



SPRING HAS SPRUNG!

This edition of our newsletter is brought to you by Leah Mandell (Physio).

STAFF PROFILE:

After recently returning to the Central Coast after four years living and working in Japan, Leah is enjoying the beautiful coastline that we live on, has hung up her snowboard boots, and is gearing up for yet another season of touch football.

GET FIT FOR SUMMER!

With summer quickly approaching and the temperatures warming up, many people are motivated to develop new exercise regimes that can unfortunately be the cause of overuse injuries. Tendon injuries, particularly to the foot and ankle, knee and shoulder, are amongst the most common overuse injuries that we see in our clinic at this time of year.



Whether you are returning to running and experiencing ankle/knee/hip pain, or simply a keen paddler/surfer with a grumpy shoulder, the general understanding of tendon composition, and tendon injury management can help us to understand our niggles. In this example, we will look at Achilles tendinopathy.

TENDON COMPOSITION:

Tendons are composed of many collagen fibres held in parallel alignment to help transmit forces from muscle to bone. Unfortunately, when the body is challenged with a sudden increase in training volumes or intensities (such as a return to running after the winter months), these collagen fibres that are placed under high tensile strength can be disrupted.

ACHILLES TENDINOPATHY:

What is it?

A condition causing pain, swelling (not inflammation), stiffness and weakness of the Achilles' tendon, thought to be caused by repeated micro-trauma to the tendon. Pain is often gradual in onset, worse in the mornings or after exercise and can often ease (or become more bearable), as exercise continues.



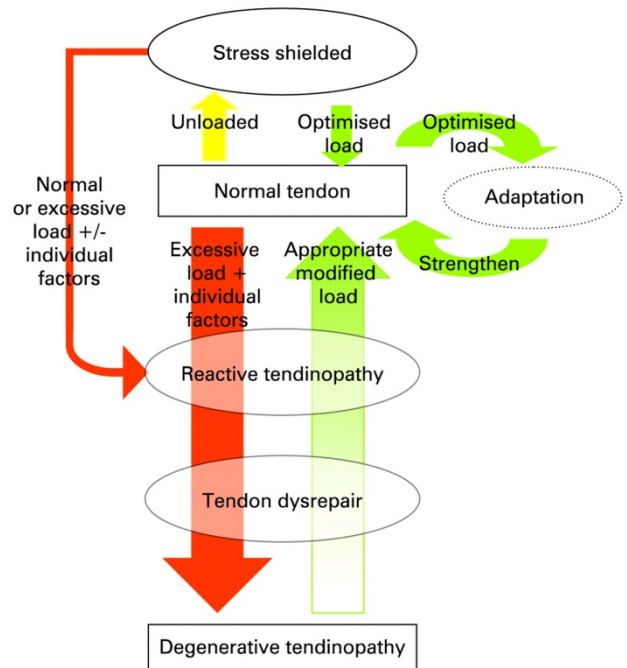


Causes:

- Overuse! e.g. Running, dancing, basketball etc.
- Sudden increase in training loads or intensities (i.e. How far, how frequent, or how fast).
- Inappropriate footwear for your type of foot, or changes to footwear.
- Changes to running surface. e.g. Hard, sloped or hilly areas.
- Weak calf muscles.
- Poor flexibility.
- Poor foot posture. E.g. Over pronation.

Treatment:

Treatment is aimed at reducing pain and stiffness, by reducing loads placed upon the damaged tendon and correcting running biomechanics. This can be done in a variety of ways depending on what stage of the tendinopathy spectrum your injury belongs to: Reactive, Tendon Dysrepair or Degenerative (see right). Assessment in the clinic by your physiotherapist can help to determine what stage of tendinopathy you have and whether or not things such as anti-inflammatories (NOT suitable for all stages of tendinopathy) or ice may benefit your self-management.



More often than not, management of achilles tendinopathy usually involves some or all of:

- Massage (calf, toe flexors and ankle plantar flexor muscles).
- Flexibility (calf and hamstring stretching).
- Strengthening (calf, gluteals and core stabilizing muscles).
- Adjustment to training loads (amount and frequency).
- Adjustment to training surfaces (avoiding hard and hilly areas).
- Review or adjustment to footwear according to your foot type.
- Temporary taping to assist returning to sport.

So if you are planning on getting fit this spring, listen to your body and just remember that prevention is key! Ease yourself into a program that has gentle progressions to ensure that you minimize the risk of developing an overuse injury. Here at Wamberal Physiotherapy, we are more than happy to help out wherever we can in pre-summer screening, exercise prescription and advice on self-management strategies.

Happy Spring Sport!