IN HAND

The Newsletter of the RSI and Overuse Injury Association of the ACT
Supported by ACT Health and the Southern Cross Club

Autumn 2016

News & Events

Communicating with your Doctor
Hosted by the Chronic Conditions Seminar Series
Speaker: Randolph Sparks, Clinical Psychologist
When: 7pm, Thursday 21st April
Where: SHOUT, Collett Place Pearce
Cost: Free, all welcome

Managing Depression
Hosted by the Chronic Conditions Seminar Series
Speaker: Karlene Dickens, Clinical Project Officer
When: 7pm, Thursday 19th May
Where: SHOUT, Collett Place Pearce
Cost: Free, all welcome

Helping people with RSI:
- Telephone information service
- Referrals
- Guest speakers
- Events and social gatherings
- Treatment options
- Ergonomic devices
- Voice-operated computing
- Workers’ compensation
- Tips and tools for daily life

In This Issue

| Bits & Pieces | 3 |
| Research in Brief | 4 |
| RSI is not just for workers | 5 |
| Chronic Pain in Winter | 6 |
| Being Left Handed | 7 |
| Using Rats to Test RSI Treatment | 9 |
| Book Review: Repetitive Strain Injury | 10 |

MIINDFULNESS APPS... see page 12
Letters to the Editor

Hi Ann

I may have spoken to you on the phone the other day. Just letting you know I have just renewed my subscription for another two years.

Your organisation has helped me a lot over the last few years, by providing valuable information and real life stories from others with RSI. Just reading about their experiences made me feel less alone. It helps to know there are others who are going through the same and the stories are very recognisable. It can be so difficult to explain how RSI impacts on your daily life to others, particularly when you seem to be perfectly healthy to the outside world because it is an invisible injury.

I am always interested in reading about new research as there is still so much to learn by the medical profession. Any tips on how to make life easier doing daily tasks and how to cope with RSI are also very helpful.

I have passed on your organisation’s details to a number of treating health providers, because they were not aware of your website etc. I hope this will help other patients with RSI. I found out about your organisation by searching the internet at a time when I had just been diagnosed and when I was still in a lot of pain (and therefore with very limited ability to look things up online).

Thank you very much for providing such a great service.

(Name and Address Supplied)

Hello

How are you? Please let me compliment you on the ongoing high quality of your newsletters. I always enjoy reading them, love the visits to the ANG that you arrange, and love the research articles. You may be interested to know that I have been attending for the past eight months yoga classes run by Lynette Dickinson. I found out about her when she gave a lunchtime talk to RSI Association members. So thank you very much for that. I would not have been able to attend any normal yoga classes.

(Name and Address Supplied)
**Bits & Pieces**

**CAN PICTURES PREVENT CARPAL TUNNEL SYNDROME?**

Very little is known about the causes of carpal tunnel syndrome but Shawn Roll, with help from a $2.3 million research grant from the Centers for Disease Control’s National Institutes for Occupational Safety and Health, aims to find out. "According to Roll, what is known about CTS stems largely from a clinical perspective, when somebody already has identifiable symptoms", yet little is known about the causes of CTS. It’s known that it is linked to repetitive motion, forceful gripping and similar activities. However, if five people have a job with the same physical exposures, only three of the five will develop CTS, so clearly there are other factors at play. Roll’s study will focus on dental hygiene students because "When students come into the program … less than 20 per cent complain of any pain or discomfort in their hands. By the end of their two-year program … two thirds of them [have] some sort of pain in [their] hands due to repetitive activities." CTS plagues the dental hygienist profession, with half reporting having CTS at some point in their career. Roll has used sonographic imaging to identify the median nerve – a major peripheral nerve in the upper limb – as being enlarged in chronic CTS patients and plans to research if there is a tipping point between the norm and the enlarged nerve that could help target interventions and prevent CTS in its early stages. He will collect sonographic images from dental hygiene students and a control population to look for changes in the median nerve and its connection to CTS, hopefully leading to better prevention of CTS.

