

With ART, we have seen resolution of this problem in 90% of cases with just one to three treatments. Even with chronic cases. ART's effectiveness lays in the way it addresses the underlying structures involved in the injury, rather than just the Plantar Fascia. Under the Plantar Fascia three other structures are commonly involved but rarely treated or addressed:

- § Plantar Aponeurosis.
- § Flexor Digitorum Brevis muscle.
- § Quadratus Plantae muscle.

These structures run very deep within the foot and each must be treated differently to achieve positive results.

Runner's Knee/ Iliotibial Band Syndrome

Runners knee is the term given to diffuse pain around the knee, under the kneecap, often with stiffness under the knee joint. It is often related to too rapid increase of mileage, tight hamstrings, and imbalances between the hamstrings and quadriceps. Other physical structures that are often involved include:

- § Knee capsule.
- § Meniscus.
- § Collateral ligaments.
- § Patellar tendon.

Even the posterior knee is often involved especially a muscle called the Popliteus. This muscle is involved in the rotary stability of the knee.

The psoas muscle is also often involved with knee problems. The psoas muscle is the primary hip flexor. When the psoas muscle becomes shortened, fibrotic and weakened the quadriceps (Rectus Femoris) has to exert more force to make the hip flex. This is a major (and often undiagnosed) cause of unresolved knee pain.

In each case ART can be used to effectively locate and free restrictions.

Shin splints

Shin splints are commonly caused by muscle imbalances, pronation, insufficient shock absorption (worn out shoes) and toe running.

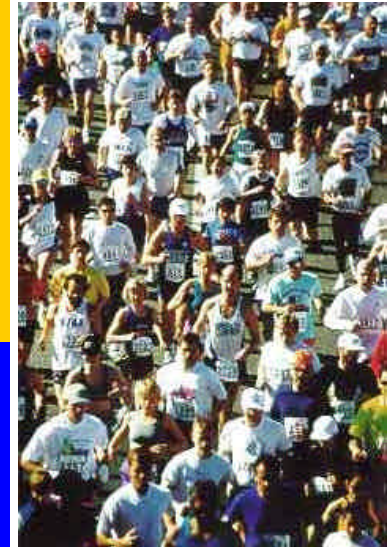
Anterior shin splints are often caused by a muscle called the Tibialis Anterior. Fibers from the Tibialis Anterior tear away from the periosteal (outer surface of the bone) attachment surface. As these fibers heal, they often become fibrotic, making it difficult for this muscle to lengthen normally. This makes the probability of future shin splints more likely.

The same holds true for posterior shins splints where the tibialis posterior is often involved. With ART treatments adhesions are broken down allowing the muscle to lengthen, thereby reducing the probability of future injuries. Icing, reducing mileage, avoiding hills, correcting gait imbalances such as pronation, and stretching are all essential components to correcting this problem.

Considering ART's record in treating running injuries, we should be your first choice of care. If you would like to make an appointment at our clinic just give us a call at 403-241-3772. Also check out our award winning web site at www.drabelson.com.

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Common Running Injuries



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Running injuries are commonly attributed to faulty biomechanics and errors in training methods. Faulty training techniques such as the rapid build up of mileage, running on worn-out shoes, or ignoring our body's messages and continuing to run through pain. Although these important aspects of a running program should be addressed, runners should also consider the cumulative effects that thousand of repetitive motions have on their bodies. Even with good biomechanics and excellent training, runners are always exposed to a considerable amount of cumulative trauma.

About Soft Tissue Injuries

Injuries to soft tissue (ligaments, muscles, blood vessels, fascia and nerves) result in inflammation and swelling of the tissue. The body responds to this inflammation by laying down scar tissue (cross fibers on the tissue) in an attempt to stabilize the affected area. This scar tissue restricts motion, reduces circulation, inhibits nerve function, and causes ongoing friction and pressure, and usually results in the production of more cross fibers and adhesions.

Effective treatment of soft tissue injuries requires an alteration in tissue structure by breaking up cross-fiber adhesions and restoring normal function to the soft tissue. This process substantially decreases healing time, treats the root cause of the injury, and improves running performance.

Treating Soft Tissue Injuries

Over time, many methods have been developed to remove these adhesions. As a clinician, I have tested and used many of these techniques. Unfortunately, most of these techniques fail in the critical area of identifying the exact location and direction of these adhesions.

In my practice, working with a broad range of soft tissue injuries, I have discovered that Active Release Technique (ART) to be most effective method for breaking the restrictions formed during running. ART is a patented, state-of-the-art, soft tissue treatment system that is ideal for dealing with problems that occur in muscles, tendons, ligaments, fascia and nerves. ART was developed by Dr. Mike Leahy, a Doctor of Chiropractic in Colorado Springs, and a trained aeronautical engineer.

At our clinic we have used ART to effectively treat most common injuries by runners including: Plantar Fasciitis, Achilles Tendonitis, Runner's Knee/Iliotibial Band Syndrome, shin splints, and back pain.

Achilles Tendonitis

Achilles Tendonitis is an inflammation of the Achilles Tendon. The Achilles Tendon joins the heads of the gastrocnemius and the soleus muscles (calf muscles). Initial symptoms are a dull, aching pain in the tendon after running.

Improper treatment of Achilles Tendonitis can lead to major problems. Cross friction massage often irritates this area, extending the period of recovery rather than reducing. Problems often arise in the treatment of this syndrome when a therapist uses heavy direct pressure and tension over the Achilles Tendon. We have seen numerous case of Achilles Tendonitis that were needlessly prolonged be-

cause of ineffective treatments.

When standing, the Achilles tendon is constantly under pressure resulting in limited blood circulation to the tissue. Inflammation of the Achilles Tendon is often caused by the tissue just in front of it. With ART, we often see immediate improvement by releasing restrictions in the fascial tissue. After ART treatments, ice, stretching, strengthening, and balance work continue to be key components in correcting the problem.

Plantar Fasciitis

The plantar fascia is a band of fibers which runs from the heel bone to the base of the toes. Plantar Fasciitis occurs when these tissues are irritated and inflamed. Bone spurs often form on the heel if this condition is not correctly treated. Biomechanical or training flaws such as over-pronation, flat feet, a tight Achilles tendon, a high-arched foot, or a sudden increase in training mileage often cause plantar Fasciitis. Conventional therapy (without surgery) usually requires six weeks to three months.

