

**14:30 - 16:00 SP2 - Physiotherapists Symposia**

Hall D

Moderators: **L. Bar Maor**, Israel  
**Y. Cohen**, Israel

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14:30 **Iliopsoas Insufficiency**

Ezra Cezar Levy

*Ariel University center of Samaria, Ariel*

15:00 **Treatment-based Classification for Acute Low Back Pain**

Alon Rabin

*Ariel University Center of Samaria, Ariel*

15:30 **Sacro-Iliac Joint – Implication for Clinical Practice**

Gali Dar<sup>1,2</sup>, Smadar Peleg<sup>3</sup>, Youssef Masharawi<sup>3</sup>, Nili Steinberg<sup>3,2</sup>, Natan Peled<sup>4</sup>,  
Israel Hershkovitz<sup>3</sup>

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## Iliopsoas Insufficiency

E.C. Levy

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The number of problems caused by the psoas is quite astonishing. The biggest factor in **back** and **hip pain** is the **psoas muscle**. The number of problems caused by the psoas is quite astonishing. These include: low back pain, sacroiliac pain, sciatica, disc problems, spondylolysis, scoliosis, hip degeneration, knee pain, menstruation pain, infertility, and digestive problems. The list can also include biomechanical problems like pelvic tilt, leg length discrepancies, kyphosis, and lumbar lordosis.

The aim of this short lecture is to therapists to get to know the psoas, its effects and some options for treatment and self-care.

## **Treatment-based Classification for Acute Low Back Pain**

A. Rabin

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The effectiveness of various physical therapy interventions for low back pain is questionable. The difficulty in establishing the effectiveness of different interventions may result from applying the same intervention to heterogeneous groups of patients. Alternatively, matching patients with the interventions that are most likely to help them yields superior outcomes.

An evidence-based approach to the physical therapy management of patients with acute low back pain will be presented. This classification guides the clinician in choosing the intervention that is most likely to result in a good outcome based on individual patient presentation.

## **Sacro-Iliac Joint – Implication for Clinical Practice**

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**Background and Purpose:** Low back pain that origin from the sacroiliac joint is frequently treated by manual therapists, using mobilization or manipulation, in order to increase joint mobility and correct mal-alignment. The aim of the current study was to determine the prevalence of sacroiliac joint fusion in the adult population and explain its clinical implications.

**Materials and methods:** CT scans of 287 patients (mean age: 62.8) were examined for the presence, side and location of bony fusion along the sacroiliac joints. Extra and intra articular fusions were recorded.

**Results:** Fusion of the sacroiliac joint was found to be gender and age dependent, being most common in elderly males (above 35% after the age of 70 years). All fusions were of the extra-articular type.

**Conclusions:** Fusion of the sacroiliac joint is a common phenomenon among the normal elderly male population. Therapists should therefore carefully examine the usefulness of applying mobilization and manipulation to this joint, considering the risks involved.

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