

354aR- Treating a New Patient with Laurie Hartman

Steven Bruce

Good evening. Well, this is an interesting one. This is a very interesting evening, I have managed to coax the brilliant Laurie Hartman into the studio to treat a completely new patient. Now, I'm sure you don't need any convincing about the value of watching one of the world's most famous osteopath go through his own routine with a patient. But let me give you just a tiny bit of background on this. In this part of the country, everybody knows the name Bernie Keith. He's a BBC Radio Northampton presenter with a primetime for our short running show running throughout the week. And a couple of weeks ago, he was kind enough to get me on the show in my capacity as the Ashgrove clinic director. Now the agreed topic was back and knee pain but I'm driving in No, it is and I heard the previous presenter say to their county Bernese boulder wants some help with his tennis elbow as well. So I'm thinking Bloody hell, I'm gonna have to do an examination or diagnosis and treat this elbow all in the space of a 10 minute radio slot and then make sure I don't put a foot wrong because someone's bound to be out there and they'll pull me up on it if I do anything wrong. In the end, Bernie was very kind about this, he stuck to the agreed topics, but his elbow started nibbling away at me and I remembered Laurie Hart and telling me something on one of his courses here about being asked if he could treat a tennis elbow. Laurie, welcome back to the studio. You remember what you told me?

Laurie Hartman

Yes, I was in Norway. And there was a course with physiotherapists and physicians. And I was one of the speakers there the first time they had an osteopath. And they asked the speakers to come forward and say what they'd done with tennis elbow. And one said, he strapped it another one, put injections did all that. And when it was my turn, I was the last one. They thought wasn't important. And I stood up and said, Well, I've never seen a patient with tennis elbow and I said, What? And I said, No, I've seen people with tennis elbow. And sometimes it's the feet because they're flat. This makes you walk in a strange way. If you're stressed, you have a stick out you bang it. And if you've got your neck hyperextended that causes so you've got to look at the patient, not just the elbow. And the others were furious with me, but that's what I say. Yeah,

Steven Bruce

and and I think that struck a chord with everybody on the call today. This is why I thought of you when Bernie mentioned his elbow, I thought well, we won't get him into the clinic. We'll get you in and we'll see what what transpires from that. So that's, that's where we went with my my thought frame at the time. Bernie is great to be able to repay the compliment and get you into my studio, it's great for you volunteering your elbow like this. As you probably gathered there, we don't actually have any idea that this is a tennis elbow, we're not because we haven't looked at it yet. And, well, tennis elbow can be all sorts of things. Imagine it is the tennis elbow. So I'm just gonna shut it up. And I'm gonna let the professor here loose on here if that's alright with you.

Bernie Keith

But I can say Laurie with impunity, it is tennis elbow, because my hairdresser told me always right?

Steven Bruce

The taxi driver,

Laurie Hartman

right, tell me about it. Where does it hurt,

Bernie Keith

it's very specifically on that bone in my elbow, there. And then the pain shoots down to about halfway down, my forearm doesn't go above it. But it's down. When I wake in the morning, and I stretch my arm, I can't get it straight. And some days the pain is excruciating. Today, it's a bit like taking a car into a garage. When the car's broken, it gets to the garage, and it's fine. And my arm at the moment doesn't hurt. But this, I'm left handed. So this is my business arm, I take things out of the oven. It hurts. I was carrying some speakers, down a staircase that was given me a terrible chip. I believe the technical term is chip is given me. And it feels as though that something has been ripped in my forearm. And along here at times it can feel like something's moving. And how does one describe pain? It's difficult, isn't it? I thought in the week when it happened, I was getting something off of the shelf. And it was as though you had two sheets of plastic. And one was being torn off. And the other was like suddenly was separating in my arm

Laurie Hartman

when we got lots of tissues and that lots of reasons why that can be hurting.