https://news.usc.edu/90994/can-pictures-prevent-carpal-tunnel-syndrome/

**REDUCE WORKLOADS TO IMPROVE QUALITY ON FACTORY LINES**

In any business, reducing costs and improving product quality is essential to maximizing productivity. Previous studies have found that ergonomics and production processes are linked to quality deviations, but a new study has explored the relationship between quality deviation and physical workload. The study looked at the physical workload on 52 different workstations and how the rotations between them affect deviations from quality standards. It also investigated how often workers needed extra time and assistance to complete their tasks over ten weeks.

Results showed that workstations with heavy physical workloads had significantly more quality deviations in the production process than less demanding workstations. Furthermore, static work posture also resulted in workers needing more assistance and extra time to complete tasks.

Rotating between low and high physical workloads helped decrease quality deviations as opposed to rotating through only highly demanding work stations. "This study shows that high physical workload is associated with quality deviations … within line-based assembly, which can be financially expensive for a company."


**NECK AND SHOULDER PAIN IN SEDENTARY CHINESE STUDENTS**

Chinese students are under extreme academic and mental pressure due to competitive performance in schooling. This competition encourages students to study for long periods rather than exercise and can result in a sedentary lifestyle. One study, of over 3000 students aged between 16 and 18 years, has found that students spend an average of 10 hours a day studying and sitting, with many of these students continuing to study at home for more than two hours each day.

Not surprisingly, the levels of chronic pain for these students are extremely high and exacerbated by their higher rates of mental illness (particularly depression).

"The prolonged study time, heavy learning burden, and much pressure from parents, teachers and classmates were closely associated with the prevalence of chronic pain." With most of the students suffering from insomnia, this study also suggests that such living habits promote sleep deprivation.

**Research in Brief**

Are you an office worker struggling with neck and shoulder pain? Try some simple stretches!

If you’re in an office environment and struggling with neck pain, a simple regular stretching routine could help you manage your pain. Ninety-six people in an office were given information about correct posture and ergonomics to use during the day, but half also received further instructions to perform neck and shoulder stretches twice a day while at work.

The group that performed the extra stretches significantly decreased their neck and shoulder pain and those who stretched everyday were considerably better off than those who only did it once or twice a week. The study found that “a regular stretching exercise program performed for four weeks can decrease neck and shoulder pain and improve neck function and quality of life for office workers.” See page 11 for where you can find helpful stretches.


**Military pilots and neck pain**

Although we might not like to think so, some workers are much more valuable than others. So what happens when workers with years of expensive training get incapacitating neck pain? This was the case with the aircrews of Griffon helicopters used by the Canadian military. They discovered a systematic problem in helicopter pilot and flight engineers, with 70 – 80% of crewmembers reporting persistent neck pain which they attributed to flying.

Even worse, 10% of pilots reported pain that was either severe or incapacitating during flight. So researchers got to work to investigate the causes of these injuries and found that the main factor was "an accumulation of tissue damage resulting from cumulative loading during long duration missions (particularly night missions while wearing Night Vision Goggles)". Their recommendation? "Sufficient rest and recovery time between missions results in the repair of tissue damage and the cessation of pain."


**Social support helps recovery for musculoskeletal disorders**

We’ve long known that social support is very important for the recovery of injured workers. A recent research review investigated how strong the association was between social support and work-related musculoskeletal health. Social support includes poor communication channels, unsatisfactory work relationships and an unsupportive organisational culture.

The researchers concluded that "there is good evidence for an association between poor social support and an increased risk in musculoskeletal morbidity. There is also limited evidence that poor social support is associated with musculoskeletal sickness absence, restricted activity and not returning to work after a musculoskeletal problem."


