

Overuse Tendinopathy

Injuries:

Research indicates that 1 in 10 people will experience tendon pain at some point in their life.

Have you ever developed nagging heel pain after starting a new running program? How about persistent shoulder pain after spending the weekend gardening?

Muscle soreness after doing something different is normal, however, if you're experiencing any of the following you may have developed a tendinopathy:

- Throbbing, aching pain at rest (often at night).
- Stiffness on waking in the morning that eases off as you get moving.
- Puffiness or swelling at the site of pain.

What is Tendinopathy?

Tendinopathy is a common condition caused by an overload applied to a tendon, most commonly affecting the ankle, hip,

knee, and shoulder. Aside from the above characteristics, tendinopathy often begins after one or more of the following:

- Sudden increase in frequency, intensity, or duration of training (gym, running, etc).
- Completion of an activity that you don't do often (long walks, gardening, painting, home maintenance).

Every individual tolerates load differently depending on age, fitness level, and exposure to load. Sometimes when we suddenly increase the load applied to the body, we exceed the capacity of our muscles and tendons, which can lead to the development of tendinopathy.

How Can Physiotherapy Help?

If you are experiencing any of the symptoms outlined above, physiotherapy can be helpful in providing the right management to reduce pain and help you return to normal daily activities. Physiotherapists are skilled in diagnosis of tendinopathies, using targeted questioning and functional assessment to identify the cause, site and severity of your symptoms.

Once a diagnosis has been achieved, your physiotherapist will provide an explanation of your condition, and start you on a loading program that is individualised to your symptoms and goals. Your physiotherapist will also provide education about prevention to ensure that you can return to your daily activities without worrying that your symptoms will return.

If you are experiencing any of the symptoms outlined above, book in to see a physiotherapist for an individualised loading program and advice about load management to prevent further

issues.

Written By: Alex Balnaves

To make an appointment with [Alex Balnaves](#) you can [BOOK ONLINE](#) or call [langwarrin Physiotherapy Clinic](#) on (03) 97891233 or Eramosa Physiotherapy Clinic on (03) 5977 6590

Experiencing Back Pain ?

Have you suffered from back pain for many years? Has your doctor told you that your scans showed degenerative changes in your spine and a few bulging discs? Do you know someone whose life has been restricted because of their “bad back”? If you have answered “yes” to any of the above, you should know that you are not alone!

Now let's crunch some numbers and statistics!

- According to Australian Institute of Health and Welfare (AIHW), 1 in 6 Australians (16%) reported back problems in 2014-2015. That's 3.7 million people.
- It is estimated that 70-90% of people will suffer from back pain in some form at some point of their lives.
- 70% of people around 40 with no back pain have degenerative changes.
- 50% of people around 40 have disc bulges.
- 90% of people with back pain for which a cause can't be found

So, what do all these numbers mean?

As you can see, back pain is very common, so is degenerative findings on Xray, CT and MRI. The words such as "disc bulging" "slipped disc" "narrowing" "bone and bone" may sound very alarming and definitely will raise more concerns and uncertainty for people who is already suffering in pain.

What is worth noticing is through clinical practice and studies, we have found that the scans rarely explain what the person with back pain is going through. This means someone who has back pain may have no significant findings in their scans, and someone whose scans show degenerative changes with disc bulge, spinal canal narrowing may suffer only mild or no back pain at all.

What can I do to help with my back pain?

Step 1: know that the scan doesn't tell everything about what you are going through.

Step 2: know that persistent pain doesn't mean you are damaging your back further. It means that the structures around your back are sensitized.

Step 3: don't restrict all your physical activities because you fear you will damage your back further. Gentle physical activities which are **paced according to your pain limit** is not only healthy for your spine but also for the rest of your body and mind.

Step 4: know what your back likes and doesn't like, so you can take control of your back pain and not let it control your life.

Step 5: know there isn't one best solution to fix your back, your back is unique just like you are.

Step 6: if you are unsure of any of the above, see a physiotherapist for a thorough assessment will help you understand better how your habits, movements or the lack of are contributing to your back pain.

Book with Jess Zhu at our [Langwarrin Clinic](#) on 03 9878 1233, or Eramosa Physiotherapy Clinic, 03 5977 6590

Written by: [Jess Zhu](#)

Osteoarthritis of the Knee

What is Osteoarthritis of the Knee?

Osteoarthritis (OA) is a common degenerative joint disease that affects almost all the joints of the body. The knees are some of the most commonly affected joints, with many people experiencing at least a small degree of osteoarthritis over the age of 40. The disease is characterized by degradation of the cartilage that lines the surfaces of the joint, growth of osteophytes or bony spurs, pain, stiffness and swelling.

What are the symptoms of Osteoarthritis?

Stiffness in the morning that lasts less than 20 minutes and pain with movement, clicking, crepitus, swelling and a generalized reduction in joint range of motion are all common symptoms of osteoarthritis. As OA is a progressive disease,

the condition is categorized into stages to help describe symptoms and guide treatment. Early stages of OA may have only mild symptoms, however as the disease progresses, a joint replacement may be required.

