

Report on the use of the MyBack® tool by Dr. Donato Quinto

Preface

This report was written by the undersigned, Dr. Donato Quinto, graduate in Motor Science, professional athletic trainer and director of MOVLAB in Florence.

The study was performed at the above-mentioned establishment, as it is appropriate for welcoming individuals presenting problems of various nature that go from lumbosciatica to motor rehabilitation of more complex case studies.

The protocols used by me will be described in the course of the report.

In respect of privacy and as set forth by the law, sensitive data that may lead to the identification of the individuals object of this study will not be reported.

Protocols of the application of the MyBack® tool at the MOVLAB establishment in the treatment of some cases of pathologies connected to problems of the spinal column in the lumbar tract

The first case treated with the Myback tool concerned a 48 year-old sedentary individual who in the past practiced agonist sport in disciplines such as Karate and running, followed by a long period of inactivity associated with a conspicuous increase in body weight.

The individual had shortly before resumed physical activity by subscribing to a gym and attending organized collective fitness courses. Heedless of the increasing painful symptoms and a habitual user of analgesics, he continued his activity until he was diagnosed with acute osteitis pubis and lumbago. After one month of rehabilitation at another physiotherapeutic structure and various chiropractic treatments, the individual underwent a magnetic resonance under medical prescription; with this, he came to my establishment, MOVLAB.

The outcome of the magnetic resonance of the lumbosacral tract reported:

Somatic and interapophyseal arthrosic notes.

Conus midullaris and cauda roots within limits.

Spinal canal regular in size.

All intersomatic discs were dehydrated.

Hernia protrusion of the intersomatic disc D12-L1 at right para-median location, leading downwards for about 5mm.

Minimum circumference bulging of the intersomatic discs L1-L2, L2-L3.

Intersomatic disc L5-S1 presents a disc hernia with median extension that interests both intraforamial locations.

Adipose degeneration of the paired limiting L5-S1.

Moderate anterior slippage of S1 on L5.

Muscles of the posterior paravertebral gutters.

Following a consultation meeting comprised of a physician specialized in traumatology, a physiotherapist and myself, it was decided to intervene with the following type of protocol:

- 10 sessions comprised of specific work done by the physiotherapist with massage techniques and posturology applied to the case
- Treatment with MYBACK® tool comprised of 10 minutes before motor rehabilitation activity and 10 minutes after, with a start-off height between 5 and 10 cm (estimated), up to the attainment of maximum extension by the third session
- Treatment performed by myself with motor rehabilitation techniques using the Feldenkrais Core Integration method

By the third session, the individual had no more pain. He also referred that he felt a sensation of relief after the session with MYBACK®, associating it with a sensation of "freedom" felt in the lumbar tract. At the end of the 10 sessions, besides the complete disappearance of pain, the individual had also re-acquired full functionality, gradually resuming controlled motor activity without limitation. The subject continued to use MYBACK®, thus maintaining the excellent results achieved.

The second case I am reporting as an example of the application of the MYBACK® tool is an agonist athlete in martial disciplines: WUSHU. The individual does not present any pathology, just painful symptoms in the lumbar tract with consequent loss of mobility, from a performance point of view, indispensable for the discipline practiced.

Since the subject had many agonistic appointments and did not have the "time" factor as an ally in combating the problem, an intense protocol was set up for him:

- 3 days of treatment with MYBACK® in 30-minute sessions, with intervals of masso-physiotherapeutic treatments of 30 minutes each

On the third day, the subject had no more pain and resumed his training routine with relative gradualness (with reduced loads during the first 3 days), always associating the 30 minutes of MYBACK before and after training. The subject used the MYBACK® tool always at its maximum extension, where he felt a pleasant sensation of "discharge". His feedback on the tool was very positive -- so much so that he asked for information regarding its purchase.

The last case I am reporting for the sake of completeness of the wide spectrum of applications that the MYBACK® tool has had in my establishment, is that of Ms. G., a 60 year-old housewife with problems connected to the pelvic wall and to the functions of evacuation, with chronic inflammation of all pelvic muscles and consequent loss of mobility of the area. Following consultation with a physician and a therapist specialized in the pelvic region, it was recommended that this woman use MYBACK® as a discharge system of the lumbar tract and as adjuvant to the work performed by the therapist in the pelvic region.

The work was structured as follows :

- 10 physiokinesis therapy sessions specific for the pelvic region, together with two 15-minute applications of the MYBACK tool before and after, starting at a height of 3-5cm up to a height of 20-25cm. The results after 10 sessions were exceptional: she re-acquired a correct control of her evacuative functions and hence of the pelvic floor region, associated with a complete disappearance of the painful symptoms diffused along the lumbar tract and in the deep area of the pelvis, surely connected to an increased mobility of the area and to a decrease in the inflammatory phenomena connected to it. The opinion of the subject regarding MYBACK® was very positive and she continued its applications.

Conclusions

The experiences witnessed in the MOVLAB establishment with the MYBACK® tool by myself, Dr. Donato Quinto, director of the structure, and under my close and continuous observation, have yielded very positive results. I can safely state that the tool is excellent in its simplicity of use and in the specificity with which it acts on the lumbar tract. Used with protocols that are appropriate to constitute part of the teamwork performed by physiotherapists and motor rehabilitators, it has given excellent results that, in my opinion, make MYBACK® a very important instrument for anyone who is involved in motor rehabilitation, physiotherapy and athletic preparation training.