

Post Reactiv8 Rehabilitation Principles

Overview

Following the implant procedure, the patient will be on relative rest for approximately 2 weeks. At the 2-week point, they return for their initial programming visit. Reactiv8 is programmed to achieve the desired strong and comfortable multifidus muscle contraction and the patient is educated on the details of how to use the device at the recommended 30 minute twice daily dosage.¹

The treatment response is variable from patient to patient, but at about the 2-3 month point most patients will report an improvement in function. At this point many don't report substantial pain relief, but they do note the improvement in function as their low back and other core muscles are starting to perform more normally. Pain relief typically follows functional improvements by a month or two.

The Reactiv8 device is producing ideal activation of the multifidus muscles and the exact current parameters can be adjusted over time as needed to continually achieve the desired strong and comfortable muscle contraction. The principles of the rehab process are to identify major mobility deficits and underlying weakness that may limit the patient's return to normal function and address those through a standardized rehabilitation program. As the multifidus activation normalizes, we recommend integrating other core muscles and core movement retraining through the Functional Core Integration Program.^{2,3} Additionally, rehab goals are to provide professional advice and intervention related to the patient's progression from a healthcare patient (chronic LBP) to an independent individual fully engaged in wellness and higher-level activities as desired. These goals are met through addressing each key aspect (risk factor management) of MSK function and wellness to include nutrition,^{4,5} sleep,^{6,7} functional movement,⁸⁻¹⁰ and exercise/activity advice.¹¹

General precautions to be considered include:

- Avoid Excessive lumbar spine flexion
- Avoid Excessive spinal rotation
- No manual therapy or other treatment applied directly over the strain relief loop or IPG area

General Time-Based Milestones:

Week 0

- Implant
- Post-op instructions per physician
 - Wound care
 - No excessive twisting or bending
 - Lifting restriction
 - Short walks

Week 2

Initial Programming Session
No excessive twisting or bending.
Lifting restriction reduced
Increase frequency and duration of walks

Weeks 3-6

Reprogramming visit scheduled prn
Ensure compliance with BID Reactiv8 session
Slow increase in activity level

Week 6-8

Reprogramming visit scheduled prn
Ensure compliance with BID Reactiv8 session

PT Initial Exam

Self-reported outcomes (ODI, VAS etc)
Manage/track Sleep
Manage/track Nutrition
Breathing screening and assessment^{12,13}
 Breath Hold Time (BHT)
Global Movement Assessment¹⁴
Balance¹⁵⁻¹⁷
 Anterior Reach Test

Manage major mobility findings from Global Movement Assessment

Breathing intervention prn

Caution:

 Compensatory lumbar spine flexion
 No manual therapy over strain relief loop or IPG area

Week 12

Re-test
Consider Sleep and/or Nutrition referral if needed
When major mobility impairments are maximized, initiate the
Functional Core Integration Program:

Flexion Rolling Patterns

 Isolated TrA prn
 Abdominal work

Extension Rolling Patterns

 Isolated LM (Progression from NWB to WB)
 Posterior Elevation (Conc, Iso, ecc)
 Bridges etc.

Quadruped Progression
Bird dog etc.

Kneeling
Chops
Lifts
Presses

Standing
TT progression
Single Leg Deadlift
Get up

Week 16

Re-test

Goals:
VAS < 2.5
ODI < 15
Nutrition managed
Sleep managed
Diaphragmatic Breathing Pattern
BHT > 20 seconds
Global Movement Assessment
 No pain or asymmetry
 Get up
Anterior Reach Test
 Cover 2.5-foot lengths

When Goals are met/maximized initiate Patient Specific Training:

Program designed around patient activity level and fitness goals, work demands and individual risk factor management.

Testing could include:

Functional Movement Screening
Y-Balance Testing
Grip Strength

Individual Pathways:

Personal Training
Fitness Center
Independent Program

6-Month Re-test

Yearly Risk Factor Management

Select References

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