

SNS COLLEGE OF PHYSIOTHERAPY COIMBATORE-35

COURSE NAME : BPT., Physiotherapy IV Year
SUBJECT : Exercise Therapy II
UNIT : II
TOPIC : Balance Exercises
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- Balance: Ability to maintain the body's center of gravity within the base of support
- Essential for maintaining posture, mobility, and functional independence
- Dependent on sensory, motor, and cognitive systems



Types of Balance

- Static Balance – maintaining position without movement
- Dynamic Balance – maintaining stability during movement
- Proactive Balance – anticipatory postural adjustments
- Reactive Balance – responding to external perturbations



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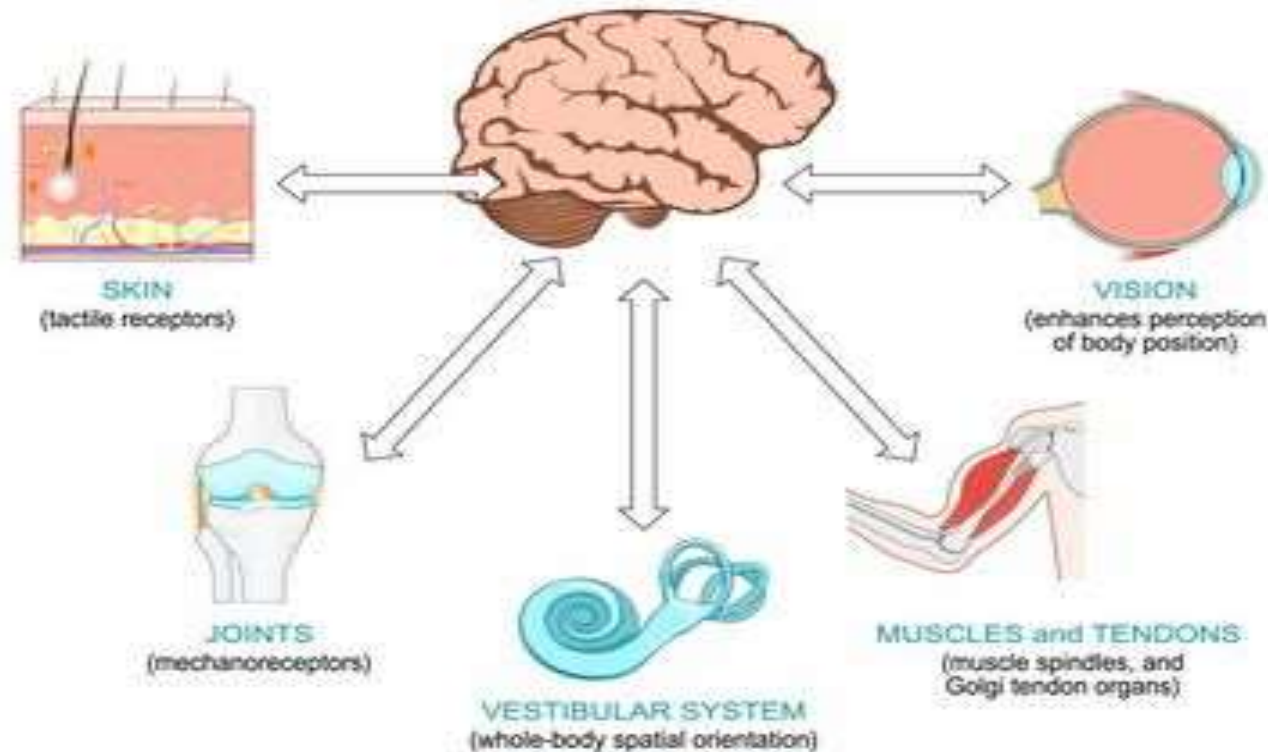
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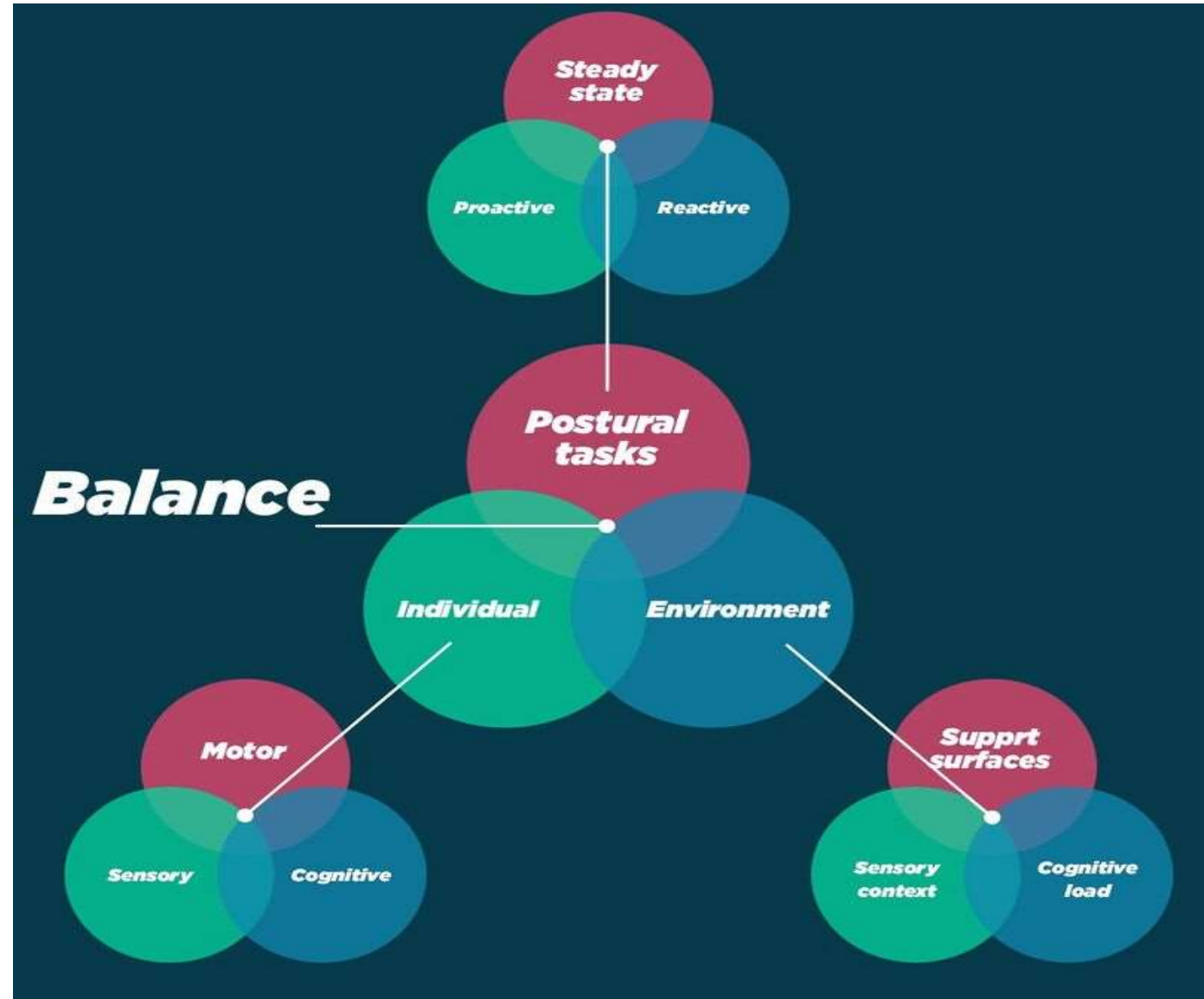
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- Visual system – provides environmental orientation
- Vestibular system – detects head motion and position
- Somatosensory system – feedback from muscles and joints
- Motor system – executes corrective actions

