OSTEOPATHIC CONSIDERATIONS IN THE GERIATRIC PATIENT

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http://housegirlhaley.files.wordpress.com/2012/09/old-people.jpeg
LEARNING OBJECTIVES

By the end of this session, learners will be able to:

- Recognize the specific osteopathic issues that relate to the geriatric population
- Perform commonly utilized techniques for the geriatric population
SPECIFIC CONCERNS IN THE ELDERLY

- Pathological fractures
- Deconditioning
- Difficulty with passive motion
- Impaired cognition
- Polypharmacy
GOALS OF MANIPULATION

- Reduce lymphatic congestion
- Decrease somatic (mechanical) dysfunctions
- Balance autonomies (sympathetics and parasympathetics)
INCORPORATING OMM INTO YOUR PHYSICAL EXAM

- With the patient sitting
  + Auscultate heart and lungs
  + Evaluate the thoracic and lumbar spine
  + Evaluate upper extremity range of motion
- With the patient supine
  + Auscultate and palpate the abdomen (including diaphragm, liver and spleen)
  + Evaluate the innominates (ASIS Compression) and sacrum (sacral inhibition or rocking)
- From the head of the table with patient reclined/supine
  + Evaluate the cranial motion, cervical segments and ribs
- From the foot of the table with patient reclined/supine
  + Evaluate leg length, internal and external rotation

Focus your OMM exam just as you do the rest of your medical exam.
COMMONLY UTILIZED TECHNIQUES IN THE GERIATRIC OFFICE SETTING

- **Head and Neck**
  - OA release
  - Auricular Drainage
  - Cervical Myofascial Release

- **Low Back Pain**
  - Psoas Counterstrain
  - Lumbar Muscle Energy
  - Innominate Muscle Energy
  - Piriformis Muscle Energy
Potential indications:
Tension Headache
URI
Vertigo
AURICULAR DRAINAGE

Potential indications:
Eustachian tube dysfunction resulting in:
Tinnitus
Vertigo
Decreased Hearing
CERVICAL MYOFASCIAL RELEASE

Potential Indications:
- Somatic Dysfunction of the neck
- Neck Pain
- Tension Headache
- Upper Back Pain
- Shoulder Pain
TREATMENT OF LOW BACK PAIN

- **2 minute treatment**
  - Psoas muscle- CS
  - Lumbar spine- ME

- **5 minute treatment**
  - Innominate dysfunction- ME
  - Sacral dysfunction- Inhibition

- **Extended treatment**
  - Sacral– ME
  - Piriformis- ME, CS
  - Gluteal mm- CS, ME
  - Diaphragm- doming
  - Thoracic and lumbar: ME, MFR (and/or HVLA)
  - Ganglion restriction: MFR
  - Chapman’s reflexes for corresponding visceral dysfunctions
Potential Indications:
Somatic dysfunction of the psoas associated with
LBP
Groin Pain
Hip Pain
Sacral Dysfunction
Sciatica

Psoas tenderpoint medial to the ASIS
Potential Indications:

Somatic Dysfunction of the thoracic and lumbar regions associated with back pain, viscero-somatic reflexes, rib dysfunction
Potential Indications:
Somatic dysfunction of the piriformis associated with Hip Pain
Sacral Dysfunction
Sciatica
INNOMINATE MUSCLE ENERGY

Potential Indications:
- Somatic dysfunction of the innominate associated with LBP
- Hip Pain
- Sacral Dysfunction
- Sciatica
INNOMINATE MUSCLE ENERGY

Potential Indications:
- Somatic dysfunction of the innominate associated with LBP
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FINAL NOTE

- Focus your structural examination on the presenting illness
- Many osteopathic techniques can be quickly and safely applied to the geriatric population