

Fight Insomnia Through Diet and Exercise

It's 1 a.m. You're wide awake. And there isn't a sheep to count in sight. Relax, you're not alone. Millions of people suffer from insomnia. So, what's the cause? Unless you're a princess sleeping on a pea or just afflicted with a sleep disorder, chances are stress, lack of exercise or poor eating habits are keeping you from a quality snooze.

To reduce the hours of bad late night TV and increase productivity during the day when it really matters, follow these simple precautions.

Avoid alcohol

You've been warned about the dangers of mixing alcohol with driving, operating machinery, work, and even sex. The same goes for nightcaps. Although touted as a traditional sleep aid, drinking two glasses or more of alcohol up to an hour before bedtime can suppress your REM* time.

Don't overeat

Big meals can make you drowsy, but not long enough to aid sleep. Experts suggest a light evening meal consisting of chicken, extra-lean

meat or fish not to exceed 500 calories.

Watch the salsa

Meals laced with garlic, chilies, cayenne powder and other spicy gas-forming foods can cause abdominal discomfort, which wreaks havoc with your REM.



Exercise your way to REM

A Stanford study suggests that as little as 45 minutes a day of exercise twice a week helps people sleep up to 45 minutes longer. However, strenuous exercise should be avoided up to six hours before bedtime, and mild exercise should be discontinued four hours prior to

snoozing.

High-carbohydrate bedtime snacks

Snack foods such as crackers, fruit, cookies or toast can help the release of a natural sleep aid called serotonin within the blood stream. While the aforementioned edibles are better than a chemical sleep aid, be sure to watch your overall calorie intake for the day.

Still can't fall asleep?

Get out of bed and go for a walk or do some exercise! Regular exercise can help you sleep better, give you more energy during the day and also help you look and feel better. So what are you waiting for?

*REM: rapid eye movement sleep phase is your deep sleep phase, when you usually dream.

Source: 24-hour Fitness



Ouch! My (tennis) elbow hurts! By Arièle M-Ali, physiotherapist

Tennis elbow, clinically known as lateral epicondylitis, is becoming increasingly prevalent among office workers today. The increase is by no means due to an increased interest in the game but is rather more often due to increased workloads and repetitiveness in the tasks we perform daily – even using your computer mouse incorrectly can provoke a case of tennis elbow! Interestingly enough, tennis players account for less than 5% of all reported cases of tennis elbow.

Tennis elbow occurs when the tendons which attach to the bony bump on the outside of our elbow (the lateral epicondyle) become inflamed (hence the medical name of 'lateral epicondylitis'). These tendons connect the muscles which are responsible for straightening and raising your hand and wrist.

Symptoms often include:

- Pain on the bony prominence on the outside of the elbow or just forward of it on the tendon (pain may also be felt further down the arm and into the wrist)
- A weak grip and simple activities such as pouring a cup of coffee, turning a door knob or shaking hands with someone may provoke pain.
- Pain with lifting of heavy objects
- In more advanced cases, pain may also be felt when the arm is at rest or even at night.

Tennis elbow is an overuse injury and is best

treated sooner rather than later since the pain can become chronic and more difficult to treat.

Treatment typically involves the following:

- On your own: In the early stages, rest, ice, bracing and the use of anti-inflammatory medications is often advised. Attention should also be paid to analyzing and modifying your tennis technique, job tasks and even your lifting and weight training form as necessary.
- Physical Therapy: Your physical therapist may employ the use of electrotherapy to help reduce inflammation and stimulate healing, or, manual therapy to correct movement patterns and exercises for stretching and strengthening the affected muscles and tendons. Your physical therapist may also analyse your sport and working habits and make recommendations as to how they might be modified to cause you less pain and prevent future injury.
- Corticosteroids: For severe and persistent pain, your doctor may suggest the injection of corticosteroids. These injections assist in reducing pain, swelling and inflammation, however, corticosteroids may weaken tendons and cause softening of cartilage if used repeatedly.
- Surgery: If after a year other treatments have proved futile, your doctor may suggest surgery. The procedure typically involves either the removal of a portion of the

damaged tendon or the release and re-attachment of the tendon. Less than 10% of all patients with tennis elbow actually require surgery.

Other treatments for this condition which are currently being investigated include extracorporeal shock wave therapy, acupuncture and autologous blood injection.

How do I prevent a tennis elbow injury?

Below are a few tips to help you avoid the pain of having a tennis elbow injury.

- Review your tennis technique – have a tennis professional analyze your game to ensure that you are employing the proper motions.
- When playing tennis, ensure that your racquet is not too heavy and that the strings are not too tight (better to stay at the lower end of the manufacturer's recommendations)
- At work, have your workspace and work habits evaluated to ensure that they are ergonomically sound
- Work on strengthening your wrists and arms
- Keep your wrist straight and in line with your forearm when weight training and when playing tennis
- Warm up properly
- Use ice and rest when necessary.

Sources: Jobe and Ciccotti. "Lateral and Medial Epicondylitis of the Elbow" *Journal of the American Academy of Orthopaedic Surgeons*, Jan 1994; *The Mayo Clinic Staff*, October 2006; *Sports Injury Clinic* 2007.