Steven Bruce

Can I interrupt for a second? Yes. Because we discussed this when I was on your show. What have you done to help it Bernie? In the two months or so that

Bernie Keith

you've read this book, and it happened on the 23rd of January? Well, that's when I when I woke up and I felt terrible pain in my arm. And so I've just carried on doing what I do. I put on deep heat. Because that's what you do. You know, when I can't stop using my arm know?

Laurie Hartman

When is it worse mornings, evenings or no.

Bernie Keith

So this morning when I get out of the shower, and when dry stone back by doing that for the town, it will hurt them. When I get up in the morning. It hurts. And when I get into bed, if I should lie on it, then it hurts. You know, I was there during the other day I was getting something out of the boot of the car. And I just use this arm because this is the one that I use. And that was a pain right now.

Laurie Hartman

Put your hands out like that. I'm just clenched the fist. Does that. Clench them quite tight. Does that right? No, no hands just drop and then lift them up. So it's not a conventional tennis elbow as people get from the backhand tennis there's there's more to This right? Sitting as you all now, what's your general health? Mike is going down? Yeah, yeah. You don't know the problems,

Bernie Keith

aches and pains that won't get through. It's been 51 Yes. Okay.

Laurie Hartman

And not really medication. Right. Okay, let's wander to the table and have a look at this and see what's going on. Take this off first

right. Let's have you just lying on to back on the table. If I do anything that gives you any pain or discomfort you tell me straight away. Stop. Just have a look at this one fast. Just test these reflexes. It's good. It's good. Let's have a look at this.

Steven Bruce

Can you talk us through what you're actually held at palpating

Laurie Hartman

that the head of the radius where it shifts, and that's nice and tight in good condition. Full extension for supination and pronation no particular problems. Just check the neck just here looking at the side bending several times. When did you last have your glasses checked?

Bernie Keith

This time last year

Laurie Hartman

you might need a bit of a change

you can think that's what's causing it but that doesn't help because the nerve supply from the neck isn't right. You've got a lot of problems. Right? Look at this doesn't get terribly well. Prone it's reasonably good supinates A little no

Steven Bruce

discomfort is that

Laurie Hartman

have a look at this wrist. Eight little bones in there which can accommodate to this look at the shoulder

now I think the neck is part of this. This is quite specifically just there. That's the point. That's where the muscle attaches is that and and yeah yeah just try and let it go just do some very gentle circles here with my thumb. The muscle is in not a very good state there's a small tear in the muscle that might be in the fascia over it once I've done this friction it should improve Is that pretty? So yes

Bernie Keith

yes

Steven Bruce

so that you said you couldn't remember what might have caused

Bernie Keith

this? No, it's just things that were possible. It was my birthday Steven so you know one's memory is often hazy around birthdays but I did trip on a shoe and then fall back against a wall and I don't think I hit my arm but maybe you know once response when before is to put your arms out sharply to stop yourself before

Laurie Hartman

see if I can free this joint this might make a bit of a bit of a monologue from

Bernie Keith

it's 10

Laurie Hartman

More than before all

Bernie Keith

we have that doesn't work let's

Laurie Hartman

just try and I think I've completely useless little push this technique just very specifically gets

just one more here

turning to the right, opposite side at that one gap You have that a one little stretch on

Scotland free this neck then we can come back to the C six on the side which is a little bit tight just free this up with a gentle push in May a bit of a creep

Steven Bruce

Did you ever want to be free

Bernie Keith

I just I felt something move right here anything

Laurie Hartman

I think that's probably the pain in the elbow that's causing this rather than coming back to here

do some very deep friction here, which will be quite uncomfortable. Surely use it. I think after this you will need something applied to this possibly laser which you can sort out in the clinic and there's a strap you can bite around this which will make a big difference.

Bernie Keith

But what is it is the trauma.

Laurie Hartman

The muscle is a little tone, but if you make a fist Now does that hurt?

Bernie Keith

I can feel an ache. Yeah.

