Serving the local community since 2001

Back in Shape Physiotherapy & Pilates

Helen's Pilates

Term dates: 2017 Term 3

Start: Monday 17 July End: Friday 22 September

Alphington Bowls Club Parkview Rd, Alphington

All ages and abilities classes

Mon: 12-1pm Wed: 5.30-6.30pm Fri: 9.15-10.15am & 10.30-11.30am

<u>Cost:</u> Mon: 10-week term: \$200 Wed & Fri: 10-week term: \$200 OR \$25/class casual

Fairfield Community Room Station St, Fairfield

Over 50s class

Mon: 9.30-10.15am

Limited mobility class

Mon: 10.30-11.15am

<u>Cost:</u> 10-wk term: \$100 OR \$10/class casual

PUBLIC HOLIDAY ALERT:

There are no public holidays this term

Physio & Pilates Appointments

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Good tracking: getting your Patella back into the groove

It is interesting that in my work as a physio, I often see similar injuries occurring at the same time. Recently, I have had a 'batch' of patients suffering from Anterior Knee Pain. In laymen's terms, this simply means pain at the front of the knee. This most commonly arises from the Patellofemoral Joint (PFJ), which is the joint under the Patella (knee cap), or structures around it.

The Patella itself is V-shaped on its underside surface, and there is a corresponding V-shaped groove on the lower end of the Femur (thigh bone). When functioning normally, as the knee bends, the Patella—which is actually part of the Quadriceps muscle of the thigh—glides up and down the centre of this groove. This is referred to as the 'tracking of the Patella' and is controlled by the Quadriceps.

More specifically, this tracking is balanced between the medial part of the Quadriceps, the Vastus Medialis Obliquus (VMO), and the lateral part of the Quadriceps, the Vastus Lateralis (VL). Added to this, we also need good alignment of the foot, ankle, knee and hip for optimal tracking of the Patella.

A number of factors can cause the Patella to track poorly, resulting in friction, irritation and pain under or around the knee cap. These include: weak/tight VMO or VL muscles; tightness of the Iliotibial Band (ITB), which is a taut band of connective tissue that runs down the outside of the thigh; flat/pronated feet; or weakness in the hip rotators. Poor patella tracking can also occur as a secondary issue to other knee problems

Factors that can further aggravate Anterior Knee Pain include activities such as: going up/down stairs/hills; squatting or lunges; getting up after prolonged sitting (for example after a long car journey, or even at the end of a movie); and wearing poor

unsupportive footwear.

The good news that if you are suffering from Anterior Knee Pain, there are several ways you can alleviate or eliminate the pain: this is a very treatable condition and actually one of the most commonly treated conditions by physiotherapists. First up, your physio will assess how your Patella tracks and evaluate if any supporting muscles are tight or weak. Once assessed, you can begin a course of treatment.



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Initially, it might be necessary to allow any inflammation to settle down using ice and antiinflammatories. Thereafter, your physio will wake up and strengthen weak muscles, stretch/release any tight muscles/structures, and mobilise the PFJ, usually suggesting a home exercise program. To retrain knee function with good alignment, taping may be used or orthotics suggested.

So don't put up with Anterior Knee Pain. Get your Patella back

into the groove and book an appointment with your physio today!

Traffic Light Exercises

Fed up of waiting for endless sets of traffic lights to turn green? Why not try my latest Traffic Light Exercise?

VMO reps

This issue I want to focus on the Vastus Medialis Obliquus (VMO), which I refer to in the main article of this issue. The VMO is the medial part of the large thigh Quadriceps muscle, and is itself a small muscle just above the knee on the inside of your leg. The VMO can become weak as a result of knee pain, after surgery or due to poor alignment caused by flat feet



As you sit at the traffic lights, your knees will already be bent.

- Allow your knee to roll out a little
- Keep your heel in contact with the floor and then press your heel into the ground. Your knee should not actually move, but you will feel the VMO itself tighten if you put your hand on it.
- You can also put your hand halfway up the outside of your thigh and feel your Vastus Lateralis (VL) tighten, but you want to ensure this does not dominate. Ideally, both muscles should tighten the same amount and activate at the same time. However, your buttocks should stay relaxed.
- Hold for a few seconds and then relax and feel it soften
- Repeat ten times

Note: when performing this exercise on your right leg, it is not necessary to rev your accelerator pedal!



Road to recovery

Timely diagnosis

When we injure ourselves, there is a great tendency for us to delay seeking medical attention. Perhaps this is because we do not want to make a fuss; perhaps we simply hope the injury will dissipate of its own accord. Unfortunately, delaying treatment is often the best way to prolong an injury and delay recovery.

Recently, I experienced a good example of this myself. While at the beach, I slipped on some rocks and hurt the middle finger of my right hand. It was extremely painful and I feared I might have broken it. As such, I taped it up and tried to use it as little as possible before I could get an x-ray the next day. Overnight, it seemed to get more painful and made it difficult for me to sleep.

Fortunately, the x-ray showed there was no break, so with confidence I started remobilising and massaging my finger. While painful initially, this became easier the more I did and within 24 hours I had regained normal movement and function.

So my advice is simple. If you think you might have broken a bone, rest, ice, compress and elevate (RICE) the affected area and arrange an x-ray as soon as possible. If your leg is injured and painful to put weight on, you might need to use crutches.

If you have not fallen or received a knock, the chances are you will not have broken anything. I would recommend the RICE approach for the first 24 hours and then to move the injured area. Remember: do not be scared of the pain. Go hunting for the source of the pain and then massage and move the affected area. If it gets more painful, see a doctor or a physio.

Simply stated, our bodies are designed to move, and if we stop moving just one joint then this can have a domino effect, whereby everything around it will stiffen up and cause more pain. Conversely, if we keep an injured area moving, we will increase the blood flow to the area and aid timely recovery.



