



Live again, become free from back and neck pain.

The DBC Active Spine and Shoulder Treatment System was developed in Finland over the past 20 years and today the DBC network spans treatment providers in more than 22 countries on five continents. It is currently used for treatment of long-term back, neck and shoulder problems. The DBC systems are completely **evidence** and **outcome based** with a current success rate in excess of 85% after an average of 3-9 weeks' treatment.



Musculoskeletal treatment with proven results

Reasons for back and neck pain

The spine is made of solid, bony blocks joined by discs to make it strong and flexible. Ligaments reinforce the spine and powerful muscles surround it for protection. It is actually difficult to damage the spine.

Separating fact from fiction

- Most people with back or neck pain do not have major spine damage.
- Very few people with back or neck pain have a slipped disc or pinched nerves. Even a slipped disc usually heals by itself.
- Most changes in X-ray or MR Imaging are normal changes related to age, like when hair turns grey or skin gets wrinkly.
- Even with today's technology, doctors cannot determine an overriding cause for back or neck pain, which may sound disappointing. Serious disease or damage to the spine, however, is rare. Very few patients need surgery for back or neck pain.
- Most pain arises from the discs, muscles, ligaments and joints in the spine. They are simply not functioning as they should, especially when lifting heavy loads or when put under pressure.
- Emotional stress can increase the amount of pain you feel. Tension can cause painful muscle spasms.
- People who are physically fit generally experience less back pain. If they do get back pain, they recover fast.
- The answer to back and neck pain is to get the affected areas into functional condition and become physically fit!

What is active treatment and rehabilitation?

Active rehabilitation uses exercise as a method of treatment. The aim is to restore normal function to the back, neck and shoulders. For most patients the pain decreases during the active treatment period. An inter-disciplinary approach (medical doctors, physiotherapists, biokineticists and occupational therapists) is utilized to achieve results in conjunction with DBC Active Care Conditioning Equipment and treatment protocols.

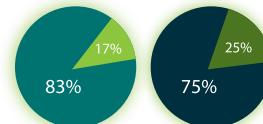
You may need active rehabilitation if any of the following symptoms occur:

- Your pain is intensive/unrelenting;
- You cannot manage your daily activities;
- The pain occurs often; and
- The pain is prolonged or continuous.

After the doctor confirms that you do not have a serious pathology that warrants surgical intervention, an individual treatment program can be designed. It consists of carefully planned exercises and guidance on how to deal with the problem and live a normal life. Even if you have had previous surgery, a treatment program can be designed.

Results you can expect

- Decrease in pain
- No change
- Increase in strength & mobility
- No change



Evaluations and Measurements

Questionnaires and measurements are used to assess the severity of the back or neck problem and to design an individual treatment program. The duration and content of the program may vary depending on the type and severity of the problem.

Treatment

The treatment consists of active exercise with appropriate weights and motion. Guidance on how to use the spine and lead a normal life is an important component of the treatment. The exercises are targeted at the trunk muscles of the spine, helping to restore mobility and control. Relaxation is an essential part of the program. After the initial treatment, you receive a home program on how to maintain the results long term. The attending doctor can follow your progress based on regular check-ups.

Some facts about back and neck pain

- Back and neck pain is very common. Four out of five people suffer from pain at least once during their lives.
- Back or neck pain is usually not caused by any serious illness or damage.
- Most of the pain resolves quickly; at least enough to continue normal activity.
- Half the people who get back or neck pain experience recurrent pain within two years. Still, this does not necessarily mean that it is a serious condition.
- If the pain is intense you may need to reduce your activity for awhile; although bedrest for more than a day or two usually does more harm than good. Stay active!
- People who recover the fastest and cope the best are those who stay active and continue with normal activities. The human spine is designed for movement.
- If the pain is prolonged or recurs often, active rehabilitation through exercise is highly recommended to recover lost function and gain relief from pain.

Remember

The DBC Treatment System can be used for most types of back, neck and shoulder pathology. The treatment is cost effective and the majority of costs are covered by medical aids.

For more information contact one of our Centres:

Silver Lakes: Tel: 012 809 0930 Secunda: Tel: 017 631 2992

Centurion: Tel: 012 664 8244 Sasolburg: Tel: 016 976 9568

Emhaleni (Witbank): Tel: 013 656 0999/3991

happy energetic
energetic healthy
strength strength
strength vigor



Geniet weer die lewe, bevry van rug- en neklyn.

Die DBC Aktiewe Rugstring-en-Skouerbehandelingstelsel is oor die afgelope 20 jaar in Finland ontwikkel en vandag omvat die DBC netwerk behandelingsverskaffers in meer as 22 lande op vyf vastelande. Dit word tans gebruik vir die behandeling van chroniese rug-, nek- en skouerprobleme. Die DBC stelsels is volkome bewys en uitkomsgbaseer met 'n huidige suksesyfer van meer as 85% ná gemiddeld 3-9 weke se behandeling.



Spier-skelet-
behandeling met
bewese resultate

Redes vir rug- en neklyn

Die rugstring bestaan uit soliede, benerige blokke wat deur skywe aanmekaargebind word om dit sterk en buigsaam te maak. Ligamente versterk die rugstring en kragtige spiere omring dit vir die nodige beskerming. Dit is eintlik moeilik om die rugstring te beskadig.

