



Controlling knee pain without medications or surgery

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- ▶2017-present: Olympic Medical Home Health
- ▶2014-2017: Crestwood and Sequim Health and Rehab
- ▶2002-2014: Independence Through PT, Owner Sequim, WA
- ▶2006-2011: University of Puget Sound, Adjunct Faculty
- ▶2007: Clinical Excellence Award, WA State Physical Therapy
- ▶2006: Doctorate in PT, Univ of Puget Sound, Tacoma, WA
- ▶1997-2002: Swelling Disorders Clinic developed
Olympic Medical Center, Port Angeles, WA
- ▶May 1999: Földi Clinic CDP Certification, Hinterzarten, Germany
- ▶1993: Masters in PT , University of Puget Sound, Tacoma, WA
- ▶1986: Bachelors of Music Therapy, Willamette U, Salem, OR

Disclaimer:

I am providing information for you to use if you wish. I am not acting as your physical therapist. You should continue with your medical team and definitely not stop any medications without your healthcare providers assistance.

The place where two bones come together is called a joint. When the bones are not fitting together properly they can break down the ends of the bones which is called degenerative joint disease or osteoarthritis or arthritis.

When a joint breaks down by creating divots or mountains on the ends of the bone it is thought that the only thing that can resolve knee pain is surgery to replace damaged bone with metal

It makes me sad that I have seen many people over the years who still have knee pain after surgery despite having a metal knee

My question is this: If all of the pain comes from the bone breaking down with arthritis how can there be pain if it is now a metal knee?

Many patients over the years have learned specific treatments that reduce joint pain such as knee pain.

The joint is still broken down but the knee pain is gone by improving joint alignment or reducing swelling

Once you improve joint alignment so the bones fit together better, and/or reduce swelling problems the pain may be gone, but to maintain this for long term you need to continue with those protocols.

KNEE PAIN CAUSED
BY
ALIGNMENT
ABNORMALITIES OF
THE SKELETON



POOR ALIGNMENT OF THE SKELETON CAN CAUSE BREAKDOWN OF ANY JOINT SUCH AS THE KNEE JOINT



Before and after treatment to improve skeletal alignment. Note shoulders are more aligned



Notice how the natural curve of the spine comes back

- Before and after treatment to improve skeletal alignment

Treatment for abnormal skeletal and therefore joint alignment

Strain and Counter Strain is a highly-specialized stretching protocol developed by Lawrence Jones, D.O., used to improve skeletal alignment.

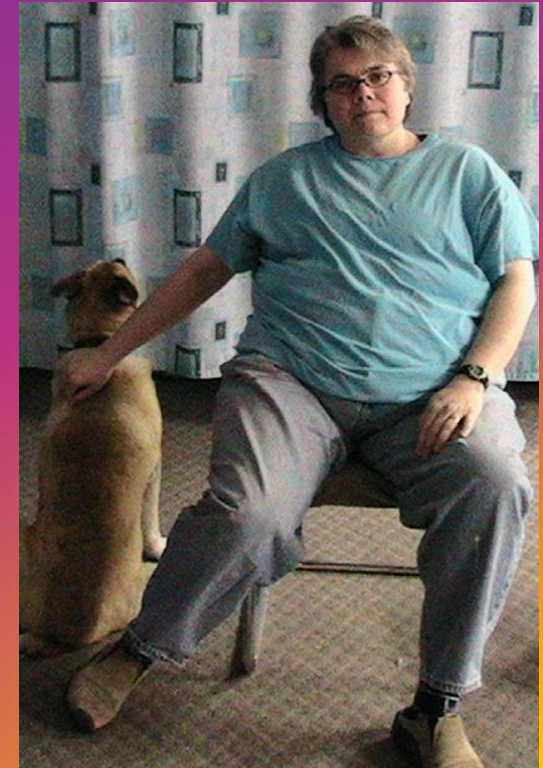
Simple home program developed by Loraine called Releasing Joint Restrictions is based on this home program

Test for Knee pain

- Establish a baseline or Pretest:
- Find movement or position that makes the knee hurt the worst
- 0/10=none 10/10=worst
- How do you feel in sitting?
- How do you feel in standing?
- How do you feel marching in place?
- How do you feel as you sit down?

