

# TWITCHES, GLITCHES, SPASMS AND BLOOD

These bodily pranks convince you that you're a dead man. But in minutes they disappear. How seriously should you take your random health hiccups?



Should you raise the alarm or just sit-back?

**O**ccasionally your body shoots you the equivalent of a check-engine light—a weird spasm, say, or a sudden chest pain. Your brain races. Do you hustle to the doc? Or just ignore it?

Not that any of us have such confidence in the working of our machinery, given the strange and fleeting pains, spasms, gurgles and clicks that surprise us at random moments. Are these

signs of dangerous underlying conditions, or just harmless blips? Sort out which quirks you should take seriously—and which ones you can ignore.

### Penetrating chest pain

**Worst fear** Heart attack

**Likely culprit** Muscle spasm

“This one’s every man’s nightmare,” says Dr Rajiv Dang, senior consultant, internal

**As a general rule, when pain of any kind persists, you need to pay attention**

medicine, Max Healthcare, New Delhi. “But if the pain goes away quickly, it’s not a big worry.” Sudden, intense chest pain by itself can be a muscle spasm or a stitch. It might also be precordial catch syndrome—a sharp pain, typically in your left chest that may feel like a heart attack. It’s harmless, has no known cause and can last from a few seconds to several minutes. It’s more common among children but does occur occasionally in young men. But combine intense chest pain with shortness of breath, nausea, dizziness and/or sweating and you might indeed be facing a heart attack.

### Buckling knee

**Worst fear** Major joint damage

**Likely culprit** Weak quads

A knee can buckle swiftly. But the pop or crunch you hear is due to a “reflex inhibition” of your quadriceps. “It’s a protective reflex—the same one that occurs when you step on a tack,” says Rajesh Bawari, senior consultant, orthopaedic, Max Healthcare, New Delhi. “Your quad is looking to protect a painful knee by keeping weight off it.” The wobbliness is most likely a sign that the shock-absorbing cartilage under your kneecap has worn down—a condition leading to patellofemoral pain syndrome, says Dr Bawari. The fix: Stronger quads, which take stress off your knee by acting as shock absorbers.

To build your quads, start with short-arc extensions. Lie on a mat with a rolled-up towel under the thigh of your injured knee. Straighten your leg, hold

## Mens Health

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#### Don't Over Diagnose

for 5 seconds, and lower. Do 10 reps, twice a day.

#### **Twitching eyelid**

**Worst fear ALS (Lou Gehrig's disease)**

**Likely culprit Eyelid spasm**

Patients frequently think a twitching eyelid is an early symptom of ALS, a progressive, degenerative disease that affects nerve cells in the brain and the spinal cord, says Kolkata-based consultant physician Dr Mani Chettri. "Eye twitching of a sudden onset is benign, usually involving the bottom eyelid. In medical terms, this is called myokymia and is generally caused by stress, tiredness, eyestrain, caffeine, alcohol and allergies," says Dr Dang.

#### **Blood in the toilet**

**Worst fear Colon cancer**

**Likely culprit Haemorrhoids**

If you spot bright red blood swirling in the bowl or on the toilet paper, you're probably dealing with haemorrhoids or an anal fissure. An anal fissure, which sounds worse than it is, is a small cut in the lining of the anal canal when you pass a hard or large stool and typically heals by itself. Dark-coloured blood mixed with your stool, on the other hand, may indicate a source farther up the gastrointestinal tract, says Dr Dang. If any bleeding appears without pain during bowel movements, then you may have a colon polyp

**If you wake up with headaches daily or your headache worsens when you cough or sneeze, see your doc to rule out a tumour**

or perhaps an internal haemorrhoid. Black stool (digested blood is black) indicates bleeding in the upper GI tract, perhaps due to a peptic ulcer. Call your doc, who may schedule a colonoscopy to find the source and rule out colon cancer.

#### **Severe headache**

**Worst fear Brain tumour**

**Likely culprit Tension**

"Everyone thinks they have a brain tumour whenever they get an intense headache," says Dr Dang. What's far more likely, he says, is that it's simply a severe headache—a migraine, a tension headache or a cluster headache. Migraines produce severe, throbbing pain, often on one side of your head and are mostly experienced before the 20s. So if you're over 40 and have never had a migraine, you probably have a tension or a cluster headache. A tension headache produces dull pressure or tightness across the forehead, while a cluster headache gives severe pain, on one side of the face, usually around the eye.

Brain tumour symptoms vary with the tumour's size, location and growth rate, but morning headaches make doctors nervous. If you repeatedly wake up with headaches or your headache worsens with sneezing, coughing or any exertion, see your doc to rule out a tumour. [EHR](#)

### Talking straight with your doc

Trying to describe symptoms to your physician can be excruciating, but you need to meet the doctor halfway. Cough up some details using our expert tips

#### **1 Spill your guts**

Report everything unusual—sleep loss, mild aches. "You may think it's not important, but it may be critical," says Valerie Hart, EdD, the author of *Patient-Provider Communications*.

#### **2 Open your mind**

Follow the doctor's line of questioning closely. Don't become bogged down with what you found online, and be prepared for questions that seem unconnected to your problem.

#### **3 Focus on the fix**

"Make clear what you want," Hart says—for example, your back to stop hurting at night. This is the clearest route to solving the problem, and it relays the key message.

#### **4 Speak up**

Describing how symptoms affect your life helps the doctor grasp their full impact, says Jaya Rao, MD a health-care communications researcher at the University of North Carolina.