What Causes Osteoarthritis?

While aging is the most significant risk factor for the development of OA, it's not an inevitable outcome of growing older. Other factors that may predict the development of OA are obesity, family history, previous joint injury, high impact sporting activities, and peripheral neuropathy. It is thought that abnormal wear and tear or stress on the joint is the primary cause of OA. It is also important to note that many people will have changes on X-Ray that show OA, however, will have no symptoms – which indicates that simply having OA is not a sentence for having pain.

What is the treatment?

Your physiotherapist is first able to help diagnosis and differentiate OA from other conditions that may have similar symptoms. An X-Ray can confirm the diagnosis and can be helpful in determining the best course of treatment to follow.

While OA is a progressive disorder, there is often a significant improvement that can be made simply by addressing lifestyle factors and any biomechanical factors that may be contributing to pain.

How can physio help with Osteoarthritis?

Your physiotherapist is able to guide you with strengthening exercises to support the joint, advice for adapting your exercise routine and can even help you to lose weight, all of

which have been shown to have a positive impact on the symptoms of OA.

If surgery is the right course for you, your physiotherapist is able to guide you through this treatment pathway, helping you to prepare and recover from surgery to get the best outcome possible.

None of the information in this newsletter is a replacement for proper medical advice. Always see a medical professional for advice on your individual injury.

Four Tips For Reducing Knee Pain

Knee pain comes in many forms with many different causes. While treatment for every person and condition will be different in each case, here are a few tips that may help to reduce knee pain throughout the day.

1. Choose supportive footwear to avoid knee pain

One of the biggest culprits for ongoing knee pain is wearing unsupportive or high-heeled shoes to work. High heels often lead to tight calves and altered gait patterns, while unsupportive shoes can allow rolling in of the ankles, which

can, in turn, place extra stress on the knee joints. Having an assessment with your physiotherapist to see how your shoes might be affecting your knee pain is a worthwhile investment.

2. Adjust your sleeping position to improve knee pain

While most of the time, our knees get a well-deserved rest during the nighttime hours, there are a few sleeping positions that can place additional stress on the knees. Lying on your side with bent knees can place tension on the outer thigh muscles and also the knee joint itself. Try to keep your knees straightened to at least 30 degrees and if you sleep on your side, place a pillow underneath the top knee to reduce stress on the joint.

Alternatively, if you sleep on your back it may be helpful to place a pillow under your knees so that they rest in a slightly bent position, to unload the joint. Try experimenting with different pillow arrangements to see which combination works best for you.

3. Avoid sitting or resting too much

When knee pain strikes, your first instinct is probably to get off your feet and stop exercising. The truth is that our knees, like all our joints, are designed for movement and regular exercise helps to keep them healthy. If you are having pain with high impact activities such as running, try switching to swimming and cycling before stopping exercise altogether. Resting in a sitting position for prolonged periods can also place excess stress over the knee cap and knee joint. When sitting for long periods, try to stretch your legs out ahead of you and avoid crossing your legs.

4. Seek physiotherapy treatment for your knee pain

Many of us see putting up with pain as a sign of strength however, a small niggle that is easily treatable can turn into a larger problem if left over time. This may seem like an obvious point, yet the first step to recovery is often just seeking treatment.

Our physiotherapists are happy to discuss your condition with you and share their tips to help you stay pain-free.

To make an appointment call 9789 1233 or [Book Online](#).

Foam Rolling

Alanna Hickey & [Jessica Smith](#), Rosebud's Physiotherapists, explain the benefits of foam rolling and give us some guidance on how to use the foam rollers.

Foam Rolling

What does foam rolling do?

Foam rolling works by placing direct and sweeping pressure on the soft tissue targeted. Foam rolling has shown to have short term benefits that result in increased joint range of movement, reductions in pain and severity of DOMS (delayed

onset muscle soreness) (Cheatham, Kolber, Cain & Lee, 2015). Foam rolling has been shown to be particularly effective in the first 1-2 days following exercise (Pearcey, et. Al. 2015).

It is theorized that foam rolling helps to produce the above results by causing short term alterations to the neuromuscular system. However, the exact physiological mechanisms of foam rolling that cause the above results are yet to be clearly established (Cheatham, et al. 2015).

How to effectively foam roll?

Depending on the muscle group you are targeting, use the foam roller in a sweeping fashion along the length of the muscle. You can also friction over 'problem' or 'tight' areas. You may use a foam roller, spikey ball, trigger point ball or hand roller with this technique.

When to use foam rolling?

Foam rolling can be used before or after an event, for approximately 1-2 minutes per major muscle group (eg. hamstrings or quadriceps). Before an event, foam rolling should only play a small role in your active warm up. After an event foam rolling should be combined with an active cool down and then static stretching.

Still not sure what to do?

Contact one of our experienced friendly physiotherapists to help guide you with your injury prevention/conditioning and injury rehabilitation to let you reach your basketball goals!



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