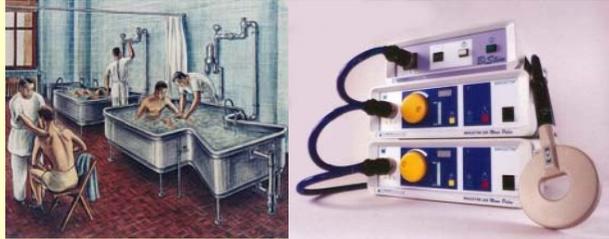


Physical Therapy



Hubbard Hydrotherapy Tank, Carlos Andreson, Watercolour, 1943

Methods in Physical Therapy

Non-Electric heat therapy – (heating or cooling)

Electrotherapy

Ultrasound therapy

Magneto-therapy

Phototherapy

Non-electric heat therapy

Conduction of heat

Radiation

EM radiation

US



Therapeutique application of electric current

Non-stimulating

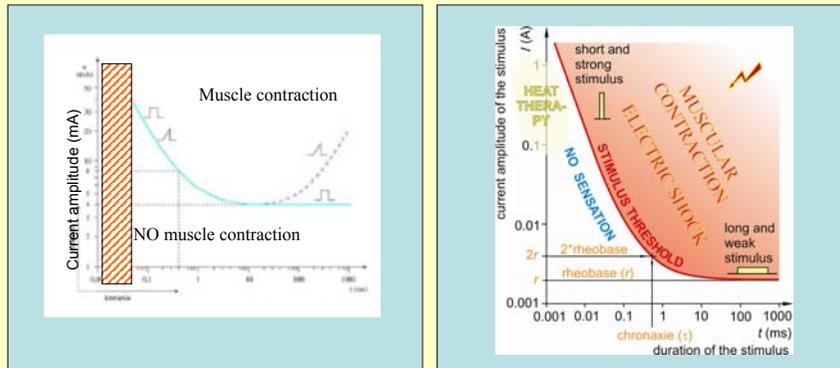
Direct current– galvanotherapy, iontophoresis
High frequency alternating current - diathermy

Stimulating

individual current pulses
series of pulses

Effects of electric current

Stimulus-characteristic curve



- **Rheobase**- (the lowest point on the curve) by definition is the lowest voltage that results in myocardial depolarization at infinitely long pulse duration
- **Chronaxie**(pulse duration time) by definition, the chronaxie is the threshold pulse duration at twice the rheobase voltage

Direct current- galvanotherapy, iontophoresis

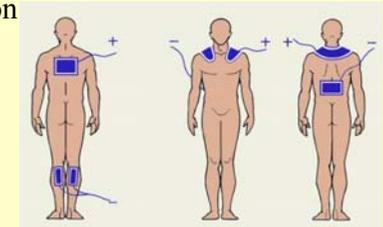
Galvanotherapy: constant direct current

Cranial or Caudal anode

Effects: pain relief

modulation of stimulus threshold of motoric neurons

modulation of vasodilatation



Direct current- galvanotherapy, iontophoresis

Hidro-Galvanic Treatment

sympathicus activity decreases

vasodilatation in deep tissues



Direct current- galvanotherapy, iontophoresis

Iontophoreses: ionic drugs can be delivered through the skin into the tissues situated between two electrodes

pain reliefs,

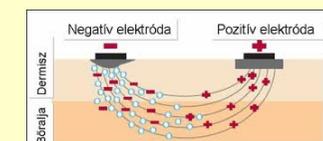
anti-inflammatory agents,

vasodilators,

tissue softeners

Katophoresis – e.g. seroidos, lidocain

Anophoresis – e.g.. Non-steroidal anti-inflammatory drugs



Direct current- galvanotherapy, iontophoresis

Iontophoreses :

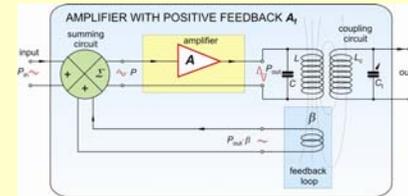
Advantage: smaller quantity of drug, local treatment,
delivery of non-absorbing drugs