**Massage helps shoulder pain**

Many people with RSI have benefited from massage, but doctors are often reluctant to prescribe it because of the limited evidence available to support it as a therapy. A recent review of over 6000 research papers found enough randomised controlled trials of good quality to support the use of manual therapy for non-specific shoulder pain. They concluded that more "future research is needed to determine the effectiveness of manual therapy and guide clinical practice."

RSI is not just a problem for workers, but also for university students who can have a very demanding schedule of computer work. Students who use computer–aided design (CAD) are particularly at risk. CAD is used by students of architecture, graphic design and especially, industrial design (ID).

The Student Health Service at Delft University in Holland were concerned by the high prevalence of RSI in ID students. In 1999, 274 students contacted the health service about the impact of RSI on their study. This was costing both the students and the university a lot of time and money. In Holland, students are actually compensated financially for RSI that causes delays in degree completion. Moreover, student grants have to be paid for longer.

So the university started a project to decrease the incidence and the impact of RSI in the student population. This involved education on RSI preventions for students and staff, training on how to recognize symptoms early and advice on what to do.

Training on RSI prevention was incorporated into the curriculum. Because involvement in sport was found to be a protection against RSI, sport workshops were organized for students. As well, the university provided an ergonomic working environment for students, plus bulk discounts on office chairs and tables for home use.

So this was a really serious, evidence-based effort to tackle a serious health problem for ID students. Did it work?

The percentage of students with RSI declined, from 82% in 1999 to 59% in 2002. Yes, 82%! But this figure is not as shocking as it sounds, because most of these students did not have a serious problem. In fact, in 2002, 36% of the students with RSI had problems once a week and just 8% every day.

RSI was experienced mainly in the neck, shoulders and wrist and the prevalence rose as students progressed into their degree. 43% of the first year ID students had RSI, rising to 86% of students in the fourth or later year.

Unfortunately, the RSI prevention program was only partially successful. While the percentage of students with RSI fell somewhat, a higher percentage had more severe RSI, experiencing pain every week or every day.

Over the period of the prevention program, the number of hours students had to spend at the computer rose, doubling the number of students computing more than six hours a day between 2000 and 2002.

This research highlights two very important themes. The first is that many graduates already have a work-related condition when they start their careers, even if it’s not serious. Long hours and stressful work environments are likely to worsen these pre-existing injuries. Secondly, training in safe work practices and RSI prevention needs to be part of the curriculum for students for whom computers will be an essential part of their work life, especially for those using Computer-Aided Design.

- Ann Thomson

Dekker, M., Festen-Hoff, K (2005) Prevention of Repetitive Strain Injuries (RSI) at Delft University of Technology

In Hand Autumn 2016
CHRONIC PAIN IN WINTER

When winter comes, it seems to bring with it its own special set of challenges and struggles. Pain seem worse and dealing with it seems much harder. On top of that, one needs to find the energy and fortitude to deal with pain and maintain a normal lifestyle. But why does the winter weather make chronic pain feel worse?

The weather’s effect on chronic pain is poorly understood and there is a lack of conclusive evidence that there is a direct correlation between weather and an increase in chronic pain. Despite this, there is significant anecdotal evidence that winter is a far more difficult time for those coping with chronic pain. According to Robert Jamison, Professor at the Harvard Medical School and chief psychologist at the Pain Management Center at Brigham and Women's Hospital, "67.9 per cent of the people surveyed responded that they were sure changes in the weather had an effect on their pain. Most of the patients reported that they can feel a change in their pain before rain or cold weather occur."

While there is no scientific consensus on how exactly the winter weather affects nerve pain and for many the change of weather can have no significant effects, there are a few plausible theories on why winter seems to be such a troublesome time for those with chronic pain.

The first theory is that it is the changes in temperature that winter brings that increases the pain. While there is evidence that living in a colder climate has no real effect on chronic pain, there is some evidence that the change in temperature can result in an increase in pain. The cold has several effects on your body and your muscles. The cold makes your muscles stiffer and also reduces nerve conduction velocity. The slower response of your muscles exacerbates pre-existing nerve damage and increases nerve pain. The nerves also naturally spasm and tighten as a mechanism to fight off the cold.

