

Golfer's Elbow

There is nothing like a round of golf on a beautiful summer morning; the smell of freshly cut grass, birds chirping and the sun coming up over the horizon. When you are suffering a sporting injury however, the joy of golf can turn into a less than joyful experience.

Known medically as EPICONDYLITIS, Golfer's Elbow causes pain and discomfort at the inner elbow joint, spreading to the forearm and wrist. Golfer's Elbow is not limited to golfers, however. Many activities can lead to Golfer's Elbow, including racket sports and throwing sports. Similar to Tennis Elbow, Golfer's Elbow is related to excess or repetitive stress, especially forceful wrist and finger motions, damaging the muscles and tendons that control your wrist and fingers.

Symptoms can include stiffness in the elbow, a weakness in hands and wrists and numbness or tingling sensation radiating to the fingers. If left untreated, golfer's elbow can cause persistent elbow pain.

Rest is extremely important in the recovery process. Sneaking in a round of golf before you are fully healed will only prolong your recovery.

But don't fret! Golfer's Elbow doesn't have to keep you off the course or away from your favorite activities forever! With rest and appropriate treatment from your physiotherapist, you will be back in the swing of things in no time.

Most common in men ages 20 to 49, the pain of Golfer's Elbow can appear suddenly or gradually and may get worse when you:

- Swing a golf club or racket
- Squeeze or pitch a ball
- Shake hands
- Turn a doorknob
- Pick up something with your palm down
- Flex your wrist toward your forearm

Runner's Knee

Runner's Knee, or Iliotibial Band Friction Syndrome (ITBFS), is a painful overuse knee injury that affects the outer part of the knee.

Common in both runners and cyclists, pain usually starts as intermittent pain, sharp in nature and very focal. If this pain is ignored, it can develop into a dull ache even when you are not running or cycling, becoming painful when climbing up or down stairs.

Physiotherapist Catherine McLean says that the two main causes of ITBFS are inappropriate training and abnormal biomechanics. Weakness in the Gluteus Medius muscle, located at the top of the buttocks can cause ITBFS in distance runners. If the muscle is weak, then the tension in the ITB is increased. Your physiotherapist can create a strengthening program to target this muscle, helping you gain strength and improve your running. Catherine suggest that before cycling, you should check your bike setup, especially saddle height. Too high a saddle will increase knee extension and irritate the ITB. If the saddle is too far back, having to reach further for the pedal will also stretch the ITB and possibly lead to irritation.

Treatment from your physiotherapist will assist in the prevention and rehabilitation of Iliotibial Band Friction Syndrome.

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Ask your physiotherapist for stretching and strengthening exercises to help you recover quickly and avoid further injury in the future. Remember to stretch before and after activity, use ice to decrease pain and inflammation and take the time to rest your body, allowing it to fully recover.