

Single Case of Parkinsonismus Significantly Improved on “Nordic Walking”

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My disease started, about 16 years ago, with rather frequent falls accompanied by almost total absence of postural reflexes, either with hands or with the legs-the falls liked those of the lead soldier. Starting to walk was delayed, I was dragging the feet and stolpering at many unevenness, especially the negative one. The walking with short steps, with highly reduced accompanying hands movements, developed. The body posture was always more bent forwards. I felt stiff and slow. The Madopar improved the condition somehow.

About five years ago I started with intensive “Nordic walking” rehabilitation. That is a form of physical activity in which natural walking pattern was supported by active use of a pair of specially designed walking poles similar to ski poles, with additional ribbon support for the ulnar edge of the hand. In the begin I was the worst student in the group. I started analysing the principles of the method... so I realised that they are just opposite to the signs of Parkinsonismus. You are forced to make the long steps and at the same time extend the

opposite arm in the elbow and shoulder joint. You force this way to hold oneself upright. My exercises were organized always more frequently to get myself slowly used to new/old pattern of movement. After more than eleven months of continuous exercises I slowly developed the change in my walking pattern. The new/old one were appearing often automatically with grasping the poles and later on even without the poles.

It is now more than three years that I did not fall at all. Of course with the physical inactivity the signs and symptoms reappear, but less intense. They can be suppressed even with nonspecific physical activity. I am looking forward very much to the better weather, in order to walk with the poles for 2-3 h, climbing more than hundred steps and „running“ uphill or downhill in the city park again. Of course for all that you must have significant psychological strength and stubbornness.

Could you motivate a group of patients to reproduce this very useful experience?

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