The second theory is that it is in fact the changes in barometric pressure that occur when rain and storms approach or there are significant changes in temperature that result in the increased pain. As the pressure on the body rises and falls, tissues expand and contract. "It doesn’t take much expansion or contraction of tissue to affect a pain trigger," Jamison says. This expansion and contraction can also occur when the air dries out.

The other difficult aspect in winter isn’t a physical change, but the cold and shorter days having a negative mental effect, making it more difficult to find the motivation to get up and maintain a healthy lifestyle. Fortunately, there are some simple things you can do that can help you deal with both the physical and mental difficulties that winter presents.

· The most important thing to do is to rug up and keep the cold at bay with increased layers.

· While the cold and the pain can make it hard to exercise, try and get in as much as you feel comfortable doing, as exercise has been shown to have many positive effects in both reducing symptoms and keeping depression at bay. It doesn’t need to be physically strenuous and even gentle stretching, yoga, or just going for a walk can be very beneficial.
· Have a bath or shower! The warm water will help you forget the cold, and as an added benefit, the warm water has been shown to have a soothing effect on chronic pain.

We’ve pictured some helpful clothing ideas that should keep you warm during winter. You probably know about fingerless gloves, neck gators and arm warmers, but have you tried a shrug? These cover all the bits you really need to keep warm - your arms, the back of your shoulders and neck. We’ve included pictures of clothing that’s suitable for home and for the office — do let us know what you find useful.

- Joseph Penington

**BEING LEFT HANDED**

A leading UK union, the GMB, is calling for research into the health problems facing left-handed people at work.

The GMB believes that Repetitive Strain Injury (RSI) is more common among left-handers. The union says this is because equipment tends to be designed by right-handed designers for right-handed users, forcing left-handed workers to make unnatural and awkward movements that can cause permanent injury.

Kim Sunley, GMC health and safety researcher, said: "The union is calling on designers to be aware of user needs and to come up with innovative designs which accommodate both left and right-handed users. "Employers can play their part by supplying tools and equipment that will not injure left-handed workers, who are often the most creative workers."

Wendy Lawrence, a member of the GMB and the RSI Association, says that being left-handed had caused difficulties throughout her working life. "Right-handed design for right-handed users slows down the ability of left-handers to use equipment and tools, as their brains struggle to learn 'the other way round'. Everyday things like public telephones, electric hand power tools, keyboards and mouse are all geared for right-hand use."

I am left-handed—one of the estimated 10 per cent or thereabouts of the world’s population who are. I was born in Scotland in the mid-1930s, a time when in some religious circles it was believed the Devil himself sat on the left shoulder of those unfortunates.

Going to school was a misery (anyone else remember the days of writing with a slate pencil and being forced to use your right hand?) until finally my parents told my teacher they were no longer willing to pull me from under my bed every school morning kicking and screaming. (For your next trivia night, the design of the iPad is based on the slate. This information courtesy of Wikipedia.)

There are many things that a lot of people wouldn’t even think of as being a problem for lefties. For example, if you are strongly a lefty, using the little sharpener most kids have in their pencil cases, means you have to either use your right hand to turn the pencil or turn it towards you with your left hand to engage the cutting blade. In many lecture theatres the chairs have built in desks. Which side are the desks on? You guessed it. A derisory number will have a desk on the left.

Some things that right-handers may not recognise as problems for lefties can be an issue depending on how dexterous the lefty is. Take, for example, mechanical can-openers where you have to be able to attach the opener to the lid of the tin with your right hand and then turn the key, also with the right hand, away from you to engage the mechanism. Zippers on jeans where there is a placket over the zip making it somewhat inaccessible to the left hand can also be tricky.

Scissors and knives have their cutting edges on the wrong side for lefties too. Once upon a time, potato peelers had a fixed blade; nowadays, thankfully, the blade swivels to accommodate us lefties.