Laurie Hartman

Now what about if I do that now make a fist because that's putting a strap there that's stopping the muscle working there because I'm supporting it there. So a strap and tiny thing two inches wide nobody can see it. We will fit under a shirt just around there fairly tight. That'll make them definitely

Steven Bruce

we can sort out getting getting that for you making it's the right size

Laurie Hartman

I'm just doing some very deep friction along this muscle because you've not had good circulation for quite a while

Bernie Keith

that's painful that

Laurie Hartman

that's lower down in that muscle just putting steady pressure is that I can leave that in contact for about 30 seconds because that should stop that that's just the same pressure on bulk from that muscle

Steven Bruce

is that only needs 30 seconds

Laurie Hartman

I think so. Yeah. As soon as you put the pressure on with one finger that makes a big difference

Unknown Speaker

yes

Laurie Hartman

that's the bit that you sense that the sliding motion that's a bit sketchy very gentle circle circular motion I think dramatic emphasis simple stuff

Bernie Keith

that's I can feel

Laurie Hartman

that I can feel a lot here

Steven Bruce

curious how you can do something like this and not recall Vince did it isn't it

Laurie Hartman

damaged this so easily and normally you can get these right pretty quickly this

free that giant

as much as you can a lot of compression stretching a bit

that clean a bit that's better.

Steven Bruce

Suited Can you explain why that's important.

Laurie Hartman

The joint is stuck which is in the middle of all this and that that's aggravating situation. It's not entirely the joint which that way I can get a miracle with this. If the joint is stuck, it's causing half the problem

Bernie Keith

of what will cause a joint and

Laurie Hartman

it happens you make a sudden movement It just

sits up now with his legs over the side. Let's have a look and see. Right? Touch the arm see how it feels? Is it better or worse or no different?

Bernie Keith

Nothing that has no pain.

Steven Bruce

Now, just to clarify when you came in when you said it was fine today, but actually when you did that to do it, it did still have a

Bernie Keith

very specific point on you know, bone there the knobbly bone. Yeah. That was very tender to the touch. No, it's

Laurie Hartman

quite hard because it should still be a bit tender. It's not at all.

Steven Bruce

So that we've got nothing nowadays.

Laurie Hartman

No, it won't. It won't be right. It will be quite sore after this because one of them. It's very uncomfortable when it stands up. Reaction over the next day or so you'll be cursing. after that. It should be better. Yeah,

Bernie Keith

I've already crossed you said there was no drama. I thought genre and estate. There's no, no very simple stuff. And now I can feel that there. Yeah, but it's not at all as strong as it was.

Steven Bruce

So do you know would you habitually say well take whatever your preferred anti inflammatories are for a day or so what do you just say ice heat, wave it around. anti

Laurie Hartman

inflammatories make some difference to this because it kills the internal inflammation. But if it's going to make your grip things too hard, and you're back in trouble again. So if it's not hurting much, I wouldn't bother. But I do think strap would make a big difference. Just their little bit tight. Yeah, not there. But they're below the elbow. Because as if you make a fist now, you see the muscle bunching. And if I know the first go now if I tense now, grip your fist again. You see it's not doing it. That makes that muscle work. A little strip below.

Bernie Keith

And that's why the pain stopped there. Yeah, yeah. went as far as that. Yeah. And then it was fine.

Laurie Hartman

I'm hoping it should.

Bernie Keith

Thank you very much.

Steven Bruce

When we return. We'll carry on our conversation from there.

Laurie Hartman

That was very undramatic amortised. Well,

Steven Bruce

I picked Bernie because I remember what you've said about robo is and I thought this, this could be interesting because actually, it's not you know, osteopaths are meant to be able to work on elbows without any problems. So because it's not the most common thing we see, because people come to us with back problems. And it gets a bit dull. But I also wanted to, I was hoping that there will be an opportunity for you to use your manipulative skills. Here, when we saw them on the elbow, we saw them on the neck. And as you probably felt, Bernie, I mean, the movements are very, very small, but fast and precise, when it's

Bernie Keith

remarkable, really, because it was just like someone just rubbing an arm. And yet you've done that kind of work on it. But when one expects it to be as a layman, one expects it to be Paul, the patient screams. And there wasn't.

