

Avoiding Common Fitness Injuries

EXERCISE
ETC. INC.



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How to Get Your CE Certificates

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REMINDER

- Obtain medical clearance and physician's release prior to beginning an exercise program for clients with medical or orthopedic concerns.

Be Aware Of Risk Factors

- Injury risks increase as amount of training increases.
- Higher levels of fitness protect against future injury.
- History of previous injury is a risk factor for future injury.
- Smoking increases risk.
- Most important factor for predicting exercise-related injury may be low aerobic fitness levels.

Common Fitness Injuries

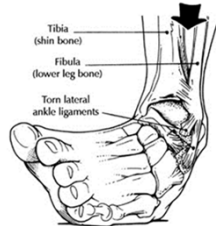
From Most Common to Less Common

1. Ankle Sprains
2. Jumper's Knee
3. ACL Tear
4. Back Sprains & Strains
5. Rotator Cuff Tears
6. Concussions

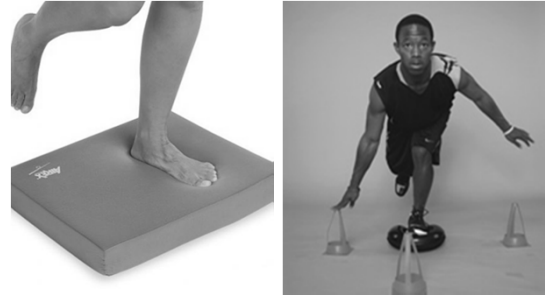


1) Ankle Sprains

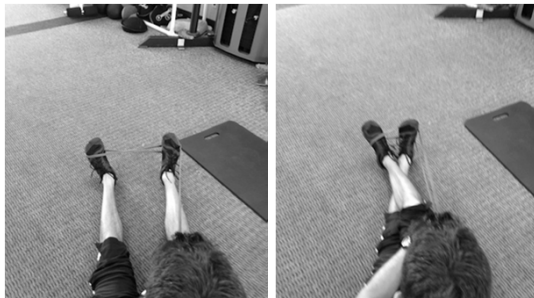
- Account for 1 out of every 10 visits to the emergency room
- Acute ankle sprains should be treated with R.I.C.E.
- Sprained ankles often heal with residual weakness that must be addressed.



Stability Training



Resistance Band Eversion/Inversion



2) Patellar Tendinitis or "Jumper's Knee"

- Chronic Degenerative Condition
- Caused by:
 - Repetitive eccentric forces as in jumping, deep squats



Preventing "Jumper's Knee"



- Strengthen and Stretch Quads
- Manage volume and intensity of Patellar Loading

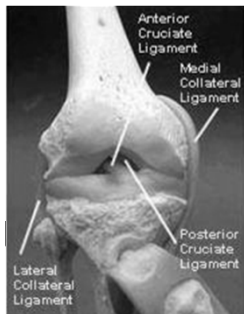
Management of Patellar Stress

- Limit Squats to "parallel" depth
- Keep maximum knee flexion to 90° during Step Up and Lunging Exercises
- Recommend a professional bike fitting
- Avoid or limit time spent in high gears and hill climbing



3) ACL & OTHER KNEE LIGAMENT SPRAINS

- Anterior Cruciate
- Posterior Cruciate
- Lateral Collateral
- Medial Collateral



ACL INJURY RISK & WOMEN



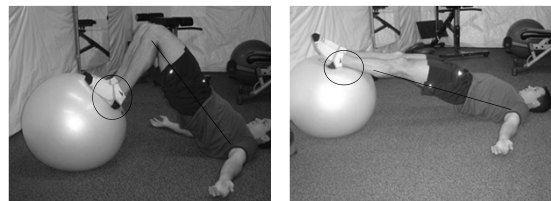
- Estrogen
- Femoral Notch
- Hamstring Firing
- Landing Mechanics
- Q-Angles
- Fatigue

Best Practices to Prevent ACL Injuries

- Strengthen the Hamstrings
- Improve Jump/Landing Mechanics
- Train Change of Direction
 - Running/Jumping



Stability Ball Bridge w/ Leg Curl



Preventing Knee Issues

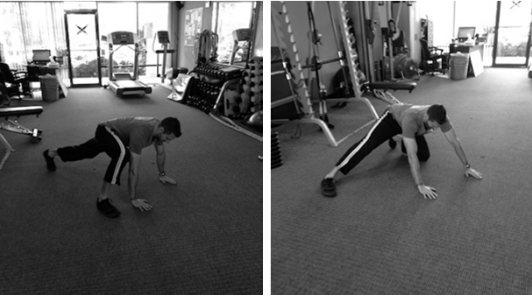
- Improve hip and ankle mobility.
- Strength glute and hamstring function.
- Improve landing mechanics
- Stamina!