Ons onderskei tussen feite en fiksie

- Meeste mense met nek- of ruglyn het nie erge werwelkolom skade nie. Baie min mense met nek- of ruglyn het gehernieerde diskusse of beklemde senuwees. Selfs gehernieerde diskusse genes gewoonlik spontaan.
- Meeste veranderinge op x-straal of MR-skandering is normaal en verwant aan ouderdomsdegenerasie soos hare wat grys word of velverplooing.
- Selfs met vandag se tegnologie is dit moeilik vir dokters om 'n definitiewe oorsaak van nek- of ruglyn te vind. Alhoewel dit teleurstellend mag klink, is die goeie nuus dat ernstige werwelkolom siekte of-skade eintlik skaars is en dat baie min pasiënterug-ofnekchirurgiebenodig.
- Emosionele stres kan die hoeveelheid ervaarde pyn vererger en spierspanning kan pynlike spierspasmas veroorsaak.
- Mense wat fiks is, voel nie net minder werwelkolom pyn nie, maar herstel ook vinniger van patologie.
- Die antwoord vir nek- en ruglyn is om die aangetaste areas so gou doenlik funksioneel en fiks te kry.

Wat is aktiewe behandeling en rehabilitasie?

Aktiewe rehabilitasie behels oefening as behandelingsmetode. Die doel is om normale funksie in die rug, nek en skouers te herstel. Vir meestepasiënteverminderingdurendedie behandelingstryperk, 'n interdisiplinêre benadering (mediese dokters, fisioterapeute, biokinetici en arbeidsterapeute) word gevvolg om resultate met gebruikmaking van DBC Aktiewe Sorg Kondisioneringstoerusting en behandelingsprotokolle te behaal.

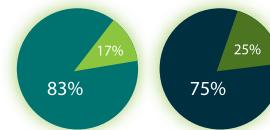
Jy mag aktiewe rehabilitasie nodig hê indien enige van die volgende simptome voorkom:

- Jou pyn intensief is/jy onophoudelik pyn verduur;
- Jy nie jou daagliks aktiwiteitie kan behartig nie;
- Die pyn dikwels voorkom;
- Jy langdurig of aanhoudend las van pyn het.

Nadat die dokter bevestig het dat jy nie 'n ernstige patologie het wat snykundige ingryping regverdig nie, kan 'n individuele behandelingsprogram ontwerp word. Dit bestaan uit sorgvuldig beplande oefeninge en voorligting oor hoe om die probleem te benader en 'n normale lewe te lei. Selfs al het jy vorige chirurgie gehad, kan 'n behandelingsprogram ontwerp word.

Resultate wat jy kan verwag

- Afname in pyn
- Geen verandering
- Toename in krag en mobiliteit
- Geen verandering



Evaluasies en Metings

Vraelyste en metings word gebruik om die hewigheid van die rug- of nekprobleem te bepaal en 'n individuele behandelingsprogram te kan beplan. Die tydsuur en inhoud van die program mag wissel na gelang van die tipe en hewigheid van die probleem.

Behandeling

Die behandeling bestaan uit aktiewe oefeninge met toepaslike gewig teen beweging. Voorligting oor hoe om die rugstring te gebruik en 'n normale lewe te lei is 'n belangrike komponent van die behandeling. Die oefeninge word toegespits op die rompspiere – dit help om mobiliteit en spierbeheer in die laer rugte herstel. Ontspanning is 'n wesenslike deel van die program. Ná die aanvanklike behandeling ontvang jy 'n huisprogram oor hoe om die resultate op lang termyn op peil te hou. Die begeleidende dokter kan jou vordering by wyse van gereelde ondersoek dophou.

Enkele feite aangaande rug- en neklyn

Rug- en neklyn kom baie algemeen voor. Vier uit vyf mense moet minstens een maal in hul lewe pyn verduur.

- Meeste van die pyn verdwyn gou; minstens voldoende om met normale aktiwiteitie te kan voortgaan.
- Helftendienmense wat terugval van rug- of neklynnervaar binne twee jaar terugkerende pyn. Dit beteken egter nie noodwendig dat dit 'n ernstige toestand is nie.
- Indien die pyn intens is, mag dit vir jou nodig wees om jou aktiwiteitie vir 'n tydjie in te kort; alhoewel bedrus vir meer as 'n dag of twee gewoonlik meer skade as goed doen. Bly aktief!
- Mense wat die vinnigste herstel en die beste bybly is diegene wat aktief bly en met normale aktiwiteitie voortgaan. Die mens se rugstring is ontwerp vir beweging.
- Indien die pyn langdurig is of dikwels terugkeer, word aktiewe rehabilitasie by wyse van oefening sterk aanbeveel ten einde verlore funksie te herwin en pyn te verlig.

Onthou

Die DBC Behandelingstelsel kan vir meeste tipes rug-, nek- en skouerpatologie gebruik word. Die behandeling is koste-effektief en meeste van die koste word deur mediese hulpfondse gedek.

Vir meer inligting kontak een van ons Sentrums:

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