Steven Bruce

It was when but when when Laurie worked on your neck, was that uncomfortable?

Bernie Keith

Now that bit was a bit scary. But

Steven Bruce

did you did you think it was scary? Having a network?

Bernie Keith

No, but I hadn't drawn the connection between that. And this. You know, I assumed it was just here in it's quite some way from that to my neck. Yeah,

Steven Bruce

I mean, the audience won't be surprised by this. I mean that the connection between the wrist of the elbow, the elbow, the shoulder and vice versa, and the neck for all of the arm because they know the the anatomy and so on. But a lot of patients are in your situation. And we do have to kind of explain to them why this is why I'm not working where you think I work. I have in the past I'm sure you must have once upon a time had to somehow work out how I've justified to the patient. I was working on the wrong arm. Turned over on the table. I can't do left and right and lots of our audience and have been in that position. You get quite good at bullshitting. manipulating a peripheral joint like that different to doing spinal joints, you've always said

Laurie Hartman

yes, in the spine. Normally, if you've got a piece of wood, you're breaking it over your leg, you test it two or three times, then you go back. If you test it 10 times, you get tired of it and it doesn't go. But you always test it two or three times in the spine and normally could use one, two, and then the third go on the elbow arranging anything between each of the tallest, but it's essentially you're trying to feel the accumulation of tension. And if you feel that building, it didn't build terribly well because the joint was in trouble but I couldn't quite get that to the point where I could open it. And I tried three times that's enough. I use another technique One gap, which is it's difficult because you get the instant chain. Yeah.

Steven Bruce

Well, that's, that's actually quite useful for people, isn't it? I mean, you're treating your the whole consultation and treatment, including my intro took about 16 minutes. Yeah. And I remember you saying in the past that a lot of osteopaths spend too long with their patient. Yes.

Laurie Hartman

Yeah. I mean, I could have done more soft tissue, but it's not gonna gain a lot. Right. But

Steven Bruce

what about you, buddy? I mean, you as a patient, you come to see, let's, let's say, this is a normal clinic and not a studio, but you come to see a patient. It's an osteopath. Are you? Are you expecting to be kept there for half an hour an hour and talked to and rubbed and moved around? Or would you be happy to go in there? 15 minutes, I've done what I need On you go?

Bernie Keith

Yeah. Be happy with the last, you know, because you can just someone who's an expert, you know, expect to have a smooth consultation? And then someone would lower his knowledge and your loan? Yeah, you would know what it is. I mean, to me, it's something that, you know, it's going to cause my imminent death, because you start these having these thoughts. But you know, what is going to be in that you're likely to know what is. And that's what one wants

Steven Bruce

to know, still comes as a surprise to me that, as you were saying, before we went on air, there was a young person aches and pains you shake them all off? And yes, you can very often you can just work through them, and they'll go away, because the body heals much more quickly. But you were saying this, you didn't feel is gonna kill you. But it's it is so much more dramatic as you get older. Because you know, it's going to last a long time. It's your, your, your dominant hand. And obviously, you're doing that thing with the slider that we talked about earlier on in the studio, you don't want to aggravate that,

Bernie Keith

what have you so connected with my work, because I write every day for hours. And I use technical equipment, faders knobs and buttons for hours of every day. And then I go on the computer, you know, and I do stuff on the computer. And I wondered if it was if it was that, but I'm the kind of person who would just work through it, Laurie, I can't remember the last time I went to the doctor, let alone an osteopath. And I would just go go through it. Because that's how I've been brought up. That's what you do. Now does that aggravate it. Have I come to you in January when this happened would have been?

Laurie Hartman

It would have been easier because they wouldn't be it wouldn't be as tight as it is now. And the body gets used to it and it keeps it the same but doesn't make a lot of difference.

Steven Bruce

I have got a quite a lot of questions, which I've just realised have been hidden from me for a few minutes. And then we'll rush through here. So if you don't mind lawyers in the audience would like to know someone who that machines are calling fancy human, unless they call themselves that says Why did you suggest the patient got his eyes checked again?