The major problems, of course, lie in the use of power tools, probably the most dangerous being a circular saw. For a lefty, the safety guard is on the wrong side and the resulting sawdust covers you instead of being directed away from you.
If you are in the forces, using certain types of guns is also a hazard as the hot shell casings are ejected towards the face of a left-handed shooter.

There's an often-quoted statistic that right-handed people live on average nine years longer than left-handed people, but is there any truth in it? The finding was advanced in two articles in the late 1980s and early 1990s by American psychologists Diane Halpern and Stanley Coren, both published in prestigious scientific journals, *Nature* and the *New England Journal of Medicine Research*.

However, later examination of Halpern and Coren's findings identified a flaw in their argument and nullified their results.

In his 2013 article, Alex Tabarrok said “Over the 20th century, left-handers have increased as a fraction of the population. Left handedness may be relatively fixed as a genetic matter but in the earlier decades of the 20th century children were strongly discouraged from exhibiting left-handedness. As a result, many “natural” lefties learned right-handed behaviour and identified as right-handed adults. Over time, however, the cultural suppression of left-handedness declined and the proportion of adults exhibiting left-handedness increased.

Unfortunately, some insurance companies still rely on Coren and Halpern's outdated research. So, if an insurance company wants to charge you more based on your handedness, take your business elsewhere!

International Left-handers Day is Saturday August 13.

- Irene Turpie

**FORTHCOMING TALK FROM THE CCSS:**

“**COMMUNICATING WITH YOUR DOCTOR**”

7pm April 21st

Randolph Sparks will be giving the next chronic conditions seminar on "Communicating with Your Doctor". This is a very important topic for people with RSI, as we rely on our doctors to be our advocates, especially when it comes to dealing with workers compensation insurers. As many of you will know, Randolph is not only a very entertaining speaker but also a very informative one as well. He's done a considerable amount of work helping people with chronic pain to manage the pain and get on with their lives. He also brings a valuable personal perspective as he has suffered from chronic back and neck pain himself.

Randolph completed his clinical training at the Australian National University, and continues an association there teaching in the Clinical Psychology program, as well as regularly appearing as a guest lecturer in both the undergraduate and postgraduate Psychology programs. He has also taught extensively at University of Canberra. Randolph has a long history of speaking to community and professional groups and organisations on a range of issues, including chronic pain, depression, anxiety, preventing relapse of depression, mindfulness, positive psychology and managing a range of difficult issues.

He is experienced in working with a range of problems, and has worked as a psychologist in both public mental health and in private practice, helping people overcome a range of barriers and difficulties. Randolph has also worked extensively in pain and injury management, including workers compensation.
There is limited evidence for the effectiveness of massage as a treatment for RSI. While previous studies have found that there is some evidence for manual therapy’s effectiveness, there is a lack of understanding about how it works and whether it can be used as a preventative measure.

A recent study used rats to test whether manual therapy can prevent RSI. Twenty-eight female rats were used in the experiment. Female rats were used because “human females have a higher incidence of work-related musculoskeletal disorders”. To simulate repetitive work, rats reached through a shoulder height portal and pulled a handle in order to be given food. After being trained in the task for six weeks, their food was restricted so they would be incentivised to complete the task.

As soon as the rats displayed signs of discomfort, they began to receive manual therapy. The manual therapy they were given was developed by an experienced manual therapist and they were treated five days a week.

Of the 15 rats that ended up performing the task for 12 weeks, five received the manual therapy. There were very positive results for the rats that received therapy. They showed far fewer signs of discomfort both during the experiment and in the weeks after the experiment. Massage also increased the performance of the rats during the task. The treated rats were able to reach and successfully pull the handle as well as increasing their grip strength.

Overall, there was strong evidence that manual therapy is an effective treatment for RSI. It prevented discomfort for the rats and even increased how well they could perform the repetitive task. This study indicates the need for further study on how manual therapy could be used to treat RSI at an early stage and prevent a chronic condition.


