



PRACTICE

WHAT YOUR PATIENT IS THINKING

The health benefits of three wheels

A tricycle might not be the first thing that springs to mind as a solution to mobility problems, but Jenny Gristock explains how a "bucket bike" helped her

Jenny Gristock

I live with hypermobile Ehlers Danlos syndrome, which, as the Royal College of General Practitioners' toolkit explains, is a multi-systemic connective tissue disorder associated with lax joints; frequent subluxations and dislocations; chronic pain; autonomic dysfunction and gastrointestinal problems. I began having problems in my 20s. By 2015, the altered mechanics of my lumbosacral region caused so much pain I became housebound and unable to sleep in a bed. Sitting, standing, walking, and lying on a soft surface were all unbearable. Most of the time, I tried to reduce the pain by pressing the base of my spine into a hard floor, day and night.

Because I had other medical conditions that prevented me from driving, as my ability to walk worsened I became increasingly isolated and depressed. It seemed the only way I could rejoin society was by resorting to an electric scooter. But clinicians warned that in doing so I would run the risk of deconditioning and worsening my pain.

Seeing the solution

On a rare day out, with the help of a visiting relative, I saw an upright tricycle glide by. It had a big bucket in the front for carrying things (for this reason, the Dutch call them "bakfiets," which means "bucket bikes"). The tricycle was wide enough to look reassuringly stable: perfect for someone with balance problems, I thought. I browsed the internet and discovered many tricycles and recumbent quad bikes designed for people with different disabilities. I went on a test ride and found that not only could I ride a bucket trike, but its use also relieved my pain. This was a life changing moment.

Life with a tricycle

On good days I can cycle along the promenade to the supermarket, get around shops with the help of a trolley, and cycle home again. More importantly perhaps, I have found a way of temporarily relieving pain and interacting with other people.

My tricycle does not solve all the problems of having hypermobility syndrome—there are still subluxations and pain, dizziness caused by dysautonomia, problems with regulating

my body temperature, and a wheelchair for backup when I struggle to relocate an errant joint. Although a tricycle is not appropriate for every chronic illness and disability, I am not alone in finding liberation in three wheels: I have talked to some people with multiple sclerosis and Parkinson's disease who use tricycles too. Indeed, as I roll slowly along the seafront promenade, the phrase I hear most often from mobility challenged passers-by is "Hey, I could do with one of those."

Thinking outside the box

There are a variety of mobility aids available now including adapted bicycles, tricycles, and handcycles. If clinicians discussed the range of options with some of their patients, it might help them find a mobility aid that suits them. The use of these aids could improve not only patients' mobility but also their cardiovascular health, weight management, social inclusion, and mental health.

Mobility tricycles are not cheap, but with the backing of primary care professionals I'd like to see the UK Motability scheme extended, so that people can buy or rent a mobility tricycle using small, regular payments from their mobility allowance. This could also bring substantial financial savings to the healthcare system.

If your patient lives in a suitable environment and, with support, could cycle much further than he or she can walk, then do bear in mind that two or three wheels might open up their world, and in a way that benefits body and soul.

What you need to know

- Difficulties in getting out and about can lead to isolation and loneliness
- Walking sticks, frames, and scooters are not the only mobility aids, there are a variety of options available
- Tricycles might provide benefits other than mobility—for example, weight loss, improved mental health, and improved cardiovascular health

PRACTICE

Education into practice

- · What alternative mobility solutions are you aware of?
- What role do you have in supporting patients with mobility problems affecting their health?
- · How do you help patients to access mobility services or devices?
- How can you help patients to weigh up the pros and cons of different solutions?

These questions were developed by the editors and reviewed by the patient author

Further information

Cycling UK www.cyclinguk.org/article/cycling-guide/guide-to-adapted-cycles

Wheels4fun www.leedscyclingcampaign.co.uk/wheels-4-fun

Wheels for wellbeing wheelsforwellbeing.org.uk

Royal College of General Practitioners. Ehlers Danlos toolkit: www.rcgp. org.uk/clinical-and-research/resources/toolkits/ehlers-danlos-syndromes-toolkit.aspx

Competing interests: I have read and understood BMJ policy on declaration of interests and declare the following: none.

Provenance and peer review: Commissioned, based on an idea from the author; not externally peer reviewed.

Published by the BMJ Publishing Group Limited. For permission to use (where not already granted under a licence) please go to http://group.bmj.com/group/rights-licensing/permissions