



Myositis
Association Australia
Keeping in touch

The Myositis Association - Australia Inc is a patient support group.

This brochure has been prepared as an aid for patients and allied health professionals based on patient experiences. It is not a substitute for medical advice.



Get in touch

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Your patient has Myositis

Most Myositis patients are at risk of falling. They cannot get up from the floor, may have trouble getting out of any chair; have difficulty with even a few steps; have very weak shoulders and grip; have swallowing or serious lung issues, and will not tolerate normal repetitive exercise.

What you need to know



Keeping it touch

What is Myositis?

MYOSITIS is a group of rare inflammatory muscle conditions - Inclusion Body Myositis (IBM), Polymyositis, Dermatomyositis, Juvenile Myositis, Necrotising Myositis, Interstitial Myositis, Idiopathic Inflammatory Myopathy.

See www.myositis.org.au for info.

PHYSIOS, OT's, NURSES are advised to:

- GO SLOW
- listen to your patient
- never leave patients unattended
- never assume patients can squat, kneel, climb, step up or support their weight.
- use appropriate mobility support equipment to avoid falls.

All myositis patients have muscle weakness, impaired balance, fatigue and lack of endurance, as well as individual symptoms related to the type.

Advanced IBM patients have very limited muscles in forearms, fingers, shoulders, thighs, glutes and are at serious risk of injury if not supported at all times.

Many IBM patients need powered chairs with lift, tilt and recline functions and have specific bedroom and bathroom needs such as very high over chairs, hoists, lift seats, bidets, electronic commodes, specialised transfer devices, hospital beds.

Safety isn't just a slogan IT'S A WAY OF LIFE

Myositis patients recovering from a fall, fracture or surgery are especially weak and at risk of a serious fall.

Recent studies suggest that exercise is beneficial provided it is adapted to the patient's individual:

- disease activity
- level of pain
- degree of fatigue
- drug dose

Exercises should be prescribed for each patient and commenced slowly:

- at a very low level
- without any resistance
- with few repetitions
- for short periods
- adapted for patient's balance and strength
- under close supervision of a trained therapist.

Focus on functional exercises for basic daily living needs:

- shoulder mobility eg for reaching,
- triceps eg for getting off the toilet and out of chairs
- quads/knee extensors eg for stability and walking,
- gluteal/hip flexor and extensors eg for standing up, walking, rolling over in bed
- neck flexors and trunk eg for raising the head off a pillow
- grip strength eg for holding cutlery and mobility aids, dressing.

Patients with myositis may find hydrotherapy beneficial. Not having to worry about falling over often leads to greater peace of mind and confidence resulting in more effective exercise.