Stretching for knee pain: “horse and thinker”

- Sit down
- Pull knees and feet apart as far as able
- Bend forward at hips (no for hip replacement)
- Rest forearm on Left thigh as if in a THINKER pose (nose toward knee even though photo does not show this)
- Stay for 90 seconds



Test knee pain after RX

- After 90 seconds:
- What is the pain level now in each position:
- Sitting
- Standing
- Marching in place
- As you sit down
- If the pain changed this occurred due to the stretch you just did

Stretching for knee pain: “horse and thinker”

- Sit down
- Pull knees and feet apart as far as able
- Bend forward at hips (no for hip replacement)
- Rest forearm on Right thigh THINKER pose (nose toward knee even though photo does not show this)
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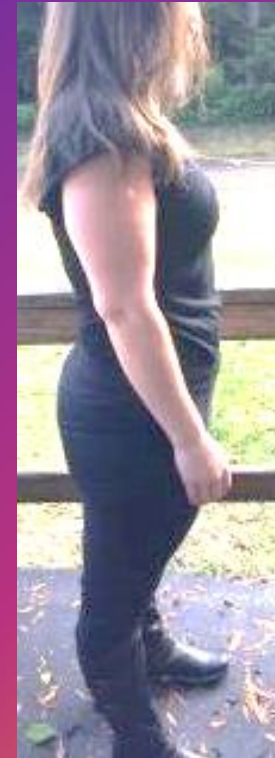
Test knee pain after RX

- After 90 seconds
- What is the pain level now in each:
 - Sitting
 - Standing
 - Marching in place
 - Sitting down
- If the pain changed this occurred due to the stretch you just did

Maintaining Improved Alignment

To prevent pain from poor alignment from returning:

Maintain good posture-keep joints in neutral positions



**POOR POSTURE CAN LEAD TO SKELETAL ALIGNMENT
ABNORMALITY AND EVENTUALLY BREAK DOWN KNEE
JOINT**



**IT IS VERY HARD
ON A KNEE JOINT
TO BEND BACKWARD**



Maintaining Improved Alignment

To prevent pain from poor alignment from returning:

Learn to fire the pelvic floor (Kegel exercises) while changing positions

Try to hold back gas or urine while changing positions

Be careful of doing too much too soon when building any muscle, or you can create worse incontinence with the pelvic floor

Lorraine has worked since 1993 as a generalist physical therapist

When she came to work at OMC in 1997 she was introduced to specialized treatment of the lymphatic system used to treat patients who developed lymphedema from cancer treatments

She started experimenting with these techniques on swelling from other causes

Patient examples of those
treated in the physical therapy
clinic using
lymphatic system treatments
to manage swelling problems

