

Brain-body dance: addressing mental health during injury rehabilitation

William Bracewell

My career in ballet is probably one that echoes many others. I started dancing around the age of 8, and was recognised by my teacher at the time as having potential to progress further. At the age of 11, I moved from Swansea to London, after receiving a place to live and train full time at The Royal Ballet School. This was an intense introduction into the ballet world to say the least; a pressure cooker environment that suited some and not others. At the time, there was a focus on hard training of the ballet skill, with less concern over the holistic development of the student. After 8 years of training I joined Birmingham Royal Ballet and danced professionally with the company for 7 years, touring nationally and internationally for most months of the year (sometimes for several months at a time). In 2017, I moved to The Royal Ballet, where I now dance as a Principal of the company. This means I perform the main or title roles in up to 13 productions each season.

SPINAL SURGERY

My injury history had been sprinkled with minor ankle issues and growth-related problems, but in April 2019 I underwent microdiscectomy surgery on my L5-S1 level in my spine. After a herniated disc injury 3 years prior, I had been managing ongoing back pain, and after what I initially thought was a minor hamstring tear, it quickly became apparent it was much more serious and now restricting the sciatic nerve in my left leg. I could not move at all without intense searing pain which immobilised me for weeks. I began a very slow and conservative rehabilitation approach, but 6 weeks into the programme, my leg would intermittently give way during the most basic warm-up dance movements, and I would end up collapsed on the floor.

At this point, I discussed my options with our clinical director: continue a conservative rehabilitation with the potential for surgery a year later, or opt for surgery immediately. The MRI suggested I had quite a severe herniation, which, coupled with the fact that I had been struggling with the rehabilitation

mentally—including ending up in tears on the floor during coaching sessions—made the surgical route seem like a clear choice. The healthcare team supported this decision, and while there was, of course, a large amount of trepidation ahead of spinal surgery, I'm happy that 5 years later it seems to have been the right decision.

CONNECTING MIND AND BODY

I would describe myself as incredibly ambitious, so to have extended periods of stagnant time after my surgery was very frustrating. I tried to fill my time with other interests that were not physical, but I missed the rigour and passion of dancing. Being back in the gym, sweating and working towards my goal of returning to the stage was a huge relief mentally. My physical rehab went well. I tried to cross-pollinate the expertise of my rehab team

(figure 1) as much as possible; my Pilates and strength and conditioning (S&C) coaches would watch ballet coaching sessions to assess posture and consider new exercises that would be beneficial. Incorporating exercises that I could clearly associate with dance helped transfer the strength I gained during S&C and Pilates into the studio, which I otherwise had a tendency to disassociate. In many ways rehab suited my personality really well: I could schedule my days as I wanted; I could rest when I needed; and there were clear goals to be achieved. I cannot over-emphasise how aware I became of the link between my mental and physical health. It seems obvious, but it's easy to detach the two.

ADDRESSING MY MENTAL HEALTH

An aspect I had not considered until it was looking me directly in the face was the potential loss of my profession and a huge majority of my life. I love my work, and the thought of that being taken away before I was ready was a difficult thing to process. There were also points early in the rehabilitation where I began to fear the



Figure 1 Celebrating with my rehab team following a successful return to the stage (from left to right: Gemma Hilton, Brian Maloney, William Bracewell, Jane Paris, Adam Mattiussi).

The Royal Ballet, Royal Opera House, London, UK

loss of more general physical functions. For example, walking a dog that might pull in erratic ways, or bending to put on a sock comfortably. These fears eventually faded as my movement improved, but the initial worry was vivid. During this time I saw our in-house performance psychologist, who helped me work through the day-to-day mental difficulties, and identified elements of post-traumatic stress. With the advice of our wonderful internal healthcare department—and private funding from a generous individual—I saw a psychotherapist. This became a turning point as we discussed life from a wider lens and assessed why I was putting myself through such an extreme process to continue dancing. I realised there was no other option than to give everything I could to try to return to dance. I would not be able to walk away from the situation without knowing I'd done everything in my power to get back to the stage. We assessed why I love dancing so much and why it was worth the effort. I learned that it's the effort that I love: I love to work, which in some ways was the reason I had become injured initially... by overexerting myself without adequate recovery.

MOVING MINDFULLY FORWARD

I wanted to highlight the mental health aspect of rehabilitation as it's maybe not

always factored into a programme but in my opinion was a key pillar in getting me back to full capacity. I have come to realise that strength and mobility work will be a part of my life forever, and I relish that. My fundamentals will be keeping a strong and mobile core and hips and moving as much as possible for as long as possible. I am aware that the neurological connection and sensitivity to that area of my back remains heightened 5 years later. I have had two subsequent MRI scans on my back after being worried something had happened again due to pain. This will probably be something I do every few years while I'm dancing to keep my mind at ease as much as keeping an eye on the condition of the disc. I still worry that I might injure my back again, not so much that it stops me dancing but there are some movements that still scare me and probably always will.

With high-profile athletes becoming more vocal about their mental health capacity and needs, I feel positive that this will become commonplace in dance rehabilitation.

I would encourage practitioners to value mental health as highly as strength training, mobility training and other physical therapies:

- Anticipate psychological challenges and programme therapy into a rehab plan.
- Promote honest discussion around mental health and function.
- Explore cross-pollination of coaches' expertise through joint sessions.

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