---

**Posture & Flexibility Stretching Classes**

Using the Contact/Relax stretching method, an hour of careful stretching is perfect for rehab, or maintaining flexibility. Classes are held in North and South Canberra. Starting the week after Anzac Day:

- **Tues** 5.30–6.30pm (Woden)
  6.35–7.35pm (Woden)
- **Thurs** 12.30–1.30pm (Griffin Centre)
  5.30–6.30pm (Griffin Centre)
- **Fri** 12.45–1.45pm (Woden)

Very careful, very mindful, very successful.

Davidjheap@gmail.com 0437 135 474
German author Clemens Conrad was only 20 years old when he developed severe pain in his forearms after using a computer intensively for many hours.

"At the weekend, both forearms swelled so much that the armband of my wristwatch was too short to wear it anymore. My doctor diagnosed a tendon irritation and prescribed me diclofenac gel and ibuprofen 400 tablets. His prognosis: In one to two weeks, everything should be back to normal."

A year later, he had seen many doctors who didn't have any idea what was wrong with him and he couldn't even hold a cup without pain. Some doctors even told him that intensive computer use could not possibly be the cause of any condition! He tried both oral and topical anti-inflammatories, cortisone injections and weight training. None of them helped.

However, after doing some research on the Internet and reading a few books, his condition started to improve when he set up his workstation in a more ergonomic way and started some physiotherapy. By 2009 he was almost healed and now he is able to work at a computer as many hours as he likes.

In 2015 he published a book "Repetitive Strain Injury – Personal Story and Treatment Options" to share his experiences and the therapies that helped him. He is also interested in prevention and has an excellent chapter on the right kind of computer equipment and how to set up your workstation. Because new ergonomic equipment comes onto the market all the time and often has a short shelf-life, he encourages readers to go to his website (www.rsipain.com) where you can find details on equipment he's tried and what he recommends.

The therapies Conrad recommends include stretching and strengthening, both done very carefully. The explanations and diagrams of various stretches and strengthening exercises are very clear and helpful. There are also sections on trigger point massage, nerve mobilisation and psychological/emotional strategies. Importantly, Conrad includes a treatment plan which outlines treatment strategies to use at different stages of the injury.

At the end of the book, Conrad thoughtfully includes some removable pages which have the most important exercise, treatment plans and keyboard shortcuts in a compact overview. These can be ripped out and used as reminders where it's convenient.

This book is less than 100 pages long but it covers a lot and would be very helpful to many people with RSI. It's basically a treatment plan and doesn't deal with strategies to manage at work, deal with workers compensation or carry out everyday activities. It can be ordered at his website for $14.19. Definitely recommended!

- Ann Thomson
Press your palms against each other and slide both arms in one direction (right or left). Hold this position for at least 20 seconds and slide your arms in the other direction then.

Splay out your fingers and press the fingertips of both hands against each other.

Make a fist and then open the hand very slowly (ten seconds) while trying to hold all fingers in a flexed position.

This exercise consists of eight different head positions. Each one should be performed for about ten seconds:

1. Forward
2. In the direction of the armpit
3. To the side (towards the shoulder)
4. Backward
5. Backward & to the side

Positions two, three and five each to the right and left.
To enhance the stretching effect, you can gently pull the opposite arm down.
Mindfulness and Relaxation apps on your phone can help you deal with stress, manage pain and even improve your sleep. However, there are dozens of mindfulness apps out there, each with their own strengths and weaknesses. To help you choose an app that will help you the most, we review a selection below.

**Calm**

- **OS:** Android and Apple
- **Size:** 36.65MB
- **Price:** Free, in app purchases available

Calm provides a nice balance between getting to meditation with as few buttons as possible and having the ability to choose what kind of meditation you want to do. You open the app to one of four calming images, accompanied by some appropriately calming noises or silence, and if you do the suggested meditation, it takes only two clicks to get there.

