athletematters

sports physiotherapists

Injury Prevention

At Athlete Matters we prefer to treat you fit, rather than put you back together again once you are injured! Many times we have seen people training really hard for an event only to get injured in the last month which could have been avoided with preventative measures. We have worked in a preventative capacity with most of the country's top runners including Olympic champions and World record holders as part of our work with GB Athletics.

As part of your training you can expect to get a few aches and pains. Athlete Matters have put together this information for general advice only. If your condition persists, it would be wise to book into one of our clinics for expert advice and treatment.

Find our clinics in:

Worsley 0161 702 9474

Cheadle 0161 637 3633

Preston 0177 222 5401

email: info@athletematters.com

www.athletematters.com

athletematters
sports physiotherapists

Achilles Tendonopathy

The Achilles tendon can frequently become painful in runners. This may be due to inappropriate footwear, overdoing training, weakness or abnormal biomechanics around the foot and ankle. If untreated, this problem may lead to degenerative changes to the tendon and reduce its force producing capacity. This will lead to further injury and ultimately loss of performance.

Achilles tendonopathy is characterised by pain just above or at the insertion on the heel bone, particularly first thing in the morning it can be exquisitely painful! It may often ease as you run and then be more painful afterwards. There are several structures in the Achilles area that can be the source of pain, we will identify which and advise if you need to rest it.

If necessary we would use 'hands on skills' to release any of the structures around your calf, ankle, foot and Achilles that may be responsible for creating the problem. We may use acupuncture to release tight muscles and reduce pain. We will teach you exercises to stretch and strengthen the Achilles particularly heel raising exercises which can help strengthen the tendon and allow it to adapt to load again. We will also teach you exercise drills to enhance your foot and ankle function and strengthen your calf muscles. We will usually kinesio-tape the foot and lower leg to enhance function and support the

Achilles and calf muscles and also provide you with a weights programme, aimed at strengthening the calf and Achilles. If there are any structural problems in your foot we may refer you to a podiatrist for further analysis, it may be that you will require the use of orthotics to settle the problem. It can take up to three months to recover from an Achilles tendon injury even with physiotherapy.

athletematters
sports physiotherapists

Back Injuries

Back injuries are common amongst runners. The lumbar spine or sacro-iliac joint (the joint between your pelvis and your lower back) can be very commonly injured in athletes. This usually happens as a result of poor technique and posture or overloading it during running; usually a combination of the two. Often poor core stability is a factor along with tightness in your muscles as over 30 muscles attach to your pelvis!

Physiotherapists should be able to diagnose the condition and will treat the cause of the problem using primarily exercises. These may be to stretch tight muscles and strengthen any weak muscles particularly around the deeper core area. They may also use massage skills to release any tightness in the hip or back. Sometimes it will be necessary to manipulate the back to reduce pain or increase movement. We may also choose to use kinesio-tape to support the back and facilitate muscle activity. Alternatively we may supply you with a special belt to help stabilise your sacro-iliac joint.

Physiotherapists may use acupuncture to release tight muscles and relieve pain. The problem will settle with a gradual return to training accompanied by a core stability exercise program. Our 'ground breaking' weekly core strength class is designed for runners to improve control around the hip, back and pelvis.

ATHLETE MATTERS HAVE ATHLETE CORE STABILITY CLASSES. RUN BY ATHLETES, FOR ATHLETES. CONTACT US FOR DETAILS

athletematters
sports physiotherapists

Heel Pain

The plantar fascia is a connective tissue on the sole of the foot which is responsible for the transference of load during running. It does this via the Windlass Mechanism. If the foot fails to function normally biomechanically, or you have unsuitable or worn running shoes, or you have built up your running mileage too quickly, the plantar fasciae can become inflamed. Plantar fascia is characterised by heel pain in the morning. There may also often be a neural component to this problem. Calcaneal fat pad irritation is also closely associated with plantar fasciitis. Heel pain can be very painful and last for months.

Physiotherapists should identify the cause of the problem and use hands on skills to release any of the tight structures around the foot which are responsible for creating the problem. They may use acupuncture to release the tight muscles and relieve the pain. They will teach you exercises to stretch and strengthen the foot and may use kinesio-tape to support the tissues when you return to running. If there is a structural problem they may refer you to a podiatrist for further analysis, it may be that you require the use of orthotics to settle the problem. As part of your rehabilitation we will also teach you specific exercises to strengthen your foot and calf and exercise drills to re-educate foot and ankle function.

athletematters
sports physiotherapists

Hip and thigh Injuries

The hip is also commonly injured in runners.

These injuries can include:

- Trigger points including Piriformis syndrome – when hip muscles becomes tight, you will experience pain in the buttock which can spread into your thigh.
- Hamstring and adductor muscle injuries

The causes of the above are usually related to biomechanics, particularly poor core control around the back and hip often by the gluteal muscles.

