

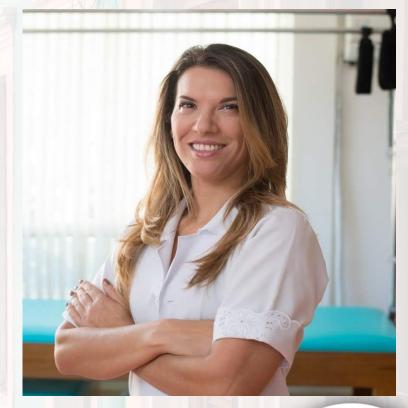
Trabalhando a mobilização neural com o Pilates

Prof. Maria Lina Leite

MARIA LINA SILVA LEITE

(Crefito23366-7F) -1999

- Especializações em Pilates desde 2000;
- Pós-graduada em Fisioterapia Cardiopulmonar (IBMR 2001);
- Reabilitação de Cardiopatas como Método Pilates (desde 2001);
- Mestre em Bioengenharia (UNIVAP/2011);
- Formação Internacional em Pilates e Pilates em reabilitação pela Life Pilates (Espanha) 2015;
- RPG Souchard, ESV, Mulligan Posturologia, Cadeias Musculares, Método Miofascial Stecco, Mobilização Neural, MAH;
- Membro da Câmara Técnica de Pilates Fisioterapêutico do CREFITO-2 (Estado do Rio de Janeiro);
- CEO Studios Fisiocor Nova Friburgo: Atendimento, cursos, treinamentos e consultorias);
- Estudiosa do movimento, coluna vertebral e dor (ser humano integral).





DEVO PEDIR EXAMES COMPLEMENTARES DE IMAGEM:

- A evidência de imagem degenerativa da coluna é comum em indivíduos assintomáticos e aumentam com a idade;
- Achados devem ser interpretados, levando-se em conta a situação clínica do paciente;
- Problemas degenerativos são normais e não associados a dor lombar;
- Resultado: hérnias de disco podem regredir e desaparecer espontaneamente sem intervenção;
- Sequestro e extrusão são mais propensos a desaparecer do que protusões.

(Chiu et al 2015 - Revisão sistemática)

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ORIGINAL RESEARC

Systematic Literature Review of Imaging Features of Spinal Degeneration in Asymptomatic Populations

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BSTRACT

BACKGROUND AND PURPOSE: Degenerative changes are commonly found in spine imaging but often occur in pain-free individuals as well as those with back pain. We sought to estimate the prevalence, by age, of common degenerative spine conditions by performing a systematic review studying the prevalence of spine degeneration on imaging in asymptomatic individuals.

MATERIALS AND METHODS: We performed a systematic review of articles reporting the prevalence of imaging findings (CT or MR imaging) in asymptomatic individuals from published English literature through April 2014. Two reviewers evaluated each manuscript. We selected age groupings by decade [20, 30, 40, 50, 60, 70, 80 years], determining age-specific prevalence estimates. For each imaging finding, we fit a generalized linear mixed-effects model for the age-specific prevalence estimate clustering in the study, adjusting for the midpoint of the reported age interval.

RESULTS: Thirty-three articles reporting imaging findings for 3110 asymptomatic individuals met our study inclusion criteria. The prevalence of disk degeneration in asymptomatic individuals increased from 37% of 20-year-old individuals to 96% of 80-year-old individuals. Disk bulge prevalence increased from 30% of those 20 years of age to 84% of those 80 years of age. Disk protrusion prevalence increased from 29% of those 20 years of age to 43% of those 80 years of age. The prevalence of annular fissure increased from 19% of those 20 years of age.

CONCLUSIONS: Imaging findings of spine degeneration are present in high proportions of asymptomatic individuals, increasing with age.

Many imaging-based degenerative features are likely part of normal aging and unassociated with pain. These imaging findings must be interpreted in the context of the patient's clinical condition.



- Determinar a confiabilidade e validade de testes clínicos para avaliar a integridade anatômica da coluna cervical em adultos com cervicalgia e seus distúrbios associados;
- Triagem de 9.022 artigos;
- Evidências preliminares sugerem que o teste extensão-rotação pode ser confiável e tem validade adequada para descartar a dor decorrente das articulações facetárias;
- As evidências sugerem confiabilidade variável e validade preliminar para a avaliação da radiculopatia cervical, incluindo exame neurológico (teste motor manual, teste sensorial dermátomo, reflexos tendinosos profundos e teste de reflexo patológico), testes neurodinâmicos de Spurling e do membro superior.

Eur Spine J DOI 10.1007/s00586-017-5153-0



REVIEW

Reliability and validity of clinical tests to assess the anatomical integrity of the cervical spine in adults with neck pain and its associated disorders: Part 1—A systematic review from the Cervical Assessment and Diagnosis Research Evaluation (CADRE) Collaboration

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Abstract

Objective To determine the reliability and validity of clinical tests to assess the anatomical integrity of the cervical spine in adults with neck pain and its associated disorders.

Methods We updated the systematic review of the 2000–2010 Bone and Joint Decade Task Force on Neck Pain and its Associated Disorders. We also searched the literature to identify studies on the reliability and validity of Doppler velocimetry for the evaluation of cervical arteries. Two independent reviewers screened and critically appraised studies. We conducted a best evidence synthesis of low risk of bias studies and ranked the phases of investigations using the classification proposed by Sackett

Results We screened 9022 articles and critically appraised 8 studies; all 8 studies had low risk of bias (three reliability and five validity Phase II—III studies). Preliminary evidence suggests that the extension–rotation test may be reliable and has adequate validity to rule out pain arising from facet joints. The evidence suggests variable reliability and preliminary validity for the evaluation of cervical radiculopathy including neurological examination (manual motor testing, dermatomal sensory testing, deep tendon reflexes, and pathological reflex testing), Spurling's and the upper limb neurodynamic tests. No evidence was found for doppler velocimetry.

Conclusions Little evidence exists to support the use of clinical tests to evaluate the anatomical integrity of the



DIAGNÓSTICO/TRATAMENTO:

Alcançado após realizar toda avaliação específica:

- História/HPP;
- Testes neurológicos (reflexos, força e sensibilidade);
- Testes neurodinâmicos;
- Eletrofisiologia;
- Radiologia;
- Exame físico para evitar causas não radiculares;
- Traçar tratamentos (métodos e condutas).

Fonte: Shacklock, Michael, 2022



CONCLUSÃO

- Necessidade cada vez mais presente do profissional do movimento;
- Dominar métodos e técnicas de avaliação;
- Identificar artigos com nível de evidência satisfatório (alto) para direcionar suas avaliações, condutas e escolhas.



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