

SELF-CARE FOR INTERPRETERS: Prevention and Care of Repetitive Strain Injuries

The Registry of Interpreters for the Deaf, Inc., (RID) Standard Practice Paper (SPP) provides a framework of basic, respectable standards for RID members' professional work and conduct with consumers. This paper also provides specific information about the practice setting. This document is intended to raise awareness, educate, guide and encourage sound basic methods of professional practice. The SPP should be considered by members in arriving at an appropriate course of action with respect to their practice and professional conduct.

It is hoped that the standards will promote commitment to the pursuit of excellence in the practice of interpreting and be used for public distribution and advocacy.

Between 1990 and 2007, Repetitive Stress Injuries (RSIs) increased an unbelievable 80 percent. The New York Times called RSI "the epidemic of the 90s and beyond." More than 9.5 million U.S. workers were stricken with RSI in the last year alone including journalists, computer users, cashiers, surgeons, assembly line workers, meat processors and, of course, interpreters, to name a few. RSI is a real problem. Luckily, there are real answers.

RSI is one of the most misunderstood and underestimated injury today. The inherent nature of interpreting puts interpreters, young and old, at high risk for developing some type of RSI during their career. RSIs are preventable; however, if ignored, RSIs can develop into a permanent disability forcing talented professionals to retire prematurely due to the loss of required hand function.

Definition:

Repetitive Strain Injury (RSI) is a stress-related, cumulative type of injury resulting from constant repetitive movements. Tendons, ligaments and muscles are worn down over time doing repetitive tasks with insufficient rest periods. Awkward angles during movement, constant and continual vibrations, temperature extremes and dehydration are some of the other culprits that can contribute to the development of RSIs. This soft tissue injury includes more than twenty different kinds of injuries including carpal tunnel syndrome, tendonitis, thoracic outlet syndrome, etc. Repetitive strain injury is also known as cumulative trauma disorder, muscle-skeletal disorder, repetitive motion injuries, tennis elbow and mouse thumb.

Cause:

In a healthy body, your connective tissues (tendons, ligaments, muscles and nerve sheaths) are similar to ropes in a pulley system. These tissues have been pulling and pushing for years. They allow you to push, pull, reach, punch, swing, grasp and type. Lymph fluids and blood lubricate your ropes so they slide smoothly back and forth, making your movements effortless and controlled. They keep your system oiled but also wash away any unwanted waste. In short, when you move, there is a constant stretch and release happening.

Normally, when a muscle is worked as previously described, it produces a dozen or so inflammatory metabolites and neurotoxins. These are waste products that are flushed away by the lubricating fluids or blood in your system. Your connective tissues, the ropes in the pulley system, normally break down or tear when you move and then naturally scar and heal when you are at rest.

When you limber up before exercise, these scars are gently stretched and the neurotoxin backup is washed away; the muscle is strengthened. If you do not warm up, the scarring can shorten your tissues which result in stiff and tight muscles. If you rest and stretch your muscles regularly, the tendons and ligaments will function smoothly; muscles will be conditioned, strong and work properly for decades. If not, RSI and other soft tissue conditions will set in.

Oxygen also impacts the proper circulation and cleaning of the blood and fluids so crucial in this process. Muscles need proper oxygen circulation to contract and release. The process creates a natural biochemical product that provides energy and ease to our muscle movement. Interpreters are prone to shallow breathing thereby creating an oxygen debt environment and making us more vulnerable to RSIs.

When you overuse your connective tissues, giving them no time to rest and heal, they scar and shorten. Lactic acid builds up, irritating your tendons and ligaments and causes them to fray. If connective tissue frays, they tend to swell and become inflamed. When tendons, ligaments or sheaths around the nerves swell, there is less room for the nerve, and it is compressed or pinched. This, in turn, blocks the natural washing away of lactic acid fluids. The waste backup eventually breaks down chemically into a substance that causes the tendons, which normally move freely and easily, to fuse or glue together. The damaged tissues literally become glued together, sometimes limiting their movement by as much as 50 percent. It is common for more than one type of repetitive strain injury to develop at once simply because we are whole connected beings.

For interpreters, the problem often begins in the neck. We tend to hold our necks still (static motion) during work and continue to do so when we use any kind of computer or phone. This static motion, like active repetitive movements, can wear down the pads between our cervical vertebrae leading to compress nerves, pain, stiffness, numbness and burning sensations. This neck wear and tear can impact the nerve pathways to our arms and hands. Often an interpreter will feel the symptoms in their arms or hands before their neck. All these areas should be treated and protected. When our necks are tired, stiff and worn, our whole system is impacted.

Interpreters, like other professions, have been impacted by high-speed machines that have set the pace for work and leisure time. Interpreters no longer work an eight-hour day as global access has accelerated the need for interpreting to a constant 24/7 pace. In an effort to meet quotas, demonstrate constant availability or not miss the next opportunity, interpreters often push past physical limitations.

The result is an epidemic of RSIs. One out of every four interpreters experiences some type of RSI in the first two years of work. Prevention is the only cure for this pernicious kind of injury.