Laurie Hartman

Because if you've got something if you aren't what have you got a stigmatism or if you've got with the eyes, or just shorts on short sighted

Bernie Keith

shorts, and I did have retina problems, first record detached retina. So you know had an operation on that. So is it connected to my sight? Or is it connected to the cabling in the head,

Laurie Hartman

if you've got an astigmatism where the eyes don't focus properly, you're looking ahead with your head slightly on one side, and that can affect it. So I thought that was relevant. I think it's the pain of this. That's my attention rather than the other way around. But it's always best to check the neck and see what's there. And it was nothing special, tiny little bit.

Steven Bruce

This might be slightly contentious. Sarah says that Nora, your soft tissue techniques are very gentle. Is that normal for you? I was looking at your face. And I thought those don't look very gentle at all

Laurie Hartman

at times. Now. They were very gentle because I was just pushing so much that he could relax. But more than that, it would have been and I was pushing quite hard with my fingertips

Steven Bruce

do you employ when you've demonstrated soft tissue in the past and you had people particularly looking at the LCS you have a particular approach to that of applying pressure applying a bit of finding the direction of strain and then holding it for a period of seconds? Do you have a similar approach to sort of peripheral muscles no

Laurie Hartman

and peripheral muscles I'm working continuously because if you leave it as few segments as make a difference, literally going in home attention. And then as it releases just one. Okay?

Steven Bruce

Robins Robins asked about the sorry somebody's mic has just gone and that's gonna get fixed I think Robin says what class what epicondyle strap do you recommend he uses an ASA UK one with a bio skin

Laurie Hartman

sleeve? Doesn't really matter so long as you're strapping it no given whatever you're buying, yeah.

Steven Bruce

Okay, just give us a second the moment Laurie because your mics gone. So we need to replace the box on it. So the answer to that question while we're getting Laurie remind is that it doesn't care what the strap is it's as long as it's applying the pressure below the the muscle origin and then that will be fine. But Rob When please come back and tell us why the one with the bio skin is really, really

nice. Sounds a bit. I'm thinking you think Fox skin? Sam says, will you help him? This is a great one. Would your treatments normally be that shortly? Surely not.

Laurie Hartman

Yes. Yeah.

Steven Bruce

How did it start out when you were in your early days,

Laurie Hartman

I started off with an hour for new patients. And it was over 10 minutes late, I was panicking. And then, when I got busy, I got so many people waiting for me. But I made it 45 minutes, I was still rushing in eventually, it was half an hour for new patients, and only 15 minutes if they'd been before. And as soon as I cut into 15 minutes, they stopped reacting, they were better. Because I was very specific to the point that's in trouble. And I don't expect people without experience to be able to do that. But by shortening the treatment, you definitely get less reactions.

Steven Bruce

Yeah. And we've actually we've had the same in my clinic, the feedback from one of the practitioners who went on one of your courses, and she cut her treatment times down. And she said, Well, it's it's improved, and the patients are getting better, quicker. And the whole thing was was better. But we seem so school, you know, steel put the and probably in chiropractic as well that the patients expect us to be there and do lots for their money. And actually, if we're not helping the patient when perhaps delaying them, repair them, we shouldn't be doing it. I

Laurie Hartman

think if you just go and you just do the manipulation, you only get a partial relief, because you've got to work on soft tissues and assess the situation thoroughly. But essentially, not looking out the window massaging and waiting for things to change, and putting pressure waiting to it starts to give. And that's why I kept saying is that hurtings Isn't it because you've got a feedback all the time. Salamis

Steven Bruce

asked you about the clinical reasoning behind your diagnosis and treatment.

Laurie Hartman

Our clinical reasoning I've been doing this 56 years, and I've seen several 1000 of these. So I know what it is as soon as it's done. This is not a typical tennis elbow in some ways. Because if you grip the fist, it normally hurts straight away. grip that way doesn't. That's why I didn't give specific advice on what to do. Not gonna make a big difference to this. This is this is an unusual one. Yeah, right. Okay.