Disadvantage: doses are uncertain



High frequency heat therapy - Diathermy

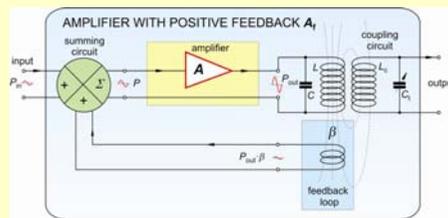
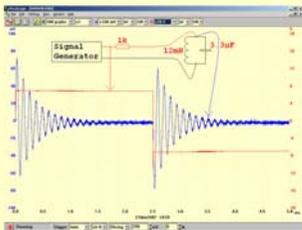
Signal source: **sine-wave oscillator**,
feed-back amplifier with LC circuit



$$f = \frac{1}{2\pi\sqrt{LC}}$$

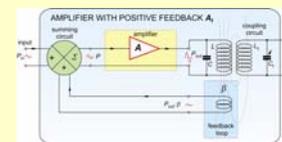
Effect depends on:
Structure of coupling circuit
Applied frequency
Structure of tissues to be treated

Electric signal source: **sine wave oscillator**



$$f = \frac{1}{2\pi\sqrt{LC}}$$

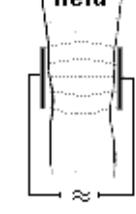
Coupling circuits



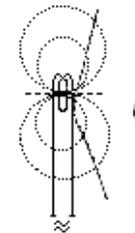
Optimal coupling - resonance

$$f = \frac{1}{2\pi\sqrt{LC}} \quad \boxed{LC=L'C'}$$

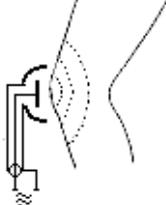
capacitor field



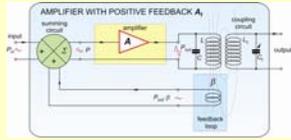
coil field



microwave radiator



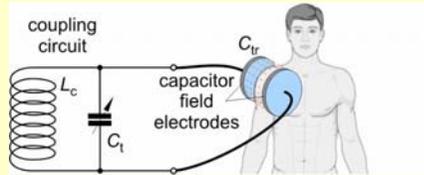
Coupling circuits



Optimal coupling - resonance

$$f = \frac{1}{2\pi\sqrt{LC}}$$

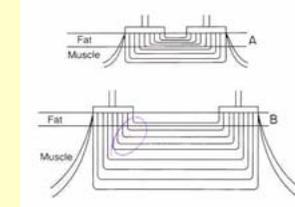
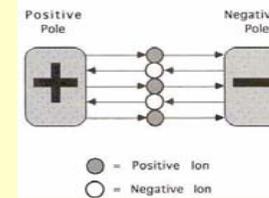
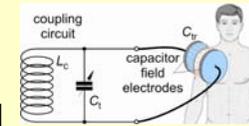
$$LC=L'C'$$



Capacitor field treatment

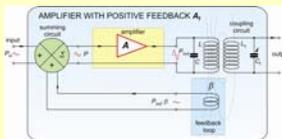
$$Q = \frac{U^2}{R} \cdot t = \frac{U^2}{\rho \frac{l}{A}} \cdot t = \sigma \frac{U^2}{l^2} \cdot l \cdot A \cdot t = \sigma \cdot E^2 \cdot V \cdot t$$

Capacitive electrodes Capacitor field



$$Q = \frac{U^2}{R} \cdot t = \frac{U^2}{\rho \frac{l}{A}} \cdot t = \sigma \frac{U^2}{l^2} \cdot l \cdot A \cdot t = \sigma \cdot E^2 \cdot V \cdot t$$

