

Physiotherapy and MND: Proven Ray of Hope

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Motor Neurone Disease (MND) is one of the most devastating neurological conditions known—relentlessly progressive, physically limiting, and emotionally overwhelming for patients and families alike. Yet amid this difficult journey, one quiet intervention consistently proves its worth: physiotherapy. Far from being a simple exercise routine, physiotherapy for MND has grown into a sophisticated, multidisciplinary lifeline that preserves mobility, manages pain, maintains independence, and supports dignity for as long as possible. And while it cannot reverse the disease, its impact—validated across clinical studies, global health guidelines, and real-world patient stories—is unmistakable.

Physiotherapy's role in MND care often begins early, sometimes even before the diagnosis is fully accepted. At its core, it focuses on one mission: helping people make the most of the abilities they still have. Instead of pushing patients toward strength they cannot sustain, physiotherapy guides them toward safe, energy-efficient movement, smarter mobility strategies, and techniques that keep joints flexible, muscles functional, and breathing easier. The goal is not to fight the disease head-on, but to navigate it with skill, foresight, and compassionate support.

Keeping the Body Moving—Safely and Sustainable

For most individuals, physiotherapy begins with gentle strengthening exercises. These are thoughtfully designed to preserve strength in muscles that remain relatively unaffected. Unlike traditional gym training, the emphasis isn't on building power but on delaying decline. Light resistance bands, small weights, or controlled body-weight movements help maintain tone without exhausting fragile muscle fibres.

Range-of-motion (ROM) work becomes increasingly important as the disease progresses. It includes active stretching (done by the patient), active-assisted movement (with help from a therapist or caregiver), and passive movement (fully supported by someone else). These techniques keep joints flexible, reduce stiffness and spasms, and prevent contractures—painful tightening that can severely limit daily functioning.

As mobility changes, physiotherapists shift their focus to balance and gait. Small improvements—learning how to distribute weight better or how to move safely from a chair to a bed—can dramatically reduce the risk of falls. In advanced stages, the training transitions to safe transfers, wheelchair mobility, and positioning that prevents pressure sores.



Breathing Better, Living Better

MND eventually weakens the muscles involved in breathing, making respiratory physiotherapy a crucial part of care. Breathing exercises help maintain lung expansion, techniques for airway clearance help manage secretions, and therapists teach families how to use devices like nebulizers, cough-assist machines, or non-invasive ventilation.

In some cases, respiratory muscle training (using mild electrical stimulation or targeted breathing devices) can offer additional support. While it cannot stop respiratory decline, it can reduce hospitalizations, help patients breathe more comfortably, and delay the onset of severe breathing difficulties.

The Power of Touch, Warmth, and Relief

Pain and stiffness are among the most under-discussed symptoms of MND, but physiotherapy addresses them directly. Manual therapy—massage, soft-tissue mobilization, gentle manipulation—helps ease muscle tension and reduce cramping. Heat therapy loosens stiff muscles, while cold therapy tackles inflammation. TENS (Transcutaneous Electrical Nerve Stimulation) is frequently used for symptomatic relief by sending soothing electrical impulses through the skin to dull pain.

Despite the disease's unrelenting nature, many patients describe these interventions as moments of genuine comfort—small windows where they feel more in control of their bodies.

Tools That Make Life Easier

As mobility changes, physiotherapists guide patients through a vast ecosystem of assistive devices. Orthoses for foot drop, walkers with customized grips, lumbar supports, chairs with modified height, or wheelchairs with pressure-relief seating all help patients maintain independence longer. Home assessments often follow, where therapists recommend grab bars, ramps, or bathroom modifications to make daily living safer.

Hydrotherapy—exercising in warm water—deserves special mention. For many patients, the buoyancy of water becomes something close to liberation. Movements that feel impossible on land suddenly become achievable in water, lifting both physical and emotional burdens.

Real Lives, Real Improvements

Journalistic stories rarely capture the full emotional weight of a degenerative disease, but patient experiences carry powerful testimony.

One published case study followed an 85-year-



old man with bulbar MND, a form that affects speech and swallowing. His physiotherapy plan—breathing exercises, limb stretches, facial muscle routines like cheek puffing, posture training, and energy-saving techniques—led to measurable gains in muscle strength and significant improvements in swallowing and speech within 30 days. His quality of life improved not because the disease slowed down but because physiotherapy helped him reclaim control over essential functions.

Another woman, unable to walk on land, found new strength in the water. Hydrotherapy allowed her to move freely again, generating what she described as the “psychological joy of being able to move her legs,” a joy





that carried her emotionally even when fatigue returned afterward.

A third patient prevented serious complications through an intensive stretching and massage program. Swollen feet, tight calf muscles, and painful blood blisters improved dramatically with consistent therapy, guided initially by a physiotherapist and later continued at home by a trained caregiver.

Across stories, the theme is the same: physiotherapy does not cure MND, but it gives people back their comfort, their autonomy, and often, their hope.



A Growing Role for Integrative Care

While physiotherapy forms one of the strongest evidence-based pillars of MND management, integrative approaches are gaining traction worldwide. These models do not replace conventional care but expand it—bringing together physiotherapy, psychological counselling, alternative medicine, and lifestyle support under one coordinated umbrella.

OVIHAMS: A Holistic Approach to MND Care

In India, one such centre—**OVIHAMS (Om Vidya Institute of Homoeopathy and Allied Medical Sciences)**—has become a notable example of integrative MND care. Founded by Prof. Dr. A. K. Gupta, OVIHAMS blends homeopathy, physiotherapy, psychotherapy, and lifestyle management in a patient-centric model that aims to slow symptom progression and improve everyday functioning. The clinic does not claim a cure for MND, but through individualized homeopathic treatment, targeted physiotherapy, breathing exercises, and mobility strategies, it aims to reduce muscle twitching, ease choking episodes, improve balance, and support mobility.

Physiotherapy at OVIHAMS works hand-in-hand with other therapies, providing the physical foundation needed for patients to benefit from the broader treatment plan. Their team also emphasizes psychological wellbeing, offering counselling and mental-health support to help patients and families navigate the emotional toll of the disease. In addition to care, OVIHAMS conducts observational research on integrative approaches to neurodegenerative diseases and regularly organizes awareness programs, workshops, and webinars for patients and caregivers. With multi-clinic and online consultation facilities, the institute provides access to care across India and beyond.

While physiotherapy cannot stop Motor Neurone Disease, it remains one of the most powerful tools we have for preserving dignity, mobility, comfort, and independence. For many patients, it is not simply a treatment—it is a lifeline that helps them live better, move better, and feel more like themselves for as long as possible. ♦

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