatic therapy
- Yoga, chair yoga, tai chi
- Behavioral medicine approaches/counseling
- Acupuncture
- Application of heat or cold
- Vibration application to tight muscles
- Even a shift away from tight fitting clothing or modifying a brace

Make a plan.

- Set some goals. What would you do better if your spasticity was less? A PT or OT can help with this step.
- Track your symptoms as you try new things. Don't overwhelm your system with too many changes too fast. You will be your best researcher and data collector.
- You will be the one who best senses what **is** working and what is **not** working.
- Cut yourself some slack because every day is different with different influences.

Celebrate your progress, no matter how small.