

Injuries Common for Recreational Endurance Athletes

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Fall is the time of year when many recreational endurance athletes, who have trained hard all spring and summer, finally reach the long awaited race day of their half marathon, marathon, or even Ironman triathlon. Those who have completed these races deserve enormous amounts of credit. They have set and reached their goal, stopped at nothing, and likely pushed through a fair amount of pain to achieve their goal. In fact, the majority of them have likely pushed through some sort of pain. Researchers have found that approximately 50% of people training for endurance races experience some sort of injury with that number approaching 90% of those training for full marathons. In most cases these injuries are overuse soft tissue injuries that have progressed over the course of training even against the trainee's best efforts to rest, stretch, ice, etc. This article will describe a few of the most common injuries experienced by these athletes and also provide treatment recommendations to ensure that training can begin again in full force once spring rolls around.

The most common sites for injury vary slightly depending on a person's training activity (running, cycling, swimming, etc.) however commonly affected body parts include the knees, hips, low back, and shoulders. There are also many different diagnoses that can cause pain in each body part. Below you will find four of the most common problems and what contributes to these aches and pain.

1. Patellofemoral Pain (Runner's Knee)

Athletes with patellofemoral pain commonly complain of pain in the front of their knee(s) that worsens with activities such as running, squatting, and going up and down stairs. They may also experience pain in their knees when sitting for too long with the feeling that they need to straighten their knee to help it feel better. Patellofemoral pain can occur for a number of reasons. In people training for a race a common culprit can simply be increasing intensity or duration of training too quickly. There can also be other less obvious reasons related to the athlete's body such as weakness and/or tightness in the muscles of the thighs or hips, poor arch height feet, history of injury to the lower extremity. Athletes experiencing this type of pain can usually manage their own symptoms by decreasing activity, using ice and/or anti-inflammatories, and performing gentle exercises stretching and range of motion exercises. If appropriate measures are not taken this can become a recurrent, chronic problem that can prohibit athletes from achieving their goals.

2. Achilles Tendinitis and Plantar Fasciitis

Achilles tendinitis and plantar fasciitis can be lumped together because they are both generally described as heel pain and they are both closely related to problems in the calf muscles. Although pain is generally felt in the back of the heel with Achilles tendinitis and in the bottom of the heel with plantar fasciitis they are similar in the activities that worsen them and the treatments that make them improve. In both diagnoses pain is normally the worst in the morning and is also significantly worsened with exercise. As with problems of the knee, weakness and tightness in the muscles along with poor arch height can increase a person's risk for developing these types of pain. Common treatments for these problems in addition to decreased activity are gentle stretching use of orthotic inserts in training and daily wear shoes. Heel pain should not be ignored or "pushed through" as it can cause more chronic problems such as bone spurs or tearing.

3. Low Back and Hip Pain

Low back and hip pain commonly go hand in hand with endurance athletes since there is significant overlap of the musculature that stabilizes these areas. Strength and stability of the trunk and hip are extremely important for all types of endurance athletes as it dictates how their limbs interact with the ground or bike. For this reason these areas are prone to developing pain due to both impact and sustained positions with different training activities. For example, runners experience the constant impact of their feet hitting the ground with each stride which consequently requires these muscles to fire with each stride putting them under repetitive stress. Cyclists on the other hand are constantly in a forward bent position engaging their low back muscles which also puts prolonged stress on the muscles making them more likely to develop pain. Muscular pain in the low back with a regular training regimen is easily treated and normally resolves fairly quickly however athletes should not ignore more serious symptoms. If back pain is accompanied by peripheral symptoms such as numbness, tingling, or weakness in the legs medical evaluation should be sought immediately.

4. Shoulder Tendinitis (Swimmer's Shoulder)

Swimmer's shoulder is a general term for impingement syndromes of the shoulder that can lead to irritation of the tendons of the muscles that make up the shoulder girdle. Abnormal symptoms include decreased strength and range of motion in addition to pain. This injury is specific to those ambitious enough to train for a triathlon. One of the main causes of this condition in addition to overuse is scapular instability or weakness in the muscles surrounding the shoulder blade. If this condition is not appropriately treated it can result in prolonged inflammation or even tearing of the tendons.

Recommendations for Treatment

While many conditions experienced by athletes can initially be managed with rest, ice, and gentle exercises such as stretching, pushing through the pain can result in significant injury in many cases and

have a huge long-term impact on a person's overall fitness. Athletes will likely recover faster with appropriate treatment of their pain. Seeking the opinion of a physical therapist or orthopedic physician will help the athlete identify the root cause of their symptoms and receive the most beneficial treatment. A recent example of this at OST of Kaukauna clinic was a male runner who was unable to get rid of his thigh pain. He had modified his running distance, frequently utilized a foam roller to loosen his muscles, and was stretching daily. Upon further evaluation it was determined that this patient had weakness in his hip which was causing his quadriceps to work harder than normal to compensate. He was treated with trigger point dry needling to address his muscle pain along with a few targeted exercises to promote improved hip strength and was back to his normal training schedule within a couple weeks.

For other injuries or treatment recommendations, you can contact Orthopedic & Spine Therapy of Kaukauna at ostkaukauna@ostpt.com, stop into the clinic at 1 Bank Avenue, Suite C in Kaukauna, or go to www.ostpt.com