## Just a Few of the Factors Which Can Affect Posture

Structural and	<ul> <li>Differences in the length of the long bones in the upper or lower limbs</li> </ul>
Anatomical	Extra ribs
	Extra vertebrae
	<ul> <li>Scoliosis in all or part of the spine</li> <li>Increased electing in tigging the liggments loss rigid and more flexible)</li> </ul>
	<ul> <li>Increased elastin in tissues (making the ligaments less rigid and more flexible)</li> </ul>
Age	<ul> <li>Posture changes considerably as we grow into our adult forms, with postures in children being markedly different at different ages</li> </ul>
, <u>.</u> .	• Genetics
	<ul> <li>Posture changes temporarily in a minor way when we feel alert and energised compared to when we feel subdued and tired</li> </ul>
	<ul> <li>Pain or discomfort may affect posture as we adopt positions to minimise discomfort. This may be temporary or could result in long-term postural change if the position is maintained.</li> </ul>
	<ul> <li>Physiological changes that accompany pregnancy are temporary (for example, low back pain before or after childbirth), but sometimes result in more permanent, compensatory postural change.</li> </ul>
	• Illness and disease affects our postures, especially when bones and joints are involved. Osteomalacia (soft bones) may become obvious if for example, knees bow outwards and arthritic changes can also affect limb-positioning and subsequently posture.
	• Pain can lead to altered postures as we attempt to minimise discomfort, for example, following a whiplash injury a client may hunch the shoulders protectively; abdominal pain may lead to spinal flexion.
	<ul> <li>If fractures heal incorrectly, this can change bone contours.</li> <li>Certain conditions may lead to an increase or a decrease in muscle tone. For example, someone who has suffered</li> </ul>
	a stroke may have increased tone in some limbs but decreased tone in others.
	<ul> <li>Elderly adults, we tend to lose height as a result of bone changes and a decrease in the thickness of the</li> </ul>
	intervertebral discs. This could result in a stooped posture; postmenopausal women may develop a dowager's hump.
and Recreational	<ul> <li>Consider the postural differences between a manual worker and an office worker, and between someone active and someone sedentary.</li> </ul>
	<ul> <li>Excessive sitting in poor posture for hours at computers or desks.</li> </ul>
	<ul> <li>Truck drivers or delivery couriers who drive for long hours a day</li> </ul>
	Repetitive lifting and carrying
	<ul> <li>Consider the postural differences between someone who plays regular racket sports and someone who is a committed cyclist</li> </ul>
Environmental	<ul> <li>When people feel cold they adopt a different posture to when they are feeling warm</li> </ul>
Social and Cultural	<ul> <li>People who grow up sitting cross-legged or squatting, develop postures that are different from those of people who grow up sitting on chairs</li> </ul>
	<ul> <li>Sedentary lifestyle, use of smartphones, tablets, computers, gaming</li> </ul>
	• Footwear: clothing, especially shoes, can affect posture. Heels throw your body weight forward which can easily catapult you into misalignment.
	• If you wear down either the outside or inside of the shoes faster – because of your usual weight-bearing habits –
	imbalanced kinetic forces are likely to be translated up your ankle, knee, hip, and low back. This may lead to pain or bad posture in any of these joints, as well as your lumbar spine.
Emotional and Psychological	• The posture we subconsciously adopt often matches certain moods and can be temporary, but in some cases it
	persists if the emotional state is habitual; grief, depression, anger
	<ul> <li>People who fear pain may adopt protective postures</li> <li>Stress, anxiety depending on socioeconomic problems, work, divorce etc.</li> </ul>
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Martin Kingston +44 7710 314432
 07710314432
 massage-therapy-london.co.uk