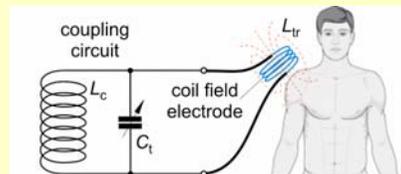
Coupling circuits



Optimal coupling - resonance

$$f = \frac{1}{2\pi\sqrt{LC}}$$

$$LC=L'C'$$



Coil field treatment
- induction field

Electric currents induced within conductors by a changing magnetic field

The greater the electrical conductivity the greater the currents that are developed

Induction field treatment

Patient is in the electromagnetic field or the electric circuit → produce strong magnetic field → induce electrical currents within the body (EDDY currents)

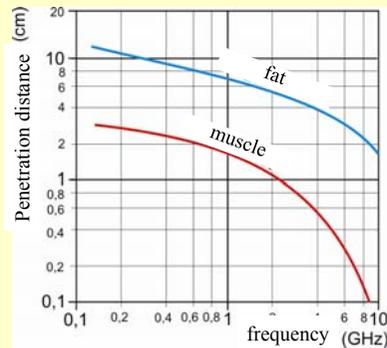
The greater the electrical conductivity the greater the currents that are developed

Utilizes either an insulated cable or an inductive coil applicator

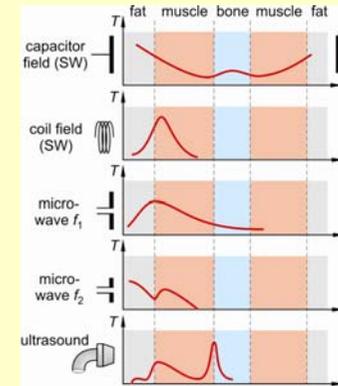


Frequency and wavelength ranges:

Short wave: $f \sim 30 \text{ MHz} \rightarrow \lambda \sim 10 \text{ m}$
 Decimeter wave: $f \sim 0,5 \text{ GHz} \rightarrow \lambda \sim 0,6 \text{ m}$
 Microwave: $f \sim 2,5 \text{ GHz} \rightarrow \lambda \sim 12 \text{ cm}$



Typical distribution of heat



frequency	σ_{fat} (mS/cm)	σ_{muscle} (mS/cm)
300 MHz	2,7	9,0 – 9,9
1000 MHz	3,6	13,0 – 14,5

Contraindications

- Pacemakers
- Metal implants
- Impaired sensation
- Pregnancy
- Hemorrhage
- Ischemic Tissue
- Testicles and eyes
- Malignant CA
- Active TB
- Fever
- Thrombosis
- X-ray exposure
- Uncooperative patient
- Areas of poor circulation

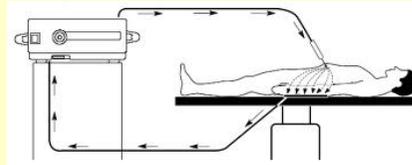
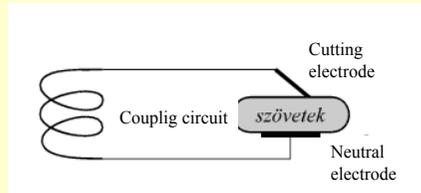
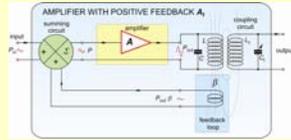
Potential risks of microwave and radiofrequency radiation

Mainly thermal effects.

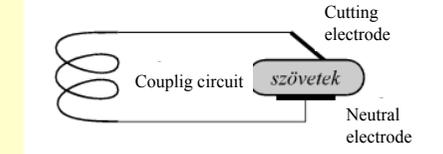
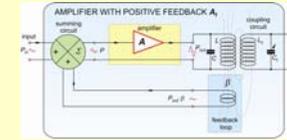
Microwave sources
 Radars
 Cell phones
 Radio and TV transmitters
 Electric mains
 Trolley lines (wires)

Some studies showing carcinogenic effects of microwaves or low-frequency electromagnetic fields were not verified sufficiently, but it is prudent to reduce exposures.

