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GOOD NUTRITION HOW TO PREPARE HEALTHY MEALS

> PLUS... WORKING OUT & EATING OUT

NO PAIN, NO GAIN?

Severed fingers, protruding bones, shattered kneecaps, dislocated shoulders. The result of a car crash? No. just mother day in the sporting world, where injuries from the slightly uncomfortable to the downright debilitating are all too familiar. Cheryl Parsons explores some of the common sporting traumas and the treatments required to get you back in the game

"The bones were penetrating the skin, the lower leg completely deformed - it was not a pretty sight," says sports physiotherapist Soren Laursen, from Transform Specialist Medical Centre in Dubai, as he recounts the worst injury he has faced on the job. The victim? A football player who had been standing still only to be illegally tackled from behind, resulting in an excruciatingly painful complete crus fracture of the leg below the knee. The reality of an injury such as this could see a footballer off the pitch for up to five months or more, given the healing time and physiotherapy required to rebuild strength.

"Two of the most typical sporting injuries that we come across involve the shoulder and the knee. Both are usually caused by a lack of stability that can result in pain, or if you're unlucky, a more severe injury such as a ligament tear or cartilage damage, which can take much longer to recover from," explains Laursen, who has worked with players from the Afghanistan World Cup Cricket team, International Premier Tennis League, Pro MMA fighters and triathletes. Laursen's clinic base in Dubai also provided medical coverage for the Dubai Rugby Sevens last year.

"Racket and batting sports, such as tennis, badminton and cricket, are the biggest instigators of shoulder injuries," continues Laursen. "Any weakness and instability in a player's shoulders can result in pain, because of the high power and repetitive motion required during play. Knee injuries are also more common in the likes of football and rugby because of their contact nature and the stress that is placed on the joint from constantly changing direction."

So what is the most hazardous sport you can take up? Boxing? Ice hockey? A spot of

motor racing? In fact, it was basketball that topped the list in 2013, with more than 2.56 million injuries reported in the United States, while football came a close second with 2.49 million. Even a leisurely amble around the golf course could leave you nursing an ice pack, with 18 per cent of golfers complaining of injuries in 2013, according to TotalProSports.com. Think of Tiger Woods: at the age of just 39 the sport has left him with a list of complaints - a ruptured Achilles, and knee and then back surgery that ultimately contributed to him taking time away from the green. Cheerleading can also come at a price, accounting for 70.5 per cent of fatal, disabling or serious injuries among female college students in the US, according to the National Center for Catastrophic Sport Injury Research.

As with any injury, the first question that sports enthusiasts always ask is: "How quickly can I get back to what I was doing?" The answer depends on the degree and nature of the injury. Muscles typically take around two to eight weeks to recover, tendons from six to nine months, while a ligament injury could set you back for as much as six months to a whole year. However, just because the pain has gone, it does not mean that the injury has fully healed.

Your physiotherapist will ultimately need to check three things - flexibility, strength and stability - before clearing you for a return to your sporting activity. Do you have full range of motion back in your joint? Do you have the strength to keep that joint stable during movement? A proper rehabilitation and training programme overseen by your physiotherapist is important as you gradually ease back into your sport, and is, by far, the safest and most effective way of avoiding a repeat of the injury.

Common injuries

t. RUGBY: Injury to the shoulder AC (acromioclavicular) joint, formed by the cap of the shoulder (acromion) and the collar bone (clavicle). physiotherapy management and treatment 2. RUNNING: ITB (illotibial band) syndrome, which causes lateral knee pain. Symptoms can range from a stinging sensation above the knee joint to swelling or thickening of the tissue. stretching and strengthening programme 3. TENNIS: Lateral epicondylitis, or tennis elbow, a painful condition caused by repetitive motion that inflames the tendons that join the muscles of the forearm and the outside of the elbow. taping, stretching and strengthening 4. CYCLING: Lower back strain due to the hunched-over posture. advice, soft tissue release and a stretching 5. FOOTBALL: ACL (anterior cruciate

ligament) strain/tear. required and a rehabilitation programme 6. GYMNASTICS: Wrist strain, pain and inflammation caused by placing weight on wrists and routines that involve fast, jarring supports/tape, a progressive strengthening programme 7. GOLF: Medial epicondylitis, or golfer's elbow, caused by repetitive motion and overuse of tendons of the forearm and elbow. special supports, a stretching

and strengthening programme 8. NETBALL: Ankle sprains caused by the constant landing and pivoting motion. strength and conditioning programmes, taping/supports and joint mobilisation 9. DRAGON BOATING: Shoulder and

lower back strain because of paddle power soft tissue release, stretching and conditioning exercises 10. CROSS-FIT: Knee cartilage tears and education and ligament strain. muscle balance training 11. BOOT CAMP: Knee and shoulder education and impingement. physiotherapy management

Compiled by physiotherapists at the Dubui Physiotherapy & Family Medicine Clinic



When an injury occurs, use the universal RICE principle

> REST. Stop what you are doing and contact your doctor for an examination.

ICE. Apply an ice pack three times a day for 15 to 20 minutes to reduce swelling. When the ice is removed, the body increases the blood flow to the injured area, helping it to repair more quickly.

- COMPRESSION. Apply a special compression band or neoprene sleeve to help with the swelling. The fit should be snug, but not so tight that it restricts movement - it should allow the muscles to expand and contract when they fill with blood.

- ELEVATION. To reduce swelling. elevate the injured area above your heart. Also keep the joint and muscle active without increasing the pain. This does not mean you should run on a sprained ankle, but you can do some ankle pumps with the feet elevated to assist recovery.

Your doctor may refer you to a physiotherapist, where you will get a complete assessment of your body. Always consult with your medical practitioner for advice first.