Steven Bruce

And if this were in your own clinic, would that have been the extent of your examinations? Where would you have gone any further testing any more of the spine? Or?

Laurie Hartman

I would have looked up a thoracic? Possibly, yes. Because that's often involved with a shoulder blade, but and reflexes. That's all I've been doing.

Steven Bruce

An interesting I noticed you were doing your reflexes with your fingers, not with a tender now

Laurie Hartman

I didn't have one hand. You could have asked

Bernie Keith

have technology in science changed your work? There's 56 years? Because that was not technology that was this your hands was

Laurie Hartman

yes. Yeah. No, I think that's a combination of experience. And, and just working by instinct, almost, I'm afraid. Which is something some students get significant. I think

Steven Bruce

technology has helped us in a number of ways, not least, I mean, the burnout in practitioners, if you're doing everything with your fingers in your hands, it gets to hurt after a while. And things like laser and Shockwave. They make things a lot quicker, because actually, laser works effectively by improving oxygen transport, and therefore rapidly speeding up the healing, which we can do with our hands. But it just takes a lot longer to do it that way. And it's more painful for us. So technology does help in that regard, doesn't it? But actually that we had a show last last night and we were talking about the the value of touching patients there is a therapeutic value just in doing that, especially the way Laurie does it. And Laurie, the first part of his courses is how do you put your

hands on a patient because it's not just clump. There we go. It's he's he's good at it, as you might imagine, you've experienced how long before you'd see this patient again?

Laurie Hartman

And if it's as acute as this is within within about a week, I'd see that again in about a week.

Steven Bruce

And your advice to him in the meantime, obviously we've got the epic gone to Australia, yes,

Laurie Hartman

that'll make a difference possibly laser treatment if it's still sore. And other than that the second time depending on what I find. They're not advice about what he should and shouldn't do. Because we're given too much it can't take them all in. Yeah, so the second time I would say about gripping and grip that way and not that way and that sort of thing.

Steven Bruce

Were you hot on giving exercises to patients as well no.

Laurie Hartman

I started off as not giving says Then I started to give a few then I found people weren't doing it. And some people are give access to some of them on this, I don't think makes a big difference. Yeah, yeah.

Steven Bruce

This is a So the tricky one to UX is boring things if you're going to exercise your hand anyway during the day and therefore your your elbow just saying Go, go and pick up something exercising wouldn't really help. Yeah. And you get a piece of pissed off with

Laurie Hartman

most people in December. If the grip with a hand that way, they're using those muscles that hurts, but it doesn't. And if you're doing a backhand, it'll hurt a forehand won't. So and you haven't got any of that. So it's not a typical one in that respect. It's just the tissue damage. Tennis

Bernie Keith

elbow is kind of a layman's term. And just really, you know, as someone asked the hairdresser, it was actually just a jokey thing. Oh, you've got dents. I'm gonna ask someone else. You've got tennis elbow. Yeah, we don't know what it is. No, I have never played tennis up. Never pay 10.

Steven Bruce

It goes beyond just the hairdresser and the taxi driver giving you those diagnoses. And and I don't mean in any way to disparage GPS, but no GPS, by their own admission are not trained in musculoskeletal medicines, and it's just not what they do. And very often, if you go to a GP with a shoulder pain, they'll say it's a frozen shoulder or with an elbow pain. They'll tell you it's tennis elbow and and probably their treatment for it will be anti inflammatories anyway, so it doesn't really matter what they call it. But patients like to have a name for their condition. Makes them feel better. I've got a diagnosis now. So that's good. We have had we have had patients who have had sciatica in their arm now that is

Laurie Hartman

so how is it now? Does it still hurt?

Bernie Keith

I can feel it there. Yeah. But as I'm sitting talking to you embedding it, you know, it doesn't know when I attach it, but I'm not in the habit of sitting down.