Microwave surgery - Electrosurgery



Microwave surgery - Electrosurgery



„Electrosurgery is currently used in over 80% of all surgical procedures, and is growing in popularity in dental surgery. **Electrosurgery also significantly reduces bleeding and provides the oral surgeon or dentist greater overall precision. ...**”

Advantages:

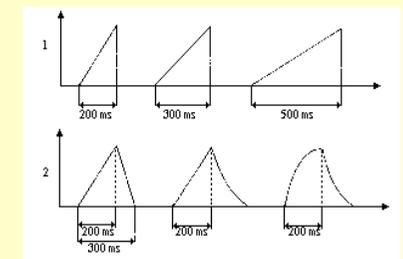
- High precision
- Immediate sterilization
- Reduced bleeding
- Analgesic effect

Whitening



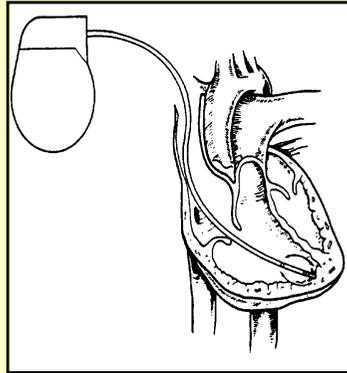
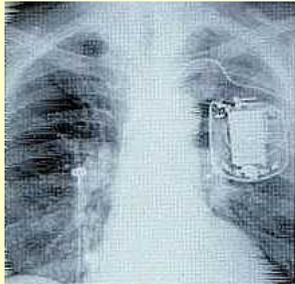
Electrostimulation

Creating muscle contraction through nerve or muscle stimulation



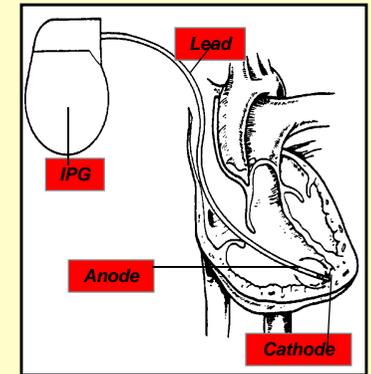
The stimulating effects depend on the amplitude, frequency, shape and modulation of pulses, and the kind of tissue!!!!

Pacemaker - astable MV



Pacemaker - astable MV

- Power source Longevity in single chamber pacemaker is 7 to 12 years,
Generate 2.8 V in the beginning of life which becomes 2.1 to 2.4 V towards end of life
- Pulse generator
- Leads Deliver electrical impulses ,
Sense cardiac depolarisation
- Cathode (negative electrode)
- Anode (positive electrode)
- Body tissue



Most Pacemakers Perform Four Functions

- Stimulate cardiac depolarization
- Sense intrinsic cardiac function
- Respond to increased metabolic demand by providing rate responsive pacing
- Provide diagnostic information stored by the pacemaker

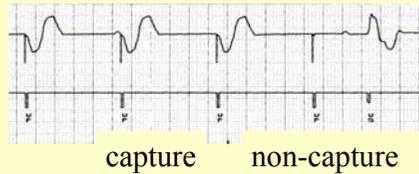
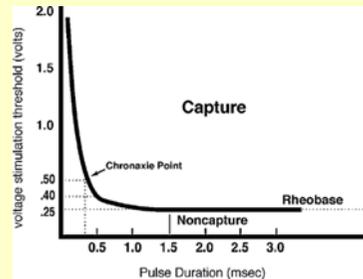
A Brief History of Pacemakers

- 1958 – Senning and Elmqvist
 - Asynchronous (VVI) pacemaker implanted by thoracotomy and functioned for 3 hours
 - Arne Larsson
 - First pacemaker patient
 - Used 23 pulse generators and 5 electrode systems
 - Died 2001 at age 86 of cancer
- 1960 – First atrial triggered pacemaker
- 1964 – First on demand pacemaker (DVI)
- 1977 – First atrial and ventricular demand pacing (DDD)
- 1981 – Rate responsive pacing by QT interval, respiration, and movement
- 1994 – Cardiac resynchronization pacing

