

## Question for Doc Sarah ...

Posted by Spider Grl - 11 Sep 2008 16:30

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Hi Doc Sarah! I'm hoping you can help me with these questions.

I read a thread on here (and I can't find it now) where you used a phrase that I thought was, "as the scarring progresses". I know that scar tissue changes over time. **Does the scarring in our dural sac progress as time goes by and, if so, what effect does that natural progression (not further trauma but just natural progression) have on symptoms?**

And the question I really would love to have answered is this one. **Does pushing through the pain cause more scarring or problems? What exactly goes on in a damaged nerve if you push through the pain?**

I'm asking this because I have adhesive arachnoiditis and I can't go more than 200 feet without a myclonus/spasm. And if I take another step I get another and another so I'm effectively stuck there. Prior to this I walked and swam five out of seven days and was in good shape. Since this I've gained weight and I've lost my quads and abs and I would like to do some basic floor exercises to stop a bunch of secondary problems from arising. However, if I do simple exercises with a stretch band I feel it start to burn during or after the exercises and most certainly the pain and burning is worse that night. I just don't know if working through the pain in an attempt to exercise and get my body in better condition now is going to make things worse for me later. Or for that matter, trying to keep walking when I have a series of myclonuses. No one, so far, has been able to answer this for me.

Thanks so much for any thoughts you have on this! I appreciate all the time, effort and care that you put into this forum!

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## Re:Question for Doc Sarah ...

Posted by DocSarah - 25 Sep 2008 19:13

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Hi

it's quite difficult to give you a clear answer: briefly, it is possible for the scar tissue to progress over time, although often it becomes quite stable until or unless something happens, like a fall etc. which can trigger a deterioration. So most people with arach. tend to plateau out, although they may still have a pattern of relapse/remission (i.e. intermittent flare-ups)with a gradual overall worsening over time. Symptoms will depend on what nerve roots are affected by the scarring. Severe scarring can obliterate

the subarachnoid space where the spinal fluid flows and so interrupt the flow of the fluid, causing pressure symptoms. Dural pain from distension of the dural sac, tends to be more diffuse than nerve root pain which will radiate down the area supplied by the relevant nerve, causing sensory symptoms (pain, pins and needles, numbness etc.) and motor symptoms (weakness, cramps, muscle twitches etc.). There may also be autonomic symptoms (change in sweating, temperature and/or colour of affected limb etc.)

As for what happens if you push through the pain: it depends what type of pain. Some pain is not related to damage, but is a sort of 'echo' (see my article on chronic pain); however, in arach. pushing too hard could potentially aggravate any ongoing inflammation and this can worsen nerve root symptoms as the root becomes swollen and then may start to scar and stick to other nerve roots, rather like over-cooked spaghetti strands.

If we consider arach. like autoimmune conditions such as Rheumatoid Arthritis, in which too much exercise can trigger joint inflammation, the advice given to patients is along the lines of: it is vital to maintain range of movement (ROM) in all joints and to ensure good muscle tone to support the joints so exercise is necessary. Gentle isometric exercising may increase pain during the exercise and this is to be expected. If the pain subsides within an hour of stopping the exercise, then it is unlikely to cause any harm; if the pain persists for more than an hour, it might indicate that it has triggered some inflammation. It is vital not to have a 'boom and bust' exercise regime, but to pace to avoid undue stress on the body.

Pushing through pain with gritted teeth is not something I'd recommend. For a start, I would guess you may provoke muscle tension which is likely to cause musculoskeletal pain. You should also be aware of when you start to move inefficiently, say if you have some weakness, you may start to move awkwardly which puts pressure on parts of the body trying to compensate (the opposite limb usually): you may again provoke mechanical pain from joint/tendon/ligament/muscle strain.

There are no hard and fast rules, everyone needs an individualised programme. Exercise such as walking and swimming is generally the best if you can manage it. Try to work out what your current ability is before pain sets in and before the quality of your movement goes down. Then aim for about 75% of that as a start point. You can very gradually build up and increase if you tolerate it.

The downside of not exercising is that your muscles will further weaken inevitably and this may reduce your core stability and balance, making you more prone to falls and causing increased pain when you do decide to exercise.

Hope this helps!

regards

DocSarah

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## Re:Question for Doc Sarah ...

Posted by Spider Grl - 28 Sep 2008 03:27

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Doc Sarah,

Thanks so much for this reply! You've given me some guidelines to start with and I appreciate that very much. I'm going to print this out and read and reread it.

I miss my old, normal life so much. But I'm trying to focus on the things that I can do and the joy that is there in each and every day.

I used "Spider Girl" as my name because when I tell someone what's wrong, invariably they'll say, "Oh, you're scared of spiders." I'm sure we all wish that was the problem!

Thanks again!

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