Improving Ankle Dorsiflexion



Improving Hip Mobility



Hamstring Slides



Jump & Landing Mechanics

- Land on the balls of the feet
- Immediately sit back to the heels
- Flex simultaneously at the hips and knees falling into a semi-squat to absorb the impact



4) Back Sprains & Strains

• Causative factors:



- Poor conditioning
- Obesity or Smoking
- Poor exercise technique
- Poor Body Mechanics
- Extreme spinal rotation and/or hyperextension
- Muscle Imbalances
- Aging

Symptoms of Strains & Sprains

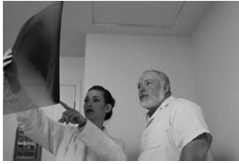
- | | |
|--|--|
| <ul style="list-style-type: none"> • Grade 1 Symptoms: <ul style="list-style-type: none"> ✓ Tightness in the back ✓ May be able to walk properly ✓ Minimal, if any swelling | <ul style="list-style-type: none"> • Grade 2 Symptoms: <ul style="list-style-type: none"> ✓ Some difficulty walking without compensation ✓ Occasional sudden twinges of pain during activity ✓ Some swelling may occur ✓ Pain on palpation |
|--|--|

Grade 3 Symptoms Include

- ✓ Significant ambulatory difficulty
- ✓ Severe pain
- ✓ Immediate swelling
- ✓ Any contraction will be painful and might produce a bulge in the muscle
- ✓ Expect to be out of commission for 3 to twelve weeks...or more



What to do about it?

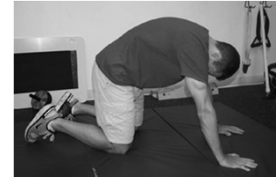


- Rest (not more than 48 hrs)
- Control pain and inflammation
- See a professional to determine which tissues have been injured & to rule out more severe injury or condition
- Following inflammation phase encourage movement & gradual return to activity

Exercises Following Sprains & Strains

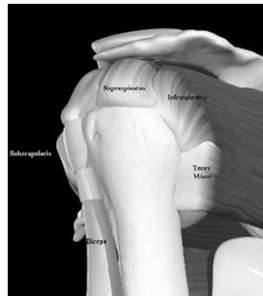
- Select from movements that feel best

- Cat-Camel
- Hip Stretching
- Birddog



5) Rotator Cuff Tears

- Causes:
 - Long history of overhead sports or movements.
 - A fall or direct impact.
 - Resulting from impingement
 - Overuse or degeneration
- Symptoms:
 - Pain associated with reaching or overhead activities.
 - May also experience weakness.
- Treatment:
 - Surgery may be required or PT.



Causes of Rotator Cuff Dysfunction

- Significantly weaker External Rotators
 - <60% of Internal Rotation Strength
- Tight Posterior Shoulder Capsule causing poor internal rotation
- Posture
 - Excessive Cervical Lordosis
 - Excessive Thoracic Kyphosis
 - Excessive Internal Rotation

The Cuff is Reactive



- Strengthen External Rotators
- Integrate Proprioception Training
- Pendulum Swing
 - Used to maintain shoulder mobility during inflammation phase of acute injury
- Movement from Legs
 - Forward/Backward
 - Circular

Improving Internal Rotation



External Rotation Against A Wall



Side Lying DB External Rotation

- Trains infraspinatus & teres minor, external rotators
- EMG Studies have shown this to be best exercise for the external rotators of the cuff
 - Reinhold et al



Bilateral Tubing External Rotation



Rhythmic Stabilization

Supine Stabilization



Quadruped Stabilization

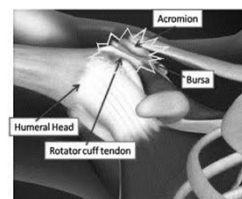


Yoga Push Up



Shoulder Impingement Increases Risk of Rotator Cuff Injuries

- Compression of the rotator cuff tendons & subacromial bursa between the humeral head & coracoacromial arch
- Muscles involved:
 - Supraspinatus
 - Long head of the biceps tendon
 - Subacromial bursa



Causes of Shoulder Impingement

- Anatomical or bony abnormalities
 - type 3 or hooked acromion
 - arthritic changes
- Muscle imbalances
- Scapula dyskinesis
- Poor exercise technique
- Overuse Overhead
- Secondary due to anterior shoulder laxity

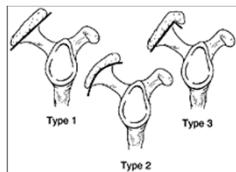


Figure 2
Three types of acromion process
Magee D. *Orthopedic Physical Assessment*.
3rd ed. Philadelphia: W.B. Saunders; 1997.

Preventing Impingement



- Improve Scapula Stability
- Improve Thoracic Mobility
- Reduce Scapula Winging
- Avoid Excessive Overhead Activity

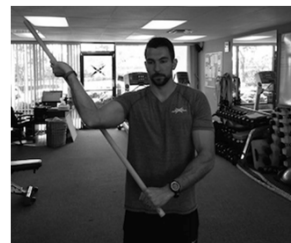
Improve Soft Tissue Quality

- Release shortened muscles with self myofascial release of the pec minor and posterior capsule.

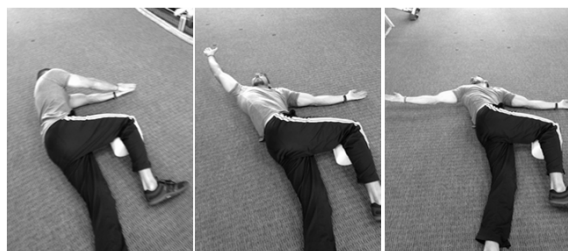


Stretching Subscapularis

- If client has limited external rotation OR internally rotated posture subscapularis may be tight



Side Lying Windmill



Wall Shoulder Flexion



Wall Sliding



7. Concussions

- Causes:
 - Impact to the head with an acceleration-deceleration force.
- Identified with alteration in mental status (confusion) or loss of consciousness.
- If a concussion is suspected call 911 immediately.
- If neck not injured try to have them sit upright to decrease intracranial pressure.



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