



Hands On

Wadsworth Osteopaths ■ Newsletter ■ October 2014

This month's theme is Sports and Sports Injuries



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Sports Injuries

Sports injuries vary greatly depending on the sport, the level of competition and your personal fitness and preparation. As osteopaths we see the greatest number of injuries from contact sports – football, rugby and hockey most notably. Running injuries are the next most common followed by racquet sport injuries.

Prevention is better than cure. Each sport has its own characteristics. For example footballers are particularly prone to knee injuries. A typical cartilage injury is caused by rotating a bent knee while body weight is on the joint (exactly what happens when kicking a ball). **Footballers** spend a lot of time strengthening their quadriceps muscles, particularly the vastus medialis and lateralis. These muscles support the inside and outside of the knee, and when strong, can reduce the risk of cartilage or ligament injuries.

Runners can pick up jarring injuries as a result of the repeated impact of the heel during running. Using good quality running shoes with shock absorbing soles will help. Also running on soft ground or a mixture of hard and soft rather than just roads and pavements reduces risk.

For all sports, **warming up** by stretching prior to competition or training and repeating the stretch routine after activity, reduces the likelihood of acquiring muscle injuries.

DRICES If you are unfortunate enough to pick up an injury remember **D** =

diagnosis. Find out what has been damaged so you know how to look after the injury and how best to speed recovery.

R = rest. Common sense dictates that you should not run on a broken bone or compete with a torn muscle but the length and extent of the rest period is quite variable and you need to take advice. Broken leg bones need to be immobilised until new bone forms, once the bone is strong enough you will be advised to start taking weight on it. Muscles and ligaments when injured will benefit from careful and graded movement at an early stage. Muscle and ligament tissue contains collagen fibres, during tissue healing new collagen fibres are laid down. If the affected area is moved carefully during healing it promotes new collagen growth in the correct alignment which makes the tissue stronger once healed.

I = ice. Use ice or alternate hot and cold to reduce inflammation. **Compartment syndrome** is where a muscle is damaged, becomes inflamed and swollen and the tough outer covering of fascia (the capsule of the muscle) causes pressure from the swelling to increase to a painful level. The increased pressure within the muscle limits blood flow and healing can be severely impaired. Ice and deep soft tissue stretching can be used to reduce the swelling and stretch the capsule to aid healing. Don't overdo the ice, it can cause damage – ice burns are not nice!

C = compression. Using a bandage or tubular support can both help to reduce swelling, for example in an injured knee, and also support to prevent re-injury of the damaged joint.

E = elevation. Raising an injured arm or leg will prevent excessive swelling and aid blood flow.

S = strapping. Providing support by taping will allow more rapid return to activity minimising risk of further damage. Ankle ligament sprains can take six weeks to recover, but depending on severity, it may be possible to return to sport after a week or two with supportive strapping. The strapping tape does the job that would normally be done by the ligaments. If applied correctly taping allows movement in the ankle joint but prevents the ligament from overstretch.

So to summarise:

Prevent injury in the first place if you can – use the right kit, make sure you are fit enough for your level of sport and develop a warm-up / cool down regime.

If you are injured get some expert advice and follow DRICES.

Horse-Riding

If you have never ridden a horse before the assumption is usually that you sit passively in the saddle, tap the horse with your heels to get going, tap a little harder to go faster, steer with the reins, and pull on both reins to stop – not dissimilar to the way you handle a car. Try it for yourself and discover that you could not be more mistaken with this approach – unless of course you want to race, or you are a thrill-seeker with a death-wish!!! If the horse does not want to move it may unceremoniously dump you with a quick buck. Alternatively, if it bolts off at gallop – and by some miracle you manage to cling on – it may suddenly change direction or come to an abrupt halt, in which case you are catapulted over the front or off to one side!

