Pilates paper essay



The Healing Power Clinical Pilates Just about everyone gets injured at some point in time in their lifetime. We do many things for our injuries; rest, ice, get a cast, take pain medication, etc. But have you considered trying clinical Pilates? Clinical Pilates is a form of rehabilitation for many types of injuries; orthopedic, neurological impairments, postpartum women, chronic pain, arthritis, along with many other physically impaired disorders or diseases (Owsley). The reason I chose this topic is due to my major, Occupational Therapy, which focuses on helping patients improve their ability to perform tasks in their living and working environments (Bureau of labor statistics). Pilates has helped me physically get stronger, but I also believe it could help me suggest more options for my future patients. There are many types of Pilates, all of which, have six basic principles; concentration, centering, control, flowing movement, precision, and breathing. The most popular is fitness Pilates. Fitness Pilates was invented by Joseph Pilates in the 1920's as a form of exercise, specifically for the core stability.

It wasn't till the 1990's, when Australian native Craig Phillips, who had combined his background in dance, began to form what is known as clinical Pilates. Clinical Pilates has gotten more recognition and is now being studied by many sport scientists. Clinical Pilates is a treatment tool usually used by physiotherapists who focus more on safety, injury diagnoses, and management. After being noticed with its many benefits, many rehabilitation centers are starting to use the methods with their patients. There are more than five hundred Pilates apparatus and mat exercises to help patients with aking it beneficial to any type of patient.

Other reasons why it is so beneficial with many patients is that many of the positions can be done either standing, sitting, lying down, and in supine. There are many different methods that Clinical Pilates use, the most popular is the Polestar Education, which uses the three basic phases; assistive movement, dynamic stabilization and functional reeducation. Assistive movement is the first stage, which allows the patient to move without any pain and allow them to reeducate themselves of proper motor function.

Pilates is very beneficial in this stage eleasing tension, promoting flexibility, and teaching the body proper function and alignment. After assistive movement has been completed, patients move onto phase two of rehabilitation, dynamic stabilization. The main goal of dynamic stabilization is to increase difficulty from phase one, by decreasing assistance and increase resistance. Supporting materials that help increase resistance are Pilate's balls, rubber bands, trampolines, and Pilate's equipment. Once the patient is feeling stronger, the third stage helps to promote the pre-inJury body from being re injured.

This can be accomplished by adding heavier weights to their Pilates workout or joining a Pilate's fitness class. As we can see, clinical Pilates is a great and can be a fun way of rehabilitation, instead of the tradition weight room routine. Of course, clinical Pilates isn't for everyone. Women who are pregnant should be cautious of specific exercises and people who suffer from chronic back/Joint paint should also be cautious. Otherwise we can look at clinical Pilates as another form of rehabilitation balance, breathing control, and improved body tone.