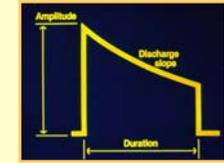


Pacing thresholds

- Defined as the minimum amount of electrical energy required to consistently cause a cardiac depolarization
- “Consistently” refers to at least ‘5’ consecutive beats
- Low thresholds require less battery energy



Pacemaker



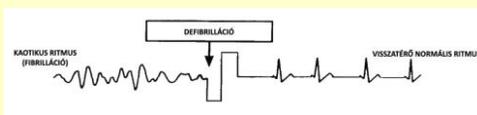
- $E (\mu\text{J}) = U (\text{V}) \times I (\text{mA}) \times t (\text{ms})$.
- $Q (\mu\text{C}) = I (\text{mA}) \times t (\text{ms})$.

Parameter	Optimal range	Comment
Voltage	1.5–2.5 V	Longevity is markedly reduced when the output is greater than 2.5 V. Voltages less than 1.5 V are not associated with significant increases in longevity.
Pulse duration	0.4–0.6 ms	Pulse durations of 0.4–0.6 ms correspond with the nadir of the threshold energy strength–duration curve (Fig. 1.7).
Safety margin	2:1 voltage 3:1 pulse duration	The strength–duration curve must be taken into account when determining the optimal type of safety margin programming.

Defibrillators



Defibrillators are used in emergency medicine to renew spontaneous heart activity (in case of chamber fibrillation).

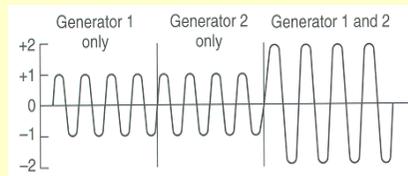


Therapeutic uses of electrically induced muscle contraction

- Muscle reeducation
- Muscle pump contractions
- Retardation of atrophy
- Muscle strengthening
- Increasing range of motion
- Reducing edema
- Stimulating denervated muscle

Interferential Currents

Make use of 2 separate generators
Produce sine waves at different frequencies



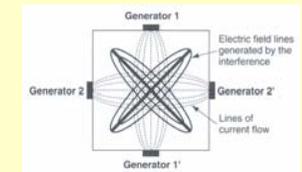
If produced in phase if or they originate at same time interference can be summative-amplitudes of the electric wave are combined and increase



Interferential Currents

When using an interference current set intensity according to peak .
Select the frequencies to create a beat frequency corresponding to choices of frequency when using other stimulators.

When electrodes are arranged in a square and interferential currents are passed through a homogeneous medium a predictable pattern of interference will occur.



US - THERAPY



35

Ultrasound therapy

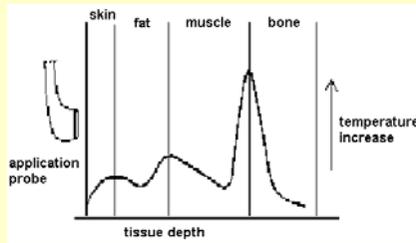
Typical parameters
 f : 0,8 - 1 MHz (up to 3 MHz)
 J : 0.5 - 1 W.cm-2
 t : 5 - 15 min., in 5 - 10 repetitions.
US can be applied continuously or pulsed.



The main therapeutic mechanism is **high-frequency massage** of tissue. Additional effects are caused by tissue **heating** (causing hyperaemia) and some **physico-chemical effects**.

Main indications of US therapy: chronic joint, muscle and neural diseases. Limited success is reported in healing wounds after surgery, healing injuries and varicose ulcers.

Thermal action of ultrasound



In US therapy, thermal dissipation of acoustic energy takes place. Tissue heating depends on physical properties of tissue and its blood supply. The highest heating appears at the **interfaces between tissues of very different acoustic impedances**.

Question of the week

What can be observed when muscle cells are stimulated with electric pulses of an amplitude smaller than the Rheobase?

Damjanovich, Fidy, Szöllösi: Medical Biophysics

IX. 4.

Manual :Sine-wave oscillator