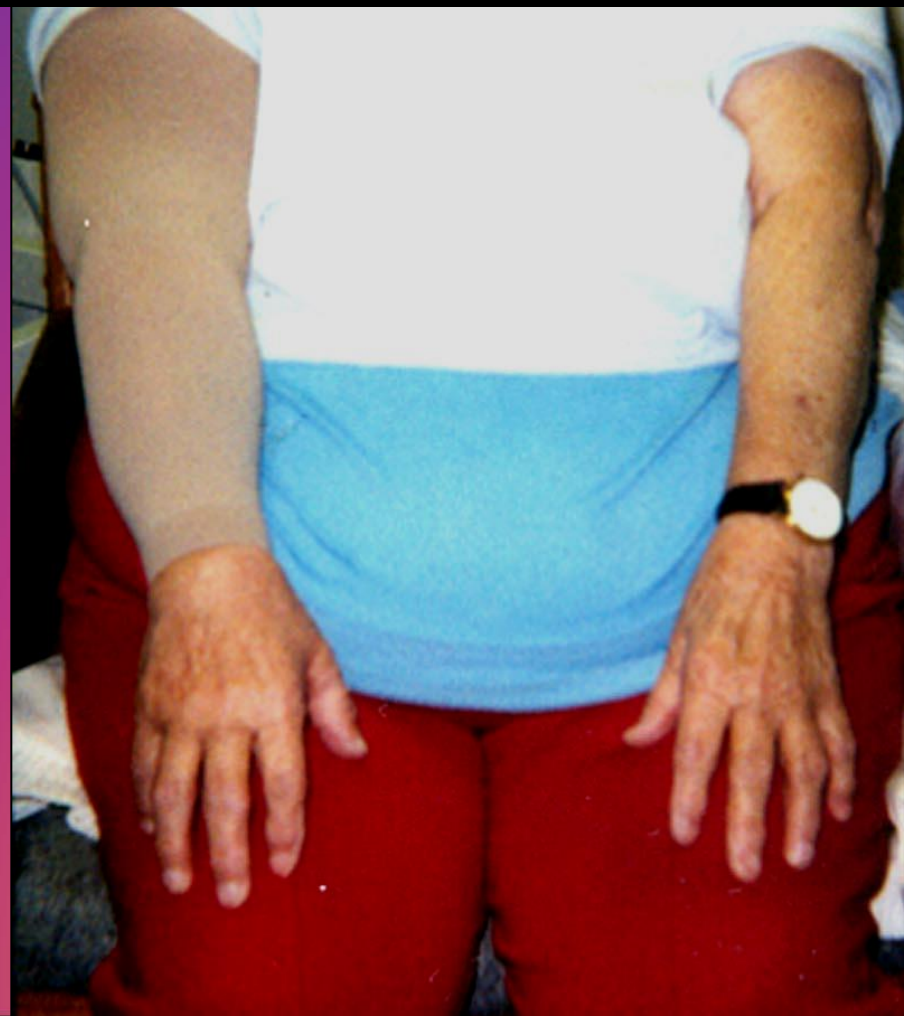


**After treatment, note the reduction of swelling--
visualization of the hand bones, improved skin color, no
indentations at the wrist or back of the hand.**

8-17-98



10-27-98



Patient lost 40# after 4w of Treatment (RX) using
Manual Lymphatic Drainage (MLD) massage
technique and lymphedema compression
bandaging



