

Lisa Bartoli, DO,

Fellow of the American
Osteopathic College of
Physical Medicine & Rehabilitation

BY JON VANZILE

Lisa Bartoli, DO, specializes in putting people back in motion.

From her days working with Olympic athletes to her clinic in New York City, Dr. Bartoli has built an innovative practice treating musculoskeletal pain and sports injuries. Her comprehensive approach to pain management earned her a position as medical director and team physician for USA Women's Rugby, where she helped elite Olympic athletes prevent injuries and rehabilitate from injuries. Now in private practice, she has adapted her approach to treat a whole new group of patients: "regular" people dealing with pain and injury.

"My practice is all about maintaining function, whether it's an elite athlete or a 90-year-old patient," Bartoli says. "My treatment approach is influenced by my osteopathic training and my fellowship training in integrative medicine. We're taught to view patients from a mind, body, and spiritual perspective. We look at the whole patient and help them be successful."



Lisa Bartoli (far left) at the 2016 Rio Olympics with sports-medicine colleagues Jared Siegmund and Nicole Titmas. The trio worked with the US women's rugby team.

Acute Injuries and Long-Term Protection

Patients who show up in Dr. Bartoli's office are often suffering from an acute, sports-related injury—or the recurrent symptoms of an old injury that has cropped back up and is causing trouble.

In this situation, many doctors turn first to powerful painkillers and anti-inflammatories. But Dr. Bartoli is careful not to take drastic steps that would interfere with the body's natural healing processes.

“For an acute musculoskeletal injury, we try to avoid NSAIDs for the first 72 hours,” she said. “You want that inflammatory cascade. It's a natural part of the healing process and it's important.”

Instead, she'll use homeopathic topical treatments like Traumeel® or Topricin®, arnica-based creams that quickly relieve soreness, or acupuncture to reduce the immediate pain and let the body begin healing on its own.

Once those first 72 hours pass, Dr. Bartoli begins to design a longer-term treatment plan. The goal is to empower patients to take control of their own healing process and to “graduate” them out of her

care. As Dr. Bartoli said, although she loves her patients, she would like to see “less of them.” Her patients feel the same.

Her approach to rehabilitation is aimed at controlling an old enemy that will be familiar to any reader of *Life Extension*®: inflammation. The first step is often to recommend an anti-inflammatory diet based on whole foods and avoiding foods that include processed sugar or other things known to contribute to inflammation.

“Many of my patients are living with inflammation, and we have to get that under control,” she says. “The first thing I do is look at the diet.”

She also has favorite supplements she uses to tamp down inflammation, including fish oil, turmeric, curcumin, ginger, and tart-cherry extract. She discovered tart cherry's anti-inflammatory powers during her days working with women's rugby. It was recommended for use by Team USA Sport Dietician Shawn Heuglin.

“They loved it,” she said. “They'd line up after practice for their tart cherry and they felt it sped up their recoveries.”

Fish oil is also a critical part of any anti-inflammatory program. Rich in EPA and DHA, fish oil has been proven in thousands of studies to reduce inflammatory markers and help reduce the risk of developing inflammatory diseases including coronary artery disease.

Finally, she's a big believer in massage and acupuncture, an ancient practice that relies on the placement of tiny needles along pressure points and energy pathways in the body to relieve muscle strain and reduce inflammation.

“Acupuncture is my secret weapon,” she says. “It really helps and can make a huge difference in difficult cases.”

Dr. Bartoli avoids prescribing long-term opioids, joking that she is the “queen of old-school medicine.” In recent years, opioid prescriptions have skyrocketed as unscrupulous pharmaceutical companies have pushed doctors to expand the list of conditions for which they prescribe these powerfully addictive drugs. Today, almost anyone can secure a prescription for OxyContin®, Percocet®, or any of the other opiates.



“I have fewer than five patients who are on narcotics all the time,” she said. “With all of the addiction, the tools I use have positioned me well to reduce acute pain and lessen reliance on opiates.” This includes over-the-counter painkillers like acetaminophen (Tylenol®) and ibuprofen and naproxen, but she cautions against taking extra doses of acetaminophen, which can cause serious liver damage at higher doses, and long-term use of NSAID’s like ibuprofen and naproxen.

The Problems with Modern Exercise

There are a lot of ways to end up in Dr. Bartoli’s office. Just living in New York City, where she practices, has its fair share of risks, with high curbs, heavy doors, old buildings and lots of stairs. But one of the quickest ways is to jump on any of the super-intense workout crazes that have been sweeping the fitness world over the past few years.

“People shouldn’t overdo it,” she said. “*Everybody needs exercise, but people need to figure out what form they can tolerate.*”

When asked what kind of exercise people should be extra careful around, she ticks off a number of popular exercise trends that have resulted in many different injuries in her patients. This includes kettle bells, hot yoga, and especially crossfit training. All of these are known for pushing people to their physical limit or have a tendency to rely on volume over form. One study in the *Orthopaedic Journal of Sports Medicine* found that the overall injury rate for crossfit athletes is approximately 20%.*

Dr. Bartoli is quick to point out, however, that she “loves weights.”

Dr. Bartoli’s Supplement List

When it comes to her own supplements, Dr. Bartoli makes sure the basics are covered. Every day, she takes a multivitamin to ensure that she is receiving adequate amounts of the necessary vitamins and minerals. She also takes vitamin D to capitalize on the wide-ranging benefits of this important pro-hormone. And finally, she takes fish oil to provide omega-3 fatty acids. Not only does this help prevent a number of diseases, it’s a powerful anti-inflammatory.



As a former athlete herself, Bartoli walks every day and lifts weights regularly. She recommends that everyone should lift weights, whether they’re 12 or 80 years old.

“But form is paramount,” she said. “Weight lifting is all about form, form, form. It has to be perfect. You should spend the money to receive some good instruction and program development by a certified trainer. You should go slowly at first and take days off in between workouts or body parts to allow recovery. The goal is to go forward, never backward, and injury sets you back.”

Like so many successful doctors, Dr. Bartoli practices what she preaches. Not only does she get regular weight-bearing exercise, along with doing yoga and walking every day, she strives for a clean diet with a robust nutritional profile. She describes herself as a pesca vegetarian who eats only fish and vegetables. She eats seasonally and locally whenever possible, sourcing fresh vegetables through her co-op, and puts “tons of olive oil on everything.”

She also does the occasional medical cleanse.

“I’ll pull a few things out of my diet, like peanuts and tomatoes, and get some local honey to help with allergies,” she says. “I’ll do this for two or three weeks, and then gradually reintroduce foods over a few weeks.”

Whether she’s rehabbing her own sports injuries or designing multifaceted programs for patients, it’s exactly this type of focus on the whole person that makes it possible for Dr. Bartoli to help all of her patients—whether they’re Olympic athletes or elderly patients who can no longer navigate stairs—regain their function and recover faster. ●

Reference

* Weisenthal BM, Beck CA, Maloney MD, et al. Injury Rate and Patterns Among CrossFit Athletes. *Orthop J Sports Med.* 2014;2(4):2325967114531177.

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