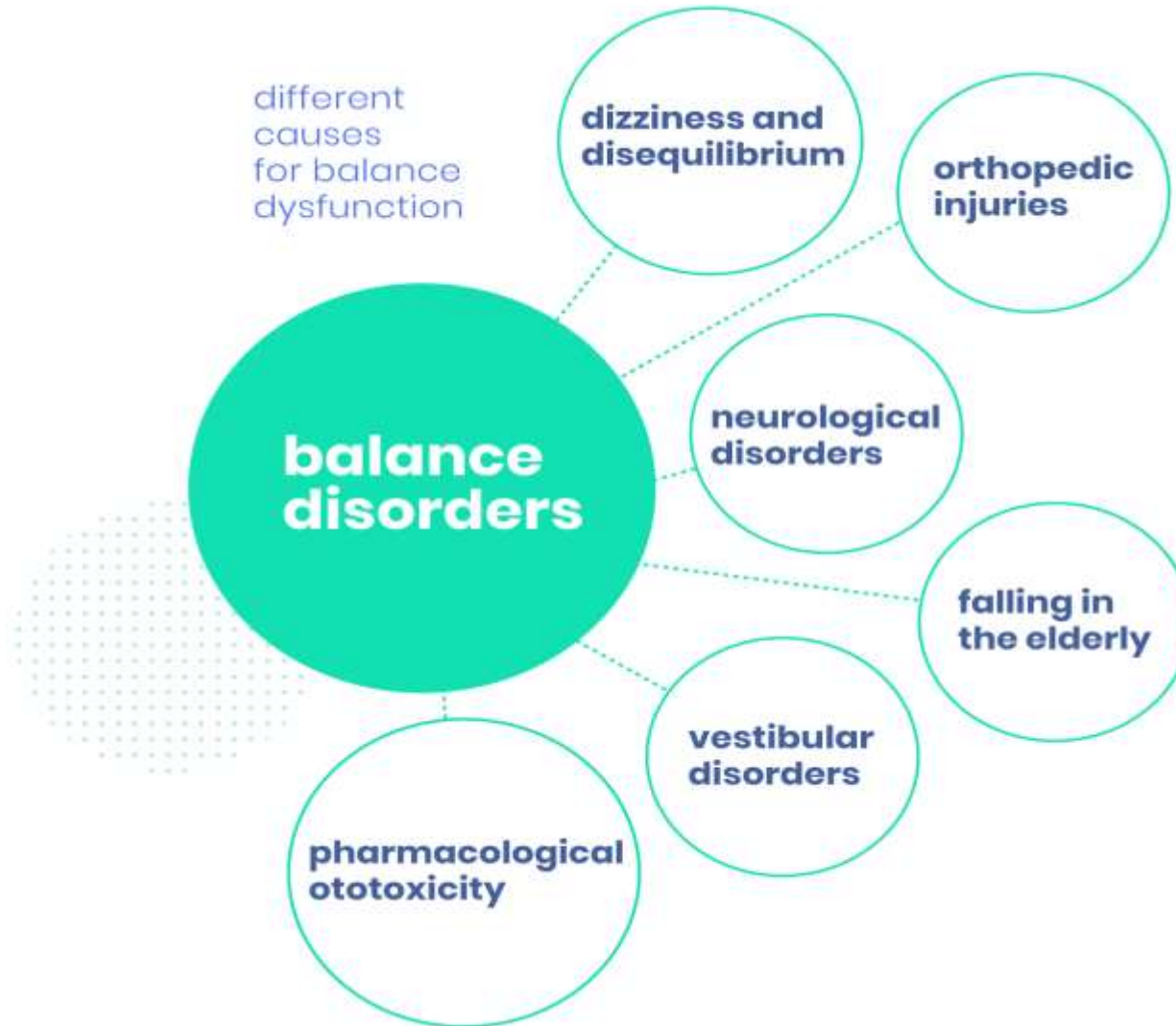
Sensorimotor systems involved in maintaining balance