Physiotherapists should be able to diagnose the condition and will treat the cause of the problem, primarily using exercises. These may be to stretch tight muscles and strengthen any weak muscles particularly around the hip. They may also use massage skills to release any tightness around this area. Hamstring and adductor injuries can occur suddenly when the muscle is torn usually during explosive activity or gradually with more movement dysfunction causes. These injuries can be treated with massage techniques to enhance the heeling rate of injured tissues and specific exercises aimed at strengthening the core and targeted muscles. Often a strength and conditioning programme in the gym will be required to reduce the chances of further injury. Kinesio-taping is often helpful at returning the athlete to training. Sometimes the hip joint itself may be affected; we will be able to diagnose this and treat if possible or alternatively refer you to a specialist orthopaedic surgeon.

athletematters
sports physiotherapists

Knee Injuries

The knee is one of the most commonly injured areas in runners.

These injuries can include:

- Runners knee - see information sheet on Ilio-tibial band friction syndrome
- Patello femoral pain syndrome or Chondramalacia patellae is when the under surface of the knee cap becomes damaged
- Patellar tenonopathy is when the tendon below the knee cap becomes inflamed or damaged

Patellar tendonopathy is when the tendon below the knee cap becomes inflamed or damaged

Physiotherapists should diagnose the condition and if necessary refer you on for further investigations e.g. xray or scan. If physiotherapy is indicated they will treat the cause of the problem using primarily exercises to stretch and strengthen the quadriceps and hamstring muscles. Improving Core Stability around the hips and pelvis is vital in the management of knee problems. They may use massage skills to release the structures around your knee that contribute to the problem. We will often use kinesio-taping to alleviate symptoms and promote recovery

If there is a structural problem they may refer you to a podiatrist for further analysis of your biomechanics, it may be that it will require the use of orthotics to settle the problem.

athletematters
sports physiotherapists

Runners Knee

The iliotibial band (ITB) is a connective tissue that runs down the outside of the thigh, it acts to stabilise the hip and knee during the stance phase of running. Iliotibial band friction syndrome also called 'runners knee' is highly common in elite and recreational distance runners alike. Those particularly susceptible are endurance runners who are building up their mileage.

As the official ASICS Greater Manchester Marathon Physiotherapists we see a lot of this condition in the build up to the race and have loads of experience dealing with it successfully. Pain will be felt typically on the outside of the thigh close to the knee and in the early stages will increase as the condition progresses. The other group of runners who suffer this injury are fell runners who aggravate the problem whilst descending.

The causes of all of the above are usually related to training but more often than not biomechanical typically reduced control of the hip by the gluteal muscles. Our physiotherapists should diagnose the condition and will treat the cause of the problem using primarily deep tissue massage to the ITB and self -massage using a foam roller is often recommended. Exercises are very important to strengthen the hip muscles to improve core stability particularly in the gluteal muscles. Stretches to release any tightness in the ITB and hip muscles may also be given.

Acupuncture is very effective in helping release muscle tension and reducing inflammation on the outside of the knee. We will often use kinesio-tape to keep the ITB positioned correctly and mobile. The problem will settle with a gradual return to training accompanied by a hip core stability exercise programme.

athletematters
sports physiotherapists

Shin Splints and Calf Injuries

Shin splints is a term that covers a number of conditions. These can include;

- Medial tibial stress syndrome which commonly affects the muscles of the lower leg where they attach on the inner shin.
- Compartment syndrome which commonly affects the muscles of the lower leg and occurs when the muscle expands as a result of training and becomes compressed by its surrounding sheath.
- Stress fractures occur when a bone cannot withstand the training load placed upon it. These can occur in the lower back, thigh, shin or foot

Calf injuries are among the most common running injuries we see. They often occur suddenly, resulting in the runner having to limp home after. Calf injuries can often re-occur in the same side or on the opposite leg. Your physiotherapist will assess you fully to identify the causes whether biomechanical/ technique, footwear related or training related. The causes of all the above will be related to training, footwear and biomechanics.

Our physiotherapists will diagnose the condition and if necessary refer you for further investigations e.g. x-ray or scan if a stress fracture is suspected. If treatment is indicated they will treat the cause of the injury using massage skills to release the tight or injured structures around your lower leg that contribute to this injury. Deep tissue massage is highly effective to achieve this. Physiotherapists will teach you specific exercises to stretch and strengthen the lower leg muscles. We will use specific exercise drills to re-educate and enhance your foot and ankle function. We have also found that kinesio-taping is useful to support the foot and ankle function and facilitating activity in weakened muscles. Often with calf injuries we have found it necessary to strengthen it with a strength and conditioning programme.