

Physical therapy

Rheumatoid diseases

Rheumatoid arthritis

Individual approach to accommodate to current condition

Acute stage: cryotherapy

liquid nitrogen- locally, whole body

In remissions: parafin wraps

whirlpool, aquatic therapy

ultrasound, laser

Rheumatoid arthritis

Physical rest

Positioning in a sling

Thermoplastic splints

Functional splinting

Passive movements

Traction, relieving tractions

Cervical soft tissue relieving tractions

Relaxation

Joint mobilisation

Isometric contractions

Rheumatoid arthritis

Gradually more active movements

- to strengthen atrophic muscles

Active exercise: muscle tone, ROM, muscle strength

Gait training (crutches)

Aerobic fitness training

Occupational therapy

Balneology

Ancylosing spondylitis

Daily exercise program- daily routine at least 30 minutes/day

Early education about the disease

Cooperation of the patient

Physical therapy is fundamental

Active movements every day

The aim- to slow down spinal ancylosing process
to prevent kyphotic deformity

Ancylosing spondylitis

Spinal and thoracic mobility

Muscle balance and ROM

Postural corrections

Maximum breathing capacity

Patient's overall fitness

Ancylosing spondylitis

1. Stage of high level activity:

Positioning

Passive exercise

Breathing exercise

Soft tissue techniques

Active exercise

Ancyllosing spondylitis

2. Stage of low level activity:

Postural reeducation

Gentle mobilisation of sacroiliacal joints

Spine and rib mobilisations

Release of shortened muscles

Chest breathing

Deep spine exercise

General relaxation

Ancylousing spondylitis

2. Stage of low level activity:

Maintenance of optimal mobility

Stretching, exercise into backward bending

Somatognostic training

Swing movements

Using of balls, wands, resistive bands, wall bars

Group exercise

Physical therapy:

Magnetic field application, ultrasound, electrotherapy

Balneotherapy