## Swinging on bars eased my agonising back pain

Doctors could not relieve the pain caused by scoliosis that had dogged her since her teenage years, so Anna Russell turned to a controversial new treatment. ADRIAN LEE tells her story

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BACK TO BASICS: Using wall bars to do special exercises, Anna trained her muscles to support her curved spine

HER muscles ached so badly that Anna Russell wondered if she had taken leave of her senses. The 25-year-old solicitor, who had been relaxing on a sun-kissed beach just days earlier, had cut short a holiday of a lifetime in Malaysia to try to end the back pain that had plagued her since she was a teenager.

Anna suffers from scoliosis, a pronounced curvature of the spine. The condition is normally treated with a major operation in which metal rods are inserted either side of the spine or by wearing a back brace.

But for thousands of patients like Anna whose form of scoliosis is not considered sufficiently severe for surgery, little could be done to end the misery.

Now the Scoliosis SOS clinic in Martlesham, Suffolk, is the first in the UK to use a controversial technique pioneered in Germany. Instead of targeting the spine directly, it focuses on improving the surrounding muscles by intensive physiotherapy, which patients can later build into their everyday life.

Anna's pain had made her so desperate that she barely hesitated before deciding to fly home to start the four-week private course, costing £2,400.

"I'd been travelling for two months in Bali and Malaysia while I waited for a new job to start and had been planning to spend another month away," says Anna, who has a distinctive C-shaped curvature in her spine. "I felt that being at the clinic was more worthwhile."

She admits that she found the strict regime, involving six hours of exercises every day, punishing.

"It was hard work and so intense that I ended every day feeling exhausted," she says. "It involved lots of stretching on wall bars and other exercises. At first it was painful because I was using some muscle groups for the first time. That soon eased and by the end of my time there I could already feel the benefits.

"My posture is much better, my shoulders more level and my spine looks straighter. Even my back doesn't ache." Anna is now planning to have wall bars fitted at her flat in north London so she can continue with the exercises for 30 minutes a day.

Up to three per cent of the population suffers from scoliosis, although some people have very mild forms which have little impact on their lives.

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Scoliosis often sets in at about the age of eight but may go unnoticed as it rarely causes problems in early years. Parents do, however, sometimes notice an uneven waist or shoulders.

Some people are born with the condition but it usually develops in the early teens. For unknown reasons about 70 per cent of scoliosis sufferers are young women. In some cases the spine also rotates, affecting breathing by squeezing on the lungs.

"I was very active at school doing lots of sport but although I hadn't suffered any injury I was getting constant back pain," says Anna, who was diagnosed when she was 14.

"I was sent to a masseur, who noticed that my spine wasn't straight. Then I had X-rays, which looked shocking because the curvature was so obvious. It affected my posture and I became quite body-conscious."

The treatment used at the Scoliosis SOS clinic is called the Schroth method and it aims to re-educate the back muscles to hold the spine in the correct position.

The technique is popular on the Continent but some experts in the UK claim there is no evidence to prove that the exercises work.

Dr Olga Gronowska-Szczecina from the clinic says: "In scoliosis cases the spine is bent and twisted. There is nothing we can do about that but we can improve the muscles by stretching them to support the spine. We are not straightening the spine."

She claims that nine out of 10 patients experience an improvement after treatment and it will be maintained only if they continue to exercise.

"People have come to us in very severe pain which has been completely eliminated after four weeks here," says Polish-born Dr Gronowska-Szczecina who was trained in Spain where the treatment is popular. "They also leave with better lung function."

She adds: "In Europe it is more usual to treat scoliosis with exercises than surgery. There are no side effects and none of the risks that are associated with the operation. However, there will always be a few cases where the curvature is so severe that surgery is needed."

BUT David Harrison, lead clinician in the spinal deformity unit at the Royal National Orthopaedic Hospital in Stanmore, Middlesex, where about 1,000 scoliosis operations are performed each year, says there is no evidence that exercise alone is an effective treatment and that good physiotherapy is available on the National Health Service.

"Exercise in general and some specific exercise to preserve the mobility of the spine, is recommended but there is no good evidence that shows scoliosis will regress or become more stable through exercise alone," he says.

Because of the complexities, surgery is only advised for the most serious cases. The operation is considered as major as open-heart surgery but can permanently straighten the spine, says Harrison.

One problem is that schoolchildren are no longer regularly checked so the condition is often discovered later in life when the curvature increases. The optimum age for operating is between 14 and 17 years old when the spine is still flexible. Harrison is calling for screening to be reintroduced.

For more information contact Scoliosis SOS on 01394 389 670/ www.scoliosissos.com; or the Scoliosis Association UK on 020 8964 1166/www.sauk.org.uk

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