The female voice on the body scan and mindfulness exercises is pleasant and calming. You can scroll through several options to find either a body scan which can be anywhere from three to thirty minutes, or ‘Calm’ which is as few as two minutes. You can also pay $40 to open up dozens of other options, which are far more focused like ‘Sleep’, ‘Self Acceptance’ or ‘Creativity’. This is quite expensive considering the number and quality of free mindfulness apps out there, but the sheer volume of material that becomes available could be worth it if you’re someone who makes frequent use of your mindfulness app.

It also has a profile section that allows you to keep track of the amount of time you spend meditating and how often you do it.

**Pros**
- meditation is only a few seconds and touches away from your home screen
- The free body scan and meditations are very helpful

**Cons**
- While paying $40 grants you access to a lot of extra content, it is a lot to pay given how many free apps there are around

**Relax Melodies: Sleep & Yoga**

- **OS:** Android and Apple
- **Size:** 82.3MB
- **Price:** Free, in app purchases available

Relax Melodies is a wonderful free app, and although it’s not a guided mindfulness or meditation app like the others, it’s great for helping you relax and/or drift off to sleep. The free edition allows you to choose from dozens of different sounds from light rain and thunder to cats purring and birds chirping; you’re even able to select the volume of each sound that you add to your sleep mix. With the free edition you can combine up to six different sounds for your personalised sleep mix (more if you unlock with in-app purchases), which you can save for later.
You can use the app with or without headphones, but the latter provides you with the option to add binaural beats to your experience. These beats provide a gentle thumping noise that alternates between your ears and supposedly promotes deep brain wave activity to help relaxation. There’s some debate about the effectiveness of these beats in the scientific community, but the app is just as good with them turned off.

Relax Melodies comes with a built-in timer function so that you can start and stop your mix while you drift off to sleep without worrying about it draining your battery power. However, I tend to use this app with my phone on my side table, plugged-in, just in case.

I’ve been using this app for a little over a year and a half now, and find it very relaxing when I can’t get to sleep and don’t feel like concentrating on a meditation. However, take care using the phone just before you go to sleep as the blue wavelength light can throw off your sleep cycle and rob you of a good night’s sleep.

Pros
- The built-in timer allows you to set up your sounds and not worry about it draining battery
- Easier than meditation when you’re too tired

Cons
- Little variety in what the app offers though this can be remedied with other apps

**Take a Break**

OS: Android and Apple  
Size: 39MB  
Price: Free, in app purchases available

This is a very simple app that allows you to take a break from your work or to de-stress. Just open it up and choose between a seven-minute break and a thirteen-minute stress-relief meditation. Both are guided by a very calming voice, and can be listened to with or without music. For 99c you can also buy a guided meditation specifically designed to help you sleep better, or for $3.17 you can get a five week course that helps you learn how to meditate.

The advantage of this app is that it will get you meditating in as few as two clicks without any fussing around or going through various options, although if you are looking for an app that can be more tailored to suit your mood then perhaps this is less of an advantage. It is very well reviewed in the app store and even without the ‘Sleep Better’ expansion, it has been shown to help with your sleep.

Pros
- requires little effort and time to get to the meditation  
- I think it has the most calming voice from the selection reviewed

Cons
- Very few options, especially if you use your meditation app a lot

RSI can be painful and debilitating
To use the Smiling Mind program you’ll need to sign up with your email address. Don’t worry; you won’t be bothered with spam messages or updates from the app; email sign-up is only necessary so that you can track your progress. After sign up, your next step is to select an appropriate age group. Smiling Mind was developed by a dedicated team of psychologists for a younger population. Because of this, age groups include 7-11 years, 12-15 years, 16-22 years and Adults. However, the only real difference between the levels is the style of language used; therefore the Adult level is really acceptable for any age group.