- Sensory organization and integration
- Motor coordination and muscle activation patterns
- Feedback and feedforward postural adjustments



- Neurological disorders (stroke, Parkinson's, cerebellar lesions)
- Musculoskeletal weakness or joint limitations
- Sensory loss (visual, vestibular, or proprioceptive)
- Aging, medication, or fear of falling




- Static tests – Romberg, Single-leg stance, Sharpened Romberg
- Dynamic tests – Timed Up and Go (TUG), Functional Reach Test
- Clinical Scales – Berg Balance Scale, Dynamic Gait Index
- Instrumented assessment – force platforms, posturography




Balance Assessment

1. Romberg Test




- Stand with both feet together.
- Hold arms next to your body or cross them in front.
- You'll keep your eyes open and try to stand still 30 sec.
- You'll then close your eyes while still standing for 30 sec

2. One leg stance test



- To assess postural stability and control
- The test involves assessing standing on one leg with your eyes open.
- The test is for one minute
- Each leg is tested three times.

3. Functional reach



- Stand next to a wall and position the arm at 90 degrees of shoulder flexion.
- Records the starting position.
- Instruct "Reach as far as you can forward without taking a step."
- Scores is difference between the start and end position.

- Task specificity and functional relevance
- Progressive challenge to sensory and motor systems
- Variety of practice environments and postures
- Emphasis on safety and patient confidence

Center of Gravity

The point at which the entire weight of a body is concentrated. If the body is supported at the center of gravity, it will remain standing.

Base of Support

The ground surface region that the body contacts that enables balance in static or dynamic postures.

Limit of Stability

The maximum distance a body can move and remain balanced without changing the base of support.

Static Balance

The ability to maintain equilibrium without movement.

Semi-Dynamic Balance

The ability to remain in one spot while adding movement above the base of support.

Dynamic Balance

The ability to balance through motion, including adjustments made to voluntary movement and external disruption.

Neuromuscular Control

Defines the interaction between neurological and musculoskeletal systems and is responsible for involuntary muscular contractions that control joint motion and maintain joint stability.

Stages of Balance Training

- Stage 1: Static control – sitting, standing on stable surface
- Stage 2: Dynamic control – reaching, stepping, weight shifting
- Stage 3: Functional tasks – walking, stair climbing, turning
- Stage 4: Dual-task and perturbation training



- Stability ball and wobble board exercises
- Tandem and single-leg stance activities
- Dynamic stepping and obstacle navigation
- Perturbation and sensory integration exercises



- Ensure therapist supervision during challenging activities
- Use gait belt or parallel bars for safety
- Monitor fatigue, dizziness, and fear
- Start simple, progress gradually



- Patient: 68-year-old female post-stroke with balance instability
- Assessment: Berg score 30/56, TUG 18 sec
- Intervention: balance board, reach tasks, dual-task walking
- Outcome: improved Berg score to 45/56, increased confidence

