

Playing the Pain Game: Dealing With Injury

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Metro Sports

It's a great time of year for training. Sometimes, however, running can create or worsen injuries.

For a serious athlete this is a terrible way to start the season. Recognizing the injury signs early can help ward off a serious problem. Here are some of the common running injuries that many doctors see at this time of year, plus tips for how to avoid them.

Injury #1: Shin Splints

Technically, shin splints refer to a pain in the shin, and they are generally the result of excessive stress on either muscles or bones. Bone-related shin splints are usually the more serious variety and are characterized by pain in the shin bone (tibia) when pressure is applied.

If your shin hurts with pressure and after running, then a stress fracture (a crack in the bone from excessive stress) is likely developing. Listen to your body, and don't run through the discomfort, as shin-splint pain generally means the bone can't stand the pressure of running.

To fix this problem, a sports-medicine physician will look at your shins, your running shoes, your mileage and sometimes even your bone density.

All of these factors can cause the problem. Muscular shin pain, also known as exertional compartment syndrome, is a pain in the soft, outside part of the shin, which tightens during activity. This also can be made worse with running, but usually a physical therapist can fix this problem by loosening the fascia covering that surrounds the muscles.

The symptoms: Your shin hurts from pressure or during and/or after exercise.

The remedy: Shin pain can almost always be cured, but it can develop into a stress fracture if a runner isn't careful. Get properly fitted for your shoes, schedule an appointment with a doctor to see if you should get X-rays or an MRI.

Injury #2: Hip Pain

Pain in the hip also is a common running injury, and like shin pain, it can get worse if the cause is not identified and treated. The most serious cause of hip pain in runners is a

stress fracture of the femoral neck, the top part of the femur (thigh bone). This tends to ache in the groin, especially after a longer run. These injuries can worsen quickly if not diagnosed and treated early. Running through the pain is a terrible idea.

Athletes will know they are developing a femoral neck stress fracture if the pain in the hip seems to worsen after a run and aches in the evening as well. The femoral neck stress fracture is linked to both activity and to bone density. Therefore, if hip pain is a persistent problem, runners should insist on a bone-density test called a DEXA.

The thinking here is that the underlying problem that leads to the injury is a low bone density. Bone density peaks at age 31, but athletes of any age can improve it with weight training, increased calcium intake and, depending on age and degree of osteoporosis, the use of new medications.

The symptoms: Aching in the groin or hip after a longer run.

The remedy: Hip pain and particularly femoral neck stress fractures are serious injuries made worse by running through the pain. Diagnosing this injury and finding the cause, including mileage, running mechanics and muscle strength can make a big difference. Any hip stress fracture requires bone density testing (DEXA).

Injury #3: The Dreaded ITB

The letters I, T and B repeated in order to any longtime runner is like an evil hex. The ITB, an abbreviation for the iliotibial band, is a strand of muscle and tendon that runs from the outside of the hip to the outside of the knee. With running, the tensor fascia lata, the muscle on the outside of the hip that becomes the ITB, tends to lose flexibility. The result is that the TFL and ITB can begin to pinch on the outside of the hip and knee.

Runners who are developing "ITB Syndrome" will describe a pinching pain, usually on the outside of the knee, which hurts during a run. Most people feel this pain one or two miles into the run, and the symptoms are often described as "someone is jabbing a needle into the outside of my knee."

Like many injuries, ITB problems are more easily treated the earlier they are diagnosed. The initial treatment often includes a good stretching regimen, the use of a foam roller on which the athlete lays and rolls on the upper leg like a rolling pin, hip-muscle strengthening exercises and sometimes orthotics or motion-control shoes.

Occasionally, a corticosteroid injection into the area of pain can fix the problem. Most importantly, much like stress fractures, trying to run through an increasingly painful ITB can cause a much more prolonged recovery. With the ITB, the earlier we see it, the quicker the fix.

The symptoms: Sharp, stabbing pain during a run, usually in the outer knee.

The remedy: Again, early diagnosis helps. Use a foam roller three times a week to stretch the muscle, do hip abductor and adductor strengthening at the gym, possibly get an orthotic or corticosteroid injection.

Injury #4: Achilles Tendonitis

The Achilles tendon is so named because the Greek god Achilles was dipped into the River Styx by his heel, making his body invincible everywhere except there. He died when an arrow pierced his Achilles. Runners should take heed of his story, as the Achilles tendon is a vulnerable area on anyone's body.

Running injuries to the Achilles range from tendonitis and inflammation of the tendon to a partial tear of the tendon, worsening pain and a lump. As is the case with most injuries, a little careful attention can make a significant difference. The general cause of Achilles tendonitis is insufficient strength and flexibility in the muscles attached to it, the gastrocnemius and the soleus. When these muscles are tight, the tendon is under increased stress and can become irritated and, over time, can tear.

The best way to stretch the Achilles and the attaching muscles is to put the foot against a step with the heel on the ground and slowly lean forward, feeling the stretch at the top of the calf. Repeat with a bent knee, feeling the stretch lower down toward the heel. Ideally, this stretch is done daily, before and after exercise. Orthotics also can help correct the anatomic alignment. With Achilles pain, the key is to get it checked out early and avoid the chronic tear.

The symptoms: Achilles tendon injuries are potentially career-threatening. Watch for pain and, especially, a swollen bump on the tendon.

The remedy: Regular stretching, proper foot mechanics and the correction of factors that have caused injury in the past. A doctor may use an MRI to look at cases of severe pain.

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