Before Rx



After Rx
in Elvarex
Stockings



Patient with peripheral neuropathy which is pain + numbness and tingling

Dermatoliposclerosis = skin with fatty and hardening deposits

With lymphatic Rx completed in 2 weeks

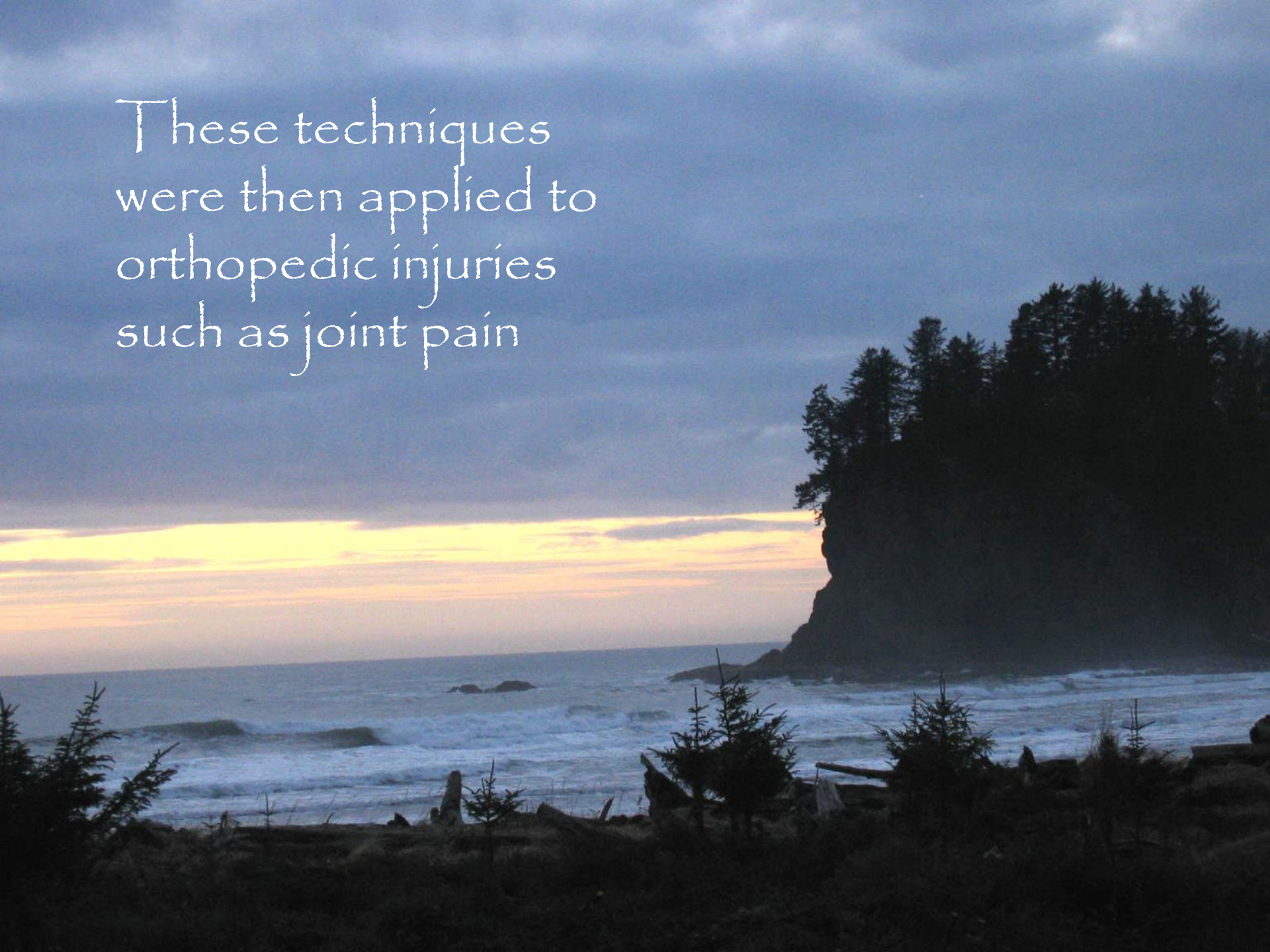
She was pain free

Ignoring Skin tear which occurred due to hitting wheelchair

However, note improved skin quality



These techniques
were then applied to
orthopedic injuries
such as joint pain



Case Study

- 78 y/o female
- R knee pain
 - 10/10
- R hip pain 10/10
- Avascular necrosis (dead hip bone)
 - After "Horse and Thinker" right hip pain 0/10 despite dead bone
- Unable to do hip surgery due to swelling
- Blister right lower leg



Case Study: L leg bandaging RX completed
L leg wearing Over-The-Counter compression stocking;
R leg coming out of wraps after 4 Days
Girth lost: 5 cm (almost 2") each calf
Wrinkles in Right leg from foam are a good sign
Indicates skin moving & lymphatics are now working
Notice improved color of right leg



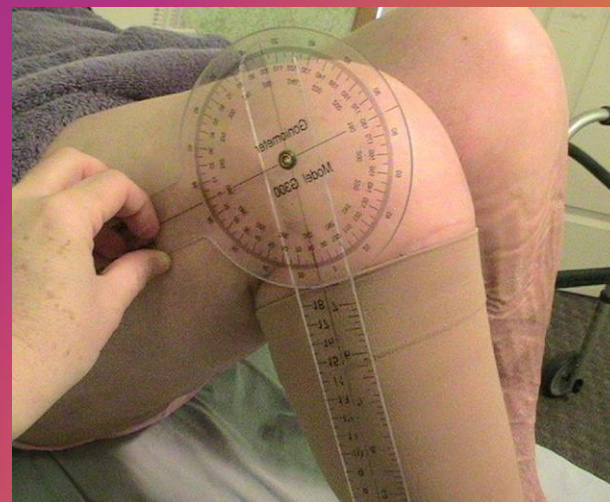
ROM=Range
of Motion
Higher
number
better




Bending R knee as much as able shows ROM 67 degrees
of bend 10/10 R knee pain. Note red color of lower leg




2 Days in bandages
ROM 95 5/10 better color



4 Days in compression sock
ROM 100 0/10

- 
- Due to benefit with orthopedic patients in the clinic, Loraine performed doctoral research to resolve knee pain and perhaps prevent Total Knee Replacement (TKR)

The background of the slide is a scenic photograph of a waterfront. In the foreground, there is a dark, pebbly beach. The middle ground shows a body of water with several wooden pilings or posts extending into it. In the distance, a town with buildings and a church spire is visible on the left, and a large body of water extends to the right under a blue sky with light clouds.