Steven Bruce

Interesting here I've had someone say, and I, I could have predicted this question. Can we reshoot reassure the viewers that all consent and risks had been covered prior to recording? As somebody else has said, I assume the patient was fully informed of all the possible risks. And so this is a big issue in what we do is that well, in any medicine, you have to get what's known as valid consent from the patient's. Well, now we'll now have a big dispute of what constitutes valid and what constitutes informed consent. And it doesn't actually matter, but invalid consent. So in order for us, for me, or for Laurie, or anyone else to treat you, you have to know what any possible adverse effects might be from the treatment, especially if there are any serious risks. We don't have to give you every possible outcome, just the sort of the serious stuff and the likely stuff. And you have to be capable of saying, Yes, I accept those risks. So if you came in here, the worst away from your birthday party, we'd have to say we don't think you're capable of giving us a valid giving us valid consent. Or if you were very, very young, or if you were suffering dementia, and we might we might not be able to accept your opinion that you were consenting. But Bernie, did we we did quickly work you through the procedures beforehand. So we did know what you were. And I'm very grateful as well. And you are now recorded on areas. Having said yes, you can send it. Very few patients are actually filmed saying that he gave consent in treatment rooms. But yes, we did get consent to

Laurie Hartman

this when I was a student because patient came, you've got the permission to work on them. Nowadays, law is very different on

Steven Bruce

that. Yeah. Interesting, as I said to you, as well. And Laurie, what we will do after the show is the notes from this, this consultation will be written up and they will be put into my clinic database that if Bernie would have come and see another osteopath in the clinic, then what Laurie has done today is recorded. And this is its proper medicine that we're doing. It's not just a state show. Laurie, thank you for this evening. And would you recommend any exercises to Bernie or that he just changes when he doesn't work? But we've just talked a little bit about exercises. And we talked about activism modification, didn't we? Do you think anything? Does anything you do at work actively aggravate this as a rule?

Bernie Keith

No. I've been I've always done it. I was telling, you know, I'm now 61. I was doing radio when I was five, you know, so I've always done this kind of stuff, you know, and this is the arm that I use, you know, and that's why I wouldn't have come to see anyone. Because I have to use my arm and I just You just go through stuff. And that's what's interesting. People say to me, Oh, it's a man thing. You know, that's what men do. And I don't know whether that's any different reaction from a female reaction. But one has to get on with one's life. Laurie, you know, I've got a garden that needs digging this week. So it has to be done, you know? Or is that reckless? Is that is that reckless behaviour?

Laurie Hartman

It is. You're using the left hand. There's a lot of strain on the elbow.

Bernie Keith

To stay in and watch Teddy this weekend to get somebody else to do other nations. What do you do, man?

Steven Bruce

We've got a few more questions. Laurie, what do you think about ice and heat?

Laurie Hartman

I think ice is very good. If it's acute, this is this is acute, but it's in such a small area. It's been so long. It's not gonna make a lot of difference. Once if it's hot, and then ice is very good, that reduces heat I don't like because it makes it worse, it increases the swelling that makes the thing worse. So if it's acute ice, if it's chronic, then maybe,

Steven Bruce

and you have a theory on how long people should apply the 30 seconds

Laurie Hartman

off a minute on again, 30 seconds, longer than that you start to get burns, and that's no good,

Steven Bruce

right? But of course, we're gonna put some sort of material between ice and skin unless it's in one of those packs. That's yeah, we can do otherwise. Yeah. We've asked this one about whether Bernie would like longer appointment lengths. OBM says, apart from the neck adjustment and the adjustment of the Radiohead, what else were you adjusting because this was new to this person,

Laurie Hartman

I was working on the muscles that come down from the other. There's one specific muscle, which I can't remember the name of which comes down there. It's one of the stencils. If you make a fist, you can see it standing up. And it was just the length of that that was in trouble. So I did some very deep friction over the joint, then work down that muscle, found the most sensitive point, and just very gentle circular pressure getting harder and harder. Move a quarter of an inch, and then it was the same thing. Just very gentle. Second,

Steven Bruce

you did more than one manipulation on that elbow.

