

# Pilates e Reeducação Postural: Fisioterapia e Epistemologia

## *Pilates and Postural Re-Education: Physiotherapy and Epistemology*

Luís Coelho\*<sup>1</sup>

Autor Correspondente/Corresponding Author:

Luís Coelho [coelholewis@hotmail.com]

<https://orcid.org/0000-0002-1947-456X>

**PALAVRAS-CHAVE:** Dor nas Costas/reabilitação; Força Muscular; Postura; Técnicas de Exercício e de Movimento

**KEYWORDS:** Back Pain/rehabilitation; Exercise Movement Techniques; Muscle Strength; Posture

In a time of fashions, clinical reality seems to be subjugated by the expression of methods, paradigms, which the back pain's theme so well exposes and promotes in the world of psychophysical rehabilitation. If the "spine" itself achieves balance, the excess of models betrays it, polarizing the relationship between the muscular chains and the "muscular" and liberal action.

If, according to postural models,<sup>1,3</sup> balance implies the synergistic relationship of a postural musculature - essentially posterior - sufficiently flexible, and - therefore - strong and tolerant, with a strength musculature - essentially anterior - reinforced, it is certain that it's the excess stretching itself that challenges balance, generating the "positive" symptom and reinforcing the cycle of the urgency to stretch; the dogma feeds itself and the placebo's therapist, lacking precisely the balance that will propitiate the movement and the possibility of previous action.

It is exactly the movement that cannot be obliterated, it's the movement that calls for re-stabilizing reinforcement. It should be noted that the "postural" model is essentially carried out in the "flexion" position, to recover muscle length, but this paradigm has its major limitation in the "discal" model (mainly carried out with extension maneuvers, aiming the reabsorption of the nucleus pulposus of the intervertebral disc<sup>4</sup>), with the possibility that Postural Re-education may worsen the process involved, for example, in disc hernias. It is clear that the model defends itself (it suggests that stretching provides decompression of the inter-vertebral discs<sup>3</sup>), and the body defends itself against it, generating more compensations, and these are, just like, the defenses of the therapist. Deep abdominal strengthening work cannot, in this context, recover lost balance; it even generates new defenses. It is necessary to carry out extension work, capitalize on the function,

1. Escola Superior de Saúde do Alcoitão, ©Reeducação Postural, Alcoitão, Portugal

Recebido/Received: 2023-11-28. Aceite/Accepted: 2024-08-14. Publicado online/Published online: 2024-09-11.

© Author(s) (or their employer(s)) and Gazeta Médica 2024. Re-use permitted under CC BY-NC 4.0. No commercial re-use.

© Autor (es) (ou seu (s) empregador (es)) e Gazeta Médica 2024. Reutilização permitida de acordo com CC BY-NC 4.0. Nenhuma reutilização comercial.

the movement, and only then will it be worth including, eventually, Pilates. In turn, the exercise of this on a body in disharmony also promises to create more resistance, later and cyclically, generating painful practice (of course, the model defends, quite often, the need for "pain", but not all pain is worth it) and multiplying the possibilities for rebalancing. The polarizing process is a representation of the "pathos" of spinal pain itself, as well as the inflammation of paradigms, equally in the mind of the therapist-patient duo, Subject-Object. Strengthening the trunk extensors, postural hygiene, superconscious work on the muscles, all of this further feeds the models' disharmonious relationship, spinal pain, contributing, in fact, to flatten the spinal column, sometimes darned by the forces of duality in "eternal return".

The stretching must be moderate, spontaneous, the movement must take advantage of it, and the strength capitalizes on the balance. When Postural Re-education is exceeded, Pilates also has to do the same. When models propose a new balance, only function can recover harmony, stabilizing the relationship, resolving duality, and recreating the growth of a spine, where the neurological and cognitive process cannot be neglected. Dogmatic practice proposes the salvation of the therapist, not the patient. And that is why the clinician cannot be obliterated by the messianic re-educator or the Pilates teacher. Nor, as such, should the "Clinic" forget the source of the "idiosyncrasy", with those practices embracing, increasingly, the group approach. The "nomothetic" science involved, for example, in studies related to Pilates will only make sense if it is contextualized in the patient's idiosyncratic balance, only then can the science be ecologically validated; otherwise, we will have studies that invite almost coercive practice. Clinical ecology suggests that Pilates practiced excessively can also have a negative impact on herniated discs. Despite the literature suggesting otherwise, we are, every day, challenged to combine models in a way that stabilizes and enhances the balance, which often does not support the financial validity of a "praxis" exercised perpetually. However, it will not be easy to study the effect of a rebalancing practice, which allows "articular" forces to be resolved, including discal ones, and which therefo-

re has expression in the "neurological" representation. Not that this System suffers from (little) "science", but it configures a structural "long term" that raises, once again, the threat of "postural" dogma. Here too, function, functional strength, plays an important role, introducing the "short term" into the postural structure.

And, again, the cycle is represented, which is, sibilingly, the relationship of the ascending "input" with the descending (i)Reason, of the therapist-patient system with the ungraspable, unattainable Object. The "short term", "contextual interference", therefore challenges the balance that the Context, science, seeks, and it is competed by duality where the therapist does not exclude himself as an element of the System, but rather becomes, perhaps, "patient" of it at the expense of the Other's interference.

## RESPONSABILIDADES ÉTICAS

**CONFLITOS DE INTERESSE:** Os autores declaram não possuir conflitos de interesse.

**SUPORTE FINANCEIRO:** O presente trabalho não foi suportado por nenhum subsídio ou bolsa.

**PROVENIÊNCIA E REVISÃO POR PARES:** Não comissionado; revisão externa por pares.

## ETHICAL DISCLOSURES

**CONFLICTS OF INTEREST:** The authors have no conflicts of interest to declare.

**FINANCIAL SUPPORT:** This work has not received any contribution grant or scholarship.

**PROVENANCE AND PEER REVIEW:** Not commissioned; externally peer-reviewed.

## REFERÊNCIAS

1. Coelho L. O anti-fitness ou o manifesto anti-desportivo. Introdução ao conceito de reeducação postural. Quinta do Conde: Contra-Margem, 2008.
2. Mézières F. La révolution en gymnastique orthopédique. Paris: Vuibert; 1949.
3. Souchard Ph-E. Le champs clos. Paris: Maloine; 1981.
4. Coelho L. Raquialgias: Modelos fisioterapêuticos e preventivos. Gazeta Méd. 2020;7:313-4. doi: 10.29315/gm.v7i3.370.