Managing Knee Pain Due To Venous And Lymphatic Congestion With A Home Program Of Manual Lymphatic Drainage (MLD) And Over-the-counter (OTC) Compression Stockings

**Lorraine Lovejoy-Evans, PT, DPT, CLT-Földi
Kathie Hummel-Berry, PT, PhD**

Study Components

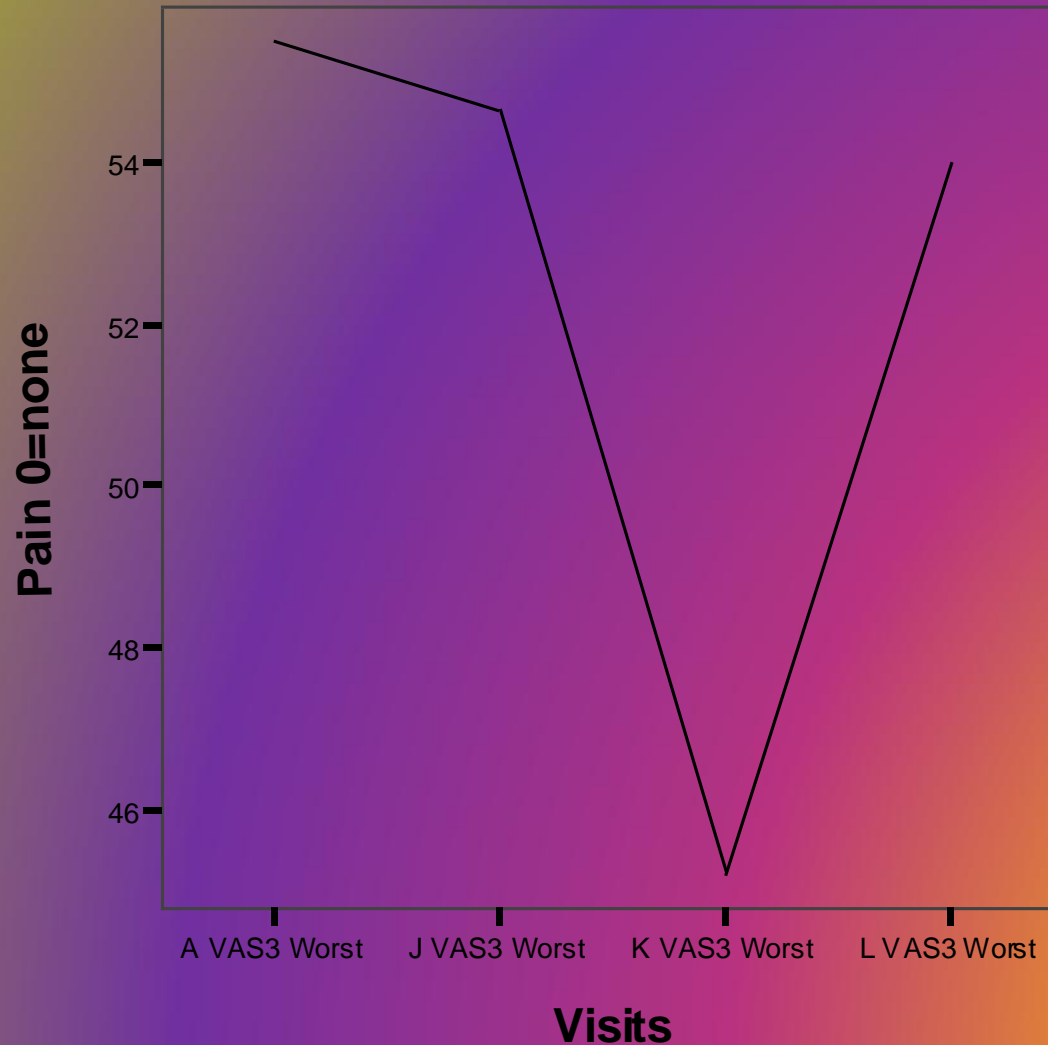
- ❖ 3 measurement visits used to establish baseline girth/ROM until stable-then enrolled in study
 - ❖ Girth within .5 cm/ROM within 5 degrees
- ❖ Measurements repeated after each 2-week phase of study
- ❖ 2 Weeks exercise/stretching 2x/day 10 reps:
 - ❖ Glut max/glut med/quad; Mini Squats
 - ❖ Hamstring/gastroc belt stretch x 30 seconds
- ❖ 2 Weeks self MLD massage 4x/day + Daytime use of 20-30mmHg Over-The-Counter knee-high compression stockings
- ❖ 2 Weeks Withholding all treatment

