

Hello Runners! This is a good, basic article adapted from the website for Nicholas Institute of Sports Medicine and Athletic Trauma. I like to give this to my patients who are runners, enjoy!

Running Injuries: How to prevent them, or if you have one, what to do?

What causes running injuries?

If you have had a recent injury, ask yourself these questions:

Training errors:

Have you changed your training routine by increasing mileage, adding speed, or hill training? If so, you may have to back off for awhile. Gradual progression of training allows your body time to adapt to higher demands placed on it. Each time your foot hits the ground it absorbs about 2.5 times your body weight and you land on each foot around 800 times/mile. Tissues that are injured are less able to withstand these forces.

Shoes:

They may look fine, but the materials in most running shoes lose their shock absorbing and stabilizing properties after a few hundred miles. Change your shoes after five hundred miles regardless of how they look. Your selection of shoe type is also important. Talk to an expert who knows your running habits, mileage, terrain, and competition level.

Training Surface:

Has this changed for you recently? Soft or hard surfaces, slanted roadways, and hills all affect the mechanics of running.

Your biomechanics:

Everyone has different strengths, weaknesses, flexibility patterns, muscle recruitment skills and body types. All of these factors impact the way any of us runs. Changing your running style is a very difficult thing to do but you should try to keep a comfortable stride length, hit the ground on an area from the middle of the foot to the heel of the foot, and take off with the toes. If your head seems to move up and down a great deal, or from side-to-side, you are running inefficiently.

If you have a running injury, The Do's and Don'ts

DO: Rest, ice, and elevate the leg (if that's what you injured!)

DO: Reduce your mileage to a pain free amount, even though it may be a blow to your ego.

DO: Cross-train to maintain your overall fitness level with exercise such as biking, or swimming or perhaps stair climbing.

DO: Trust and listen to yourself. Irritability, fatigue, insomnia, severe muscle soreness, and getting colds and flu easily may be signs that you are overtraining.

DO: Progress at a naturally comfortable rate.

DO: See a doctor, physical therapist, or other health professional who you trust. If they can't help you, they probably know someone who can.

DO: Warm up by walking or jogging slowly for at least five minutes.

DO: Cool down slowly at the end of your run by walking at least five minutes.

DO: Stretch before and after every run, especially the Achilles tendon, hamstrings, and quadriceps. Remember the best time to stretch is after you run and the muscles are pliable.

DO: Get on a weight training program to strengthen muscles around the hip, knee, ankle, and abdominal area. This may take some of the shock away from the knee.

DON'T Run through the pain. Your body is trying to tell you something—listen to it.

DON'T Think you have to give up running. There's help out there!

DON'T Ignore the problem. If you do, it is more likely to come back. Or get worse.

Training guidelines for injured runners

- Run only as far as you can without pain. This is your starting point.
- Do not run 1/4 of your weekly mileage in one run.
- Spread out your runs throughout the week. From the standpoint of avoiding injury you are better off running 10 miles in two separate days than 8 miles on one day.
- In the early stages of recovery from injury, don't do speed work.
- Add mileage by 10-15% per week at a maximum. If additional mileage becomes too hard, do not force yourself through it.

Hope this info helps, if you have any questions or needs for physical therapy, feel free to call me at 541-776-2333, or email at justincarson@hotmail.com. Thanks! Justin Carson DPT, CSCS, Jackson County PT-Medford Clinic