

## Scars and joint pain

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### **The patient complains hip and back pain**

Almost everyone has at least one scar on his/her body and never cares too much. It may have been caused by a bicycle fall, surgery (e.g. appendectomy), a graze, a burn, a tattoo, a body piercing, ears holes, and so on.

This article will analyze the importance of having scars. It will analyze how they can damage the biomechanical and energetic balance of human body generating muscular tensions, postural modifications, stiffness, and, as last consequence, joint pain.

### **Definition of scar**

A scar is the result of the biological processes of wounds repair in the skin, and has to do with every structure of the human body. There is *skin lesion* when the skin is hurt, and *adhesion* when the lower tissues are hurt (pulled muscles, deep skin scars, etc.).

Skin has multiple layers: epidermis is the most superficial and experiences a continuous change. Dermis is made of a semifluid substance which contains elastic fibers, collagen and different kinds of cells, such as fibroblasts, which play a main role in the healing process. When the skin suffers a lesion, our body activates to heal the damage and produces new collagen cells. If the lesion involves the epidermis, then the healing process will not leave considerable marks. Things change whether lower skin layers are involved: in that case a bigger and more evident scar will emerge.

### **Scars as a mechanical, energetic and postural disease**

Scars are an interruption of the epidermis and the underlying tissues (muscular and nervous tissues), and can affect the organ's physiological functions. Scars may have mechanical, energetic and neurological consequences, locally and globally.

A scar causes mechanical damages depending on the relevance of epidermis and dermis **adhesions** and on its position.

A scar can cause energetic damages when it intersects an energetic meridian (meridians are similar to invisible and insubstantial channels in which “thin” energy runs). These meridians are spread throughout human body and run through it in different directions. If a scar “cuts” one of these channels, the energy flow is interrupted and this can cause an energy imbalance of the respective organ and consequently of the whole functional system.

Anyway, the existing scar either creates a stasis of energy or a lack of energy flow in the mentioned area (after the scar, starting from the center of the body), making it somehow shapeless.

Another element of the scar must be considered: the psychological aspect. Some people suffer from such a strong “psychological rejection” towards some of their scars, that they are not able to look at their old wound, they are afraid of touching it or even washing the area where the scar is. Some others feel really uncomfortable with their navel, for instance: do not forget this is the first scar for everybody. Apart from the physical trauma, to someone it could have an emotional and affective meaning or a memory of abandon.

A scar can also cause neurological damages. It is the most important aspect, since skin and central nervous system have an ancestral connection. During the embryonic life, skin and central nervous system share the same matrix, the *ectoderm*, thanks to which skin (and all the information/abuses received during the whole life) and central nervous system keep having a mutual information exchange also after the child is born. This is why when skin or nervous system is suffering, the other may suffer too, or at least have some kind of reaction.

Here is why a skin disease can become a neuro-muscular disease, causing functional or postural modifications, or even muscular and joint pain.

## Definition of posture and its connection with scars

As already said, posture is what your body looks like to the external world, how you stand, walk, breathe, manage your gravity, etc. If those elements are managed in the best and most profitable way possible, it is possible to speak about a *functional posture*. Studies have shown that a scar can affect posture, both in the scar area and the whole body: it can threaten verticality, the way a foot leans on the ground, the way you walk and even the way a muscle works (due to deep *adhesions*), leading to wrong postures. In addition, dermis adhesions contribute to make the scar “tough” and “inelastic”, spreading a sort of tissue “traction” through the skin to all directions, and consequently disturbing the whole system. In the long run this constant traction will modify posture, causing for example asymmetries (Figures 1 and 2). That traction is justified, since the connective tissue, which ties and joins the other tissues, is the main responsible for conveying any mechanical information. In case of an interruption of the continuum tissue, both in epidermis and dermis, our body will tend to assume wrong postures, due to an inner mechanism of conservation and an instinctive reaction to have the best comfort and the lowest pain. In the long run wrong postures can bring to serious pathologies such as pain, hernia, arthrosis or, as in the figure above, scoliosis.



Fig 1 Radiography showing the body's inclination on the right side, right where the scar is.  
Fig 2 Scar on the right body side.

*Extract from an article by  
M. d' Ajello – C. Misso – F. d' Ajello*

### What “reactive” scar means and how to test it

Apart from leaving a visible mark on the skin, scars can affect in a more or less considerable way the energetic balance of the body. Depending on how much the scar interferes, it can be considered “reactive” or “non-reactive”. To check its reactivity it is possible to make some tests which immediately highlight whether it is necessary or not to carry out postural treatments. If the test is positive, the scar needs to be treated. It is necessary to say that anywhere the scar is, it will act on any other part of the body through connective, fascial or muscular system. There are many different techniques to treat scars, depending on how they physically are, where they are, how old they are and what is the relationship with surrounding and deeper tissues. It is not possible to study the several therapies in

depth, because it would take many pages. Anyway, people tend to define the final results as miraculous. However, it is important to highlight a fact. For almost every patient, it is not enough to treat the scar manually or through subcutaneous medicines, but it is necessary to undergo a particular scar treatment (to be done manually, if it is possible) through special postures, in order to create tension and meanwhile counterbalance the fascial and muscle-connective chains.

### **Let the patient talk**

A specific case will be now taken into account. Mr. M. A., 40 years old, came to our practice to report a serious and dangerous bilateral coxarthrosis (hip arthrosis) and backaches. Only after an accurate research in the patient history, we discovered that his backache started two years after his hips problem. He came to our practice and we examined through an evaluation tool the patient's limp walking and we detected a moderate imbalance. We also detected that due to stiffness and hips pain, the patient couldn't walk properly and unconsciously but had to lean on an incorrect movement of the pelvis and of the spine. By doing that he overcharged the lumbosacral area, right where later he started to feel pain. During the first session we began the postural treatment, focusing on his hips. Only from the following sessions we focused on the lumbar area, too, since it suffered due to an incorrect movement of his hips. The patient felt freer to move his hips, and to move them better, with less stiffness and less pain. Being the patient fond of cycling, I begged him to avoid training hard for the moment. He did not listen, because he felt free and able to practice more than he could do before, and since he practiced too much the results were slightly slowed down.

At seventh or eighth session, we realized his hips stopped getting better.

This sudden stop was very suspicious. At this point it was necessary to look for other treatment strategies and to focus on any detail that could have slipped. During the tenth session we discovered how important the scar on the patient's right knee was, due to an old accident and consequent surgery to remove his meniscus. I had undervalued this detail.

The patient claimed he was not suffering from knee pain, indeed it was working perfectly.

After testing the scar we made an astonishing discovery: the scar was considerably reactive. The patient was very doubtful, yet I was happy and confident to realize what was stopping the treatments from improving. In addition, the scar was one year older than the hips problem, showing a real cause and effect relation between the two issues.

The most surprising element in these situations is that a little scar can cause a strong change on an articular structure like the hip. It can be explained by an important aphorism a posturologist must not

forget. It is the nonlinear law which establishes there is no proportion between the importance of the cause and its effect. It means that a little cause can generate or bring to a big damage and vice versa.



After the first postural treatment on the scar and the knee, the patient was positively impressed because he had not felt the scar for the past 8 years but then he felt a sort of annoyance for two sessions. Moreover, he was impressed because he felt straighter and had more freedom in his hips, better than ever in his latest hips-dedicated sessions. He is still getting better today, session by session. His hips move quite better, his lumbar region does not hurt anymore, his knee started working painless again after two sessions and his posture is more balanced now. Sometimes it is really hard to believe that a little scar can actually change an entire posture or cause an arthrosic process to the hips, but facts show it is possible.

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