Diagnosis:

The idea of losing the use of one's hands is terrifying to the average individual. To an interpreter, our hands are our life's work. The common reactions of fear and denial often prevent us from recognizing and taking care of an RSI in our hands or arms. Educating yourself about RSIs is the first step to prevention. If any of the following symptoms appear, go to your doctor immediately.

Questions every interpreter should ask themselves:

- ◆ Do my arms feel heavy at any time during the day?
- ◆ Do I feel tingling, feel numb or pain in my neck, shoulder, arms or hands?
- ◆ Does my neck burn or feel stiff?
- ◆ Am I having trouble sleeping at night?
- ◆ Am I suddenly dropping or spilling things?
- ◆ Are packages and/or books suddenly feeling too heavy?
- ◆ Do I feel unusually clumsy or awkward?
- ◆ Is it suddenly difficult to hold a pen or pencil and write?
- ◆ Is it difficult for me to lift my arm or reach behind myself?
- ◆ Do I find myself holding my wrist or rubbing my arm, hand or neck?
- ◆ Do I feel shooting pain when I turn my head?
- ◆ Do I feel shooting pain when I move my hand or arm a particular way?
- ◆ Do I have pain in my jaw (not dental related)?
- ◆ Am I particularly and suddenly more sensitive to cold?
- ◆ Do I feel more tired than usual?
- ◆ Do I find cutting, chopping, and lifting more difficult than usual?

Prevention and/or Treatment:

RSIs are difficult to identify and diagnose because they may take months or years before the painful, numbing symptoms appear. And, because the symptoms are cumulative in nature, they often have a lengthy heal time.

An effective treatment plan is two-fold: a doctor who understands the dynamics of movement and can accurately diagnose the problem; and two, the active patient participation in analyzing behaviors that led to the injury. Together the patient and healthcare professionals can identify the problem areas, discover the best therapies, explore alternate muscle groups as support and execution and devise habit-breaking techniques so the body can rest and restore itself.

Therefore, the real key to prevention and recovery goes way beyond being diagnosed by a doctor and going through physical therapy. Prevention and recovery require a commitment to long-term changes in attitude and behavior. Most of all, it requires education, so we can understand what may hurt us, develop alternatives and continue to thrive in our profession.

Interpreters are athletes. We need to warm up; cool down; attend to symptoms when they first appear; follow an energy producing nutritional plan; recognize how posture, angles and temperature affect us; make sure we fully hydrate ourselves; exercise; and rest. It is important to quickly take care of any symptoms that occur. With RSIs, this is difficult because they are invisible. However, if you take care of yourself right away, you can prevent any permanent or serious injury.

Contributing factors of RSI

- ◆ Awkward and/or static postures
- ◆ Too much speed, force and/or duration of movement
- ◆ Inactivity (static movement) such as sitting, or holding one's head in one position for long periods of time (slows blood circulation and decreases efficiency of muscled)
- ◆ Driving or riding for long periods of time without a break
- ◆ Lack of frequent activity breaks
- ◆ High pressure, deadline environment
- ◆ Poor nutrition and or excessive weight
- ◆ Insufficient water intake
- ◆ Lack of regular exercise (not interpreting work)
- ◆ Double jointed-ness and/or cracking your knuckles
- ◆ Other serious medical conditions such as thyroid disease, arthritis, diabetes or osteoporosis can make you more vulnerable to RSIs

If you see many factors here that coincide with your routine, consider changing them so they do not occur as often. Consider alternating schedules, movements or positions before pain sets in. Habits can be the earliest indicators of RSI risk.

What can an interpreter do to prevent RSIs?

- ◆ Use chairs that suit your height and do not have arms rests.
- ◆ Bring and drink water all day.
- ◆ Take sufficient rest breaks.
- ◆ During your rest breaks, engage in gross movement stretches and exercises such as walking, simple yoga stretches, etc.
- ◆ If you drive to work or from job to job, try to arrive at assignments at least five minutes early to give yourself enough time to warm up and relax.
- ◆ Be sure and eat regularly and nutritiously.
- ◆ Find an outside exercise you enjoy and engage in exercise at least three times a week for an hour a day.
- ◆ Breathe deeply during pauses and in your rest periods to increase circulation and ensure a 'clean' system.
- ◆ Bring extra sweaters, scarves or whatever you need so your muscles stay warm and flexible during work.
- ◆ If you feel stressed and tired, develop various ways to relax and enjoy life.

What can an interpreter do to prevent RSIs? (continued)

- ♦ If an environment is unhealthy or puts you at higher risk for RSI, speak up and ask for help.
- ♦ Learn to say 'no' to assignments if you are sick or tired.
- ♦ Learn as much as you can about RSI and risk.
- ♦ Tell your trainers and workshop leaders you want to learn more about RSI prevention.

Remember that RSIs are preventable. They are difficult injuries from which to recover, but it is possible over time. Support your co-workers and promote self-care for the good of the profession and your daily life. It is strongly recommend that self-care techniques be integrated into every interpreter training curriculum in the country.