



THE GRAND CANYON - USA



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How Does Diabetes Affect Healing Times?

It can be surprising to many people that one of the questions their physiotherapist will ask them when assessing an injury is 'Do you have diabetes?'. This may seem more like an issue for your doctor than your physiotherapist!

The reason why your therapist is asking is that diabetes can actually have quite a large effect on healing times of body tissues. At times, injuries can take up to twice as long to heal properly in patients with diabetes and your physiotherapist will need to update their training and rehabilitation programs to factor this in.

How does this happen?

From what most people know about diabetes, it seems strange that it would affect healing times. However, the more you understand about the processes that cause diabetes the more sense it makes.

It all comes down to blood flow. Our veins and arteries are made of flexible and elastic tissues that expand and contract when necessary to allow the optimum amount of blood flow to an area. Sometimes it is better for tissues to have less blood flow and other times they require more. This flexibility of the blood vessels is essential for controlling and modulating the amount of blood to an area at any given time.

When someone has diabetes, they have an excess of glucose in their blood. This occurs because the body is unable to regulate insulin, which is

used to break down glucose and provide the body with energy. This can be due to an autoimmune disorder that affects the cells that make insulin (Type I) or insulin resistance due to dietary choices (Type II). Over time, this excess glucose sticks to the blood vessel walls and they can become harder, losing their elasticity and ability to change size rapidly. Primarily this will affect the ability of the blood vessel to expand reducing the amount of blood flow available to the tissues. Diabetes can also affect the health of the nerves in the body, particularly in the hands and feet. This can result in poor sensation, which means that the person may not realise when the injury is being further injured.

What does this mean for recovery times?

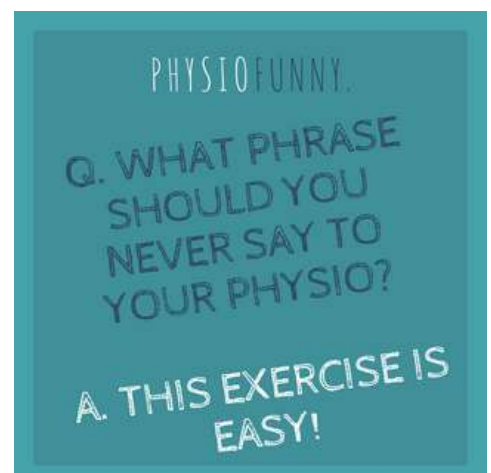
While not everyone with diabetes will have this issue, it is something that needs to be made known to your physiotherapist so they can be aware of the possibility. These changes are more likely to occur after having diabetes for a long period of time and if it is poorly managed.

Ask your physiotherapist for more information on how diabetes may be affecting your recovery and for tips to ensure the best outcomes possible.



Brain Teasers

What has six faces, but does not wear makeup, has twenty-one eyes, but cannot see?



Focus On Shoulder Dislocations

The shoulder is a fascinating joint with incredible flexibility. It is connected to the body via a complex system of muscles and ligaments. Most of the other joints in the body are very stable, thanks to the structure of the bones and ligaments surrounding them. However, the shoulder has so much movement and flexibility that stability is reduced to allow for this. Unfortunately, this increased flexibility means that the shoulder is more vulnerable to joint dislocations.

What is a dislocation and how does it happen?

As the name suggests, a dislocated shoulder is where the head of the upper arm moves out of its normal anatomical position to sit outside of the shoulder socket joint. Some people have more flexible joints than others and will, unfortunately, have joints that move out of

position without much force. Other people might never dislocate their shoulders unless they experience a traumatic injury that forces it out of place. The shoulder can dislocate in many different directions, the most common being anterior or forwards. This usually occurs when the arm is raised and forced backward in a 'stop sign' position.

What to do if this happens

The first time a shoulder dislocates is usually the most serious. If the shoulder doesn't just go back in by itself (spontaneous relocation), then someone will need to help to put it back in. This needs to be done by a professional as they must be able to assess what type of dislocation has occurred, and often an X-ray needs to be taken before the relocation happens.

A small fracture can actually occur as the shoulder is being put into place, which is why it is so important to have a professional perform the procedure with X-Ray guidance if necessary.

How can physiotherapy help?

Following a dislocation, your physiotherapist can advise on how to allow the best healing for the shoulder. It is essential to keep the shoulder protected for a period to allow any damaged structures to heal as well as they can.

After this, a muscle-strengthening and stabilisation program can begin. This is aimed at helping the muscles around the shoulder to provide further stability and prevent future dislocations.

The information in this newsletter is not a replacement for proper medical advice. Always see a medical professional for an assessment of your condition.



Answers: Dice

Haloumi, Blueberry and Watermelon Salad

Ingredients:

- 200g Fresh Haloumi
- 1/4 Seedless Watermelon
- 100g Fresh Blueberries
- 1 Handful of Fresh Mint Leaves
- 2 Tbsp. Olive Oil
- 1 Tbsp. Balsamic Glaze



1. Place a frying pan on medium heat and add 1 Tbsp. of olive oil. Chop haloumi into thin slices and place on frying pan. Cook for 2-3 minutes and then turn. Haloumi pieces should be lightly browned and crispy on either side
2. Cut watermelon into large slices, removing skin and seeds. Increase heat to high and add watermelon pieces to frying pan. Drizzle watermelon pieces with balsamic glaze and cook either side for 1-2 minutes. Remove from heat, add blueberries to pan and cook until soft.
3. Mix all cooked ingredients together gently in a large mixing bowl, drain excess liquid and allow to cool.

Garnish with mint and serve as a healthy side dish.



For Appointments Call

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