As with all sports, in the hands of the professional, horse-riding, show-jumping and dressage displays look effortlessly easy and graceful, with the horse executing clever patterns and speed transitions in the arena, seemingly all by itself. In reality, it has taken the rider hours and hours of patiently communicating control over all the horse's manoeuvres through a series of subtle body signals that it has learnt to respond to. The slightest shift in body weight can change the impulsion (energy rather than speed) or the direction of the horse, a slight brush of the foot in co-ordination with a signal from the reins can alter the footwork, or indicate a change

in stride e.g. from trot to canter, or vice versa. The competent rider has to be able to use her/his body in unison with the horse, so that she/he becomes part of the movement but also controls it. The horse is not a machine – it is a very strong, intelligent creature with a personality and a will of its own, but it can quickly sense who has the upper hand in the partnership, or when the rider is tense and nervous.

So how can osteopathy help the rider?

- Assessment: We will discuss your particular problem, examine you to find out how your body is working. Do you have a postural problem? Are your muscles in good condition? Are you sufficiently flexible in your joints to ride well?
- Treatment: We cannot fix broken bones, but we can help maintain suppleness in all the joints, which is so crucial for natural horsemanship. The rider not only has to have a supple back and pelvis, but relaxed hips, knees and ankles. The shoulders, wrists and elbows should be soft so that they can mirror the head movement of the horse, and engaging the diaphragm is all part of this process of relaxation. Articulation treatments ensure that the joints of the spine, legs and arms are operating within the optimum range-of-movement, whilst massage techniques and warm-up advice will keep the muscles healthy and lithe. And, for the less experienced – or sometimes less fortunate riders – we can sort out those muscle and joint problems that occur as a result of accidental jarring or crash-landings!!
- Advice: We will provide you with advice including postural, exercise and training techniques to keep you fit and riding.



Sports Injury and sleep – Nutritionist & Fitness Trainer Derek Wilson

A link has been made with teenagers who sleep at least eight hours each night. They have a 68% lower risk of sports injury compared to those who regularly sleep less, researchers reported at the American Academy of Paediatrics (AAP). Not only this, but researchers from Canada reported in Paediatrics, that children who sleep an extra 20 minutes each weekday night have considerable improvements in behaviour at school.

Questionnaires requested details of the children's sports, how much time they spent in each sport both at school and outside, did they have private coaching, were they involved in any strength training, what their sleeping patterns were, and how much they enjoyed their sport. The questionnaires were completed by 112 student athletes with an average age of 15, looking at sleep patterns and sports injuries. They found that the more sleep the pupils got, the lower their risk of injury seemed to be.

The older school students were much more likely to have a sports injury, 2.3 times

more likely for each additional school year. The following did not significantly increase risk of injury however: how many hours they practiced each week, how many sports they did, whether or not they were involved in strength training, whether the sport was fun, and whether they used a private coach.

Counsellor Caroline Hudson discusses Anxiety

Anxiety is a normal and essential part of life. Our “flight or fight” response is hard wired into our brains to make us responsive to danger. In our modern lives it can be a normal response to a stressful situation e.g exams, job interviews. A certain amount of anxiety can also help us to learn and perform better in day to day life. However when it starts to occur too frequently (daily or constantly) or cause great distress, then something needs to change!

Counselling can reduce worries by helping you make sense of what is causing your anxiety. It may be one major life event, or more commonly, a whole host of separate worries. A counsellor can also help you to control your anxiety so that you feel calmer. CBT (cognitive behavioural therapy) can also be very beneficial. The idea behind CBT is that by controlling and modifying your thoughts you can reduce the worry and therefore decrease anxiety!

Anxiety can also be treated by self help methods. The most well researched of these is exercise - it is said to “mop up” adrenaline levels, thus reducing stress. Avoiding alcohol, smoking and caffeine all seem to make a difference to anxiety levels. Keeping a steady blood sugar level by eating regular meals and snacks (6x a day) which all include some protein and less sugar can also help manage anxiety levels.

Following the launch of our new Expectant Mums and Babies Clinic at Holly House we are holding talks for healthcare professionals working with pregnant Mums. If you are interested in attending contact Maxine McFarland on 01482 875004.

December Issue

The next issue will reach you in December. Our December issue will of course have a Christmas theme.

[Click here to read all news..](#)

Celebrating 30 years 1985 – 2015

Wadsworth Osteopaths started in 1985 so next year is our 30th Anniversary. Difficult to believe but it is true. During 2015 we will be arranging a number of activities to mark the 30 years.

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