Myofascial Trigger Point Articles

A Matter of Urgency

By

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Anita, a 44 year old teacher, was referred to MyoRehab by her chiropractor for Myofascial Trigger Point Therapy of the buttocks and hip muscles. Two years ago, while setting a box on an upper shelf, Anita stepped backwards, tripped and landed hard on her right buttocks.

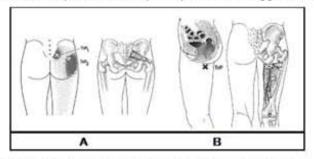
Although successfully treated by her chiropractor for low back pain resulting from her fall, she continued to suffer from the buttocks and hip pain. She also experienced urgency to urinate, as well as, a pressure pain in the pelvic area. These symptoms began just weeks after her fall.

Anita was unaware that the symptoms of a Urinary Tract Infection (UTI) were related to her fall. After several lab tests proved negative for a UTI, Anita was at her wits end. A biological cause for her symptoms could not be found. Also, antibiotics did not help.

It wasn't until the third treatment of her Myofascial Pain that Anita commented on her UTI dilemma. When questioned further, it was learned that Anita experienced temporary relief of her UTI symptoms following pelvic mobilization by her chiropractor.

Trigger Points shorten muscles which in turn can maintain joint misalignment. A Trigger Point is a hypersensitive spot in a muscle that when stimulated, produces pain that is referred in a predictable pattern usually away from the Trigger Point. In Anita's case, the referred pain

was to the buttocks and hips.



Unfortunately, her UTI symptoms would return coincidentally with her buttocks and hip pain. The relief of her pain with chiropractic adjustments lasted no more than two or three days. It was obvious to us and to her chiropractor that muscles were responsible for causing the continued pelvic and hip misalignment and the return of the symptoms.

As you might suspect, Myofascial Trigger Points in the gluteus maximus were contributing to the buttocks and hip pain. However, the primary culprit was the piriformis which lies deep underneath the gluteus maximus. (Illustration A) Since it is attached to both the sacrum and the top of the thigh bone, Trigger Points in the piriformis can cause misalignment of the sacrum.

When the sacrum is misaligned, other parts of the pelvis can also be out of alignment. This can cause the two halves of the pubic bone to be out of level. When this occurs, patients often report UTI symptoms. These include pressure pain, urgency to urinate and urinary leakage (incontinence) with sneezing or laughter.

If this misalignment persists, an actual UTI can occur. his happens when the two halves of the pubic bone are not level and complete emptying of the bladder is not always possible. In this case, antibiotics will successfully treat the infection. When UTI symptoms frequently reoccur, with or without infection, muscle and joint dysfunction should be addressed.

Myofascial Trigger Points can mimic many common pain syndromes. Likewise, many serious pain syndromes can mimic Myofascial pain. Having an evaluation for both Myofascial Trigger Points and the possibility of a serious pain producing pathology should be considered.

Treating the muscles of the pelvis and chiropractic adjustments of the hips relieved the buttocks and hip pain and most of the UTI symptoms. Anita, however, continued to suffer with pelvic floor pain. When asked, Anita told us that walking up stairs or hiking uphill increased the pain.

Our suspicions were correct. Although several muscles can cause pelvic floor pain, the adductor magnus is active when walking uphill and inactive when walking downhill. (Illustration B) After successful treatment of the adductor magnus, a specific exercise for this muscle was added to Anita's Home Exercise Program.

As part of a complete treatment protocol, patients are given a Home Exercise Program specifically designed for their individual needs. This program retrains the muscles to stay at their normal resting length in a pain-free state.

Do you have "A Matter of Urgency" in your life? Give us a call at MyoRehab.