Each level of meditation within a group builds on the previous one, starting at Mindfulness 101. You’ll first learn a simple body scan, a breathing exercise, a listening exercise and a 5 minute daily exercise. Each of these lasts for around 5 to 10 minutes. However, if you’re short on time, you can select the 5 minutes Bitesize meditation. Or, if you’re looking for something a little longer, pick the Extended Meditations option.

Every meditation starts and ends with a quick check of your physical and mental state which you rate using sliding scales.

Pros
- keeps good records on your progress
- many options, including very short sessions, that allow you to use it whenever you need

Cons
- requires a lot of button pressing and sliding

- Olivia Duczek and Joseph Penington

---

**GET A BETTER NIGHT’S SLEEP WITH MEDITATION**

Choice recently compared the Take A Break app with several devices that claimed to help you get a better night’s sleep.

Even though it doesn’t claim to be a sleep aid, Take A Break proved to be one of the most effective methods of improving sleep, second to only one of the devices specifically designed to get you a good night’s sleep (The Blue Blocker Glasses were declared the winner).

The testing group only used the free stress relief program: However many of the apps (including Take A Break) include programs that help you get better sleep, though usually they cost extra.
Information Sheets Available:
A New Approach to Pain
Assistance through Medicare
Clickless Software
How to Win and Keep a Comcare Claim
Hydrotherapy
Injections for RSI
Managing Stress in Your Life
Managing Your Finances
Massage
Medical & Medico-Legal Appointments
You don’t have to live with depression
Neck Pain
Pillows & RSI
Sewing & RSI
Members Story — Studying with RSI
Swimming with RSI
Treatments for Carpal Tunnel Syndrome
Voice Overuse
Member’s Story — Invalidity Retirement

Helping Hand Sheets Available:
Driving
Sewing
In the Laundry
Handles
Book Holders
Cycling
Holidaying
Break software
Clickless software

To order an electronic copy of any of the above info sheets, please email us

Booklets Available:
The RSI Association Self-Help Guide $25
Really useful and practical information on treatments, medico-legal matters, maintaining emotional health and managing at home and at work.

Moving on with RSI $10
Stories of people who have learnt to live with serious RSI, with many ideas on how to survive emotionally and successfully manage the condition.

Pregnancy & Parenting with RSI $10
Information designed to help parents with an overuse injury to manage the specific challenges they face.

Booklets can be purchased online (www.rsi.org.au), requested by email, or ordered by mail using the form below.

Renewal for Membership & Order Form
Please make cheques or money orders payable to the RSI and Overuse Injury Association of the ACT, Inc.

Name:

Address:

Phone:

Email:

I would like to receive my newsletter by email: ☐

<table>
<thead>
<tr>
<th>Annual Membership</th>
<th>I want to renew for 1 Year</th>
<th>Save money and renew for 2 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low Income</td>
<td>$15</td>
<td>$25</td>
</tr>
<tr>
<td>Standard Income</td>
<td>$25</td>
<td>$40</td>
</tr>
<tr>
<td>Organisation*</td>
<td>$60</td>
<td></td>
</tr>
</tbody>
</table>

Booklets Available:
Cost:

- Self-Help Guide $25
- Moving on with RSI $10
- Pregnancy & Parenting $10

I enclose:
Donation (tax-deductible): $  

Total: $  

Save with our two year membership for just $40.00

*Organisational membership is open to organisations sharing our aims.
Preventing overuse injury, reducing its impact

RSI & Overuse Injury Association of the ACT, Inc.
Room 2.08, Griffin Centre
20 Genge Street
Canberra City
ACT, 2601

ACT RSI Newsletter, Autumn 2016
Print Post Approved
PP 229219.00118

Contact Us
Give us a call for more information about our services or drop in to our office during our opening hours.

Opening Hours: Mondays and Thursdays, 10.30am to 2.30pm

RSI & Overuse Injury Association of the ACT, Inc.
Room 2.08, Griffin Centre
20 Genge Street
Canberra City
ACT, 2601

Phone: (02) 6262 5011
Email: admin@rsi.org.au
Website: www.rsi.org.au