Laurie Hartman

I did the same thing three times was trying to open it with that. And then I did that study technique over the knee. Right, but I couldn't get the joint afraid. Or the Radiohead? That was okay. Yeah. Yeah. So those are the two the two adjustments with Radiohead. And for the

Steven Bruce

six. Yeah, yeah. Bionic Damn. Says, Hey, Laurie. Danny in Edinburgh here. Does that mean something here? It's great to see you. Under what circumstances would you consider the mills manoeuvre? And also, do you see any benefits in the application device? We've just had that to put down investment

Laurie Hartman

is what I did at the end where I'm going to flex tech now arm like this, flex it all the way and then extend it? I don't like that. Because there's the student people did that. It often made them worse.

And occasionally they got. So I don't do that. Because you got to be fairly strong. I did that the first couple of years. And I haven't used it since except as a test. If you've got good control of your hands, fine. I'm at this identity. So row, someone's

Steven Bruce

got asked if you have time to demonstrate the snot out technique again, what I'm afraid you don't. Yeah, we're coming up to the end of the show. But of course, you are back here teaching in a few weeks time. So we'll get you to do on the course that Kim asked whether you would check the first rib and also asked whether you Bernie had been to have your your elbow X ray? No, I haven't. But I wouldn't expect a patient here for now.

Laurie Hartman

It's very rare, you get excited unless you think you something else because that's just shows the bones of what's happening. But

Steven Bruce

nothing in your palpation there was clearly a lot of pain when you were at risk specifically, but nothing there made you think that this could be a fracture?

Laurie Hartman

No. Very specifically over the joint. I mean, I moved from there to there. And no pain, terrible pain. It was very specific. Yeah.

Steven Bruce

What was your answer about first rib? Uh, yeah,

Laurie Hartman

I did look at the first rib when he was lying on his back. And that was working normally. Because that can be a problem with the nerves going down the arm.

Steven Bruce

Perennial sort of question here. JJ says how many sessions of treatment? Do you think something like this would need?

Laurie Hartman

I would normally expect that to be better in three sessions. If it wasn't, there's no point in carrying on. Because

Steven Bruce

you just what's your advice to the patient then?

Laurie Hartman

Then I would then I would go and look for going to his doctor for possibly an injection that would make a difference. But I think you can get this better without injection. strapping it in a bit of time. Yeah. Okay.

Steven Bruce

Talking again, about your, your neck adjustment. How many levers Do you think you applied?

Laurie Hartman

The key one is rotation, a little aside, bending, side shifting compression between the hands, a little compression, and then three times and then tiny portion that went as no big pushes. With just rotation, you've got to hit it with compression, compression, little extension as well. And then tiny. I

Steven Bruce

am as you know, I'm probably boring the pencil for you. But I'm very fond of telling people the first time we ever met you was after I qualified. You ran a course at my college and you wanted to volunteer for your seated OAE adjustment. And you had me sitting on a table and there was a new graduates in the hands of one of the most famous osteopaths around and you were demonstrating the seated technique and I thought this is going to be embarrassing because this isn't what the hell happened there. You just you are have such a knack of locking up a joint without it being uncomfortable or obvious. to the patient and the tiny movement that it took. I was genuinely surprised. I think the whole room had the joint go because it was so well stuck. I think you've done it to me several times. It gets stuck just as frequently. Yeah, but it's all very impressive stuff. And we aren't 515 watching us this evening. So I think you're still a very popular famous osteopath. And we know you're very popular Bernie, but

in this case, I don't think it's me. Well, I can't tell you how much I love watching laureate work. You know, as I said, I've been on numerous of his courses, and I learned something every time even this evening, in the course of a 15 minute treatment, you know, as watching his hands closely, and you just, you've just pick up stuff from Lauria resign. And that's about me done. Thanks to Laurie, for being such a brilliant guest as always thanks to Bernie for volunteering his elbow for the show. Thanks to all the team behind the cameras and elsewhere but mostly thanks to you for being a great audience. Enjoy the rest of your evening.

DRAFT TRANSCRIPT