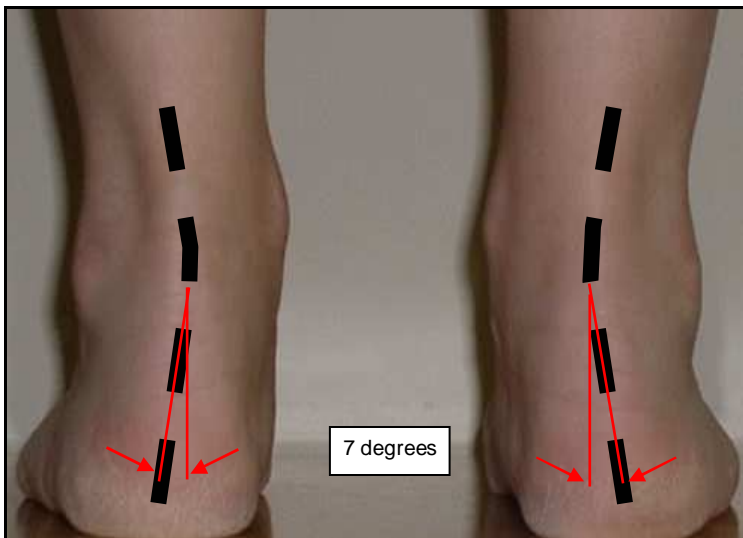




**CASE STUDY-** For more details contact Nick Dinsdale as above.

<b>Name of Patient:</b>	Female
<b>Age:</b>	32 years old
<b>Sport / Occupation:</b>	Professional Careers Advisor
<b>Level of Activity:</b>	Day to day activities
<b>Condition:</b>	Lumbosacral / pelvic instability (lower back pain)

**BEFORE** fitting orthotics



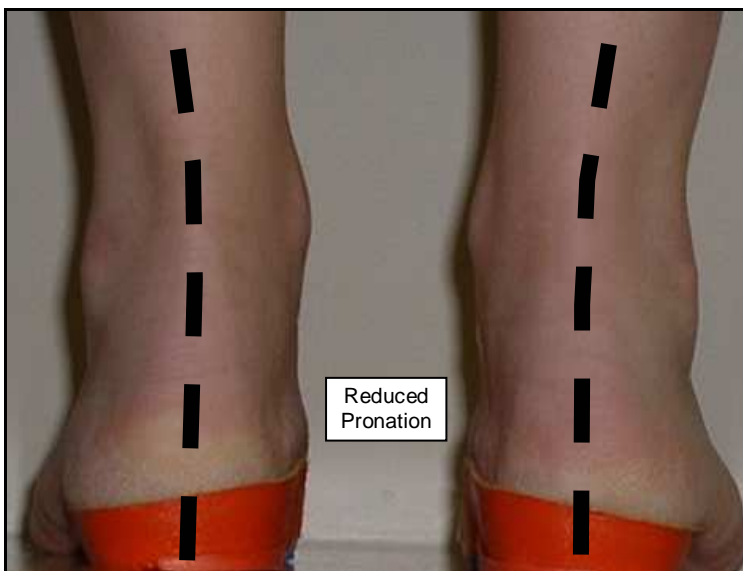
**Symptoms:**

The patient often suffers from a dull ache and stiffness in the lumbar - sacral / pelvic region. Requiring frequent adjustments to the Sacroiliac joint.

**Biomechanical aetiology:**

A major cause or contributing factor is bilateral excessive subtalar joint pronation (this is when the feet roll inwards). This adversely affects the biomechanics of the lower limbs and position of the pelvis. The legs internally rotate too much. Abnormal pelvic movement and postural changes occur, often accompanied by muscular tightness in the lower back and buttocks.

**AFTER** fitting custom soft orthotics to treat pelvic instability



**Agreed Treatment Plan:**

Pre-fabricated orthotics were fitted to reduce excessive subtalar pronation, thereby improve the biomechanics of the lower limb. The reduction in pronation reduces abnormal pelvic motion and stresses placed on the lumbosacral and pelvic structures.

**Additional treatment:** - Manual therapy includes massage and mobilisation.

**Exercises:** - specific stretching and strengthening exercises of affected muscles. Conditioning and strengthening of the core are pelvic muscles are strongly advised.

**PATIENT 'FEED-BACK'**

*"Since introducing the orthotics, my lower back & pelvic condition has improved dramatically, with minimal pain and stiffness. I now wear my orthotics at all times. The frequency of visits for low-back treatment have reduced considerably"*