Conclusions

- After a home program including use of OTC compression stockings with self MLD 4 times a day for 2 weeks
- 29 Adult Subjects demonstrated:
 - Reduced knee pain intensity
 - Reduced girth (on both legs even the non-painful leg)
 - Increased function

VAS at Worst

Visual Analogue Scale indicative of pain 0-10/10
with 0 being no pain and 10 being worst



- Signs of Venous insufficiency
- Lorraine felt these signs are the suspected cause of knee pain from the resulting edema

Spider veins (teleangiectasias)





Sock lines
indicating
edema at both
ankles

Decreased hair
pattern lower
ankle and
eventually leg



Venous Stasis
Ulcerations,
healed wounds

Varicose Veins



Thickened and Congested Skin





Hemosiderin staining rusty color or redness due to broken down hemoglobin cells turning to hemosiderin and staining the skin

Increased joint line depth



Shiny, waxy skin

Increased depth
of joint lines

Edema of different sizes



Mild Edema



Moderate
Edema



Severe edema

Subject Response

42-year-old male

Subjective Chief Complaint: Standing up from sitting

Evaluation 6/10

Exer 5/10

Socks+MLD 3/10

No RX: 9/10



He noted so much pain relief from the socks and massage portion of study his wife had to fight with him during the withholding phase to NOT put the socks back on so he would not ruin study

80-year-old female with right knee pain. Chief complaint Walking through Costco

Evaluation 9/10

Exercise 9/10

Socks+MLD 3/10

No RX 8/10

Notice how much more the tendon on the right leg stands out after swelling reduced



68-year-old Female chief complaint left knee pain with squatting

Eval 4/10 Exercise 4/10 Socks +MLD 2/10 No RX 5/10



A coastal landscape featuring a large piece of weathered driftwood in the foreground. The wood is dark and textured, with visible grain and knots. In the background, the ocean is blue with white waves breaking. Several large, dark rock formations (sea stacks) are visible in the distance under a clear blue sky.

■ Compression Handout

Handout: Self Manual
Lymphatic Drainage
(MLD) Massage for Legs



Today showed very simple examples

- Number of treatments needed depends on severity of problems and ability to learn
- Simple problems take less time
- Multiple problems take more visits
- Most patients ready to manage independently within 2-3 months of specialized physical therapy visits 1-3/week
- Physical therapy costs about 100\$ a visit
- \$3600 for PT versus cost/risks of surgery (avg: \$49,500)

What if it is bone on bone?

- I had a patient who has x-rays of her hip and knee that show both to be bone on bone with arthritis
- She saw the orthopedic surgeon who does not want to do surgery because she is controlling her pain with her home PT program
- She is also now independently managing knee, hip, foot and hand arthritis pain; neuropathy-pain and numbness in her feet; and incontinence after 3 months of PT

Getting more help if needed

- If you do something with early signs of problems you will need to do less
- I hope these tools will be enough or look at my website: doctorlovejoyevans.com
- You can find physical therapists who know how to treat lymphedema and to improve skeletal alignment with Strain and Counter Strain
- You will need a referral from your doctor
- Medicare and most insurances typically cover physical therapy

Handout on Total Knee Replacement and the lymphatics

Thank you
So much for your attention

Any Questions?

