

BACK IN THE GAME

VOLUME 3 • ISSUE 1 SPRING • 2004

REHABILITATION INFORMATION FOR THOSE WHO ENJOY THE SPORTING LIFE

Hamstring Strains

By Dee Olson, Physical Therapy Supervisor

The hamstrings are the most common thigh muscle group to suffer strains. The incidence of hamstring strains is particularly high in sports which require explosive sprinting such as track and football skill positions. These injuries can be slow to heal and quite troublesome if not dealt with properly.

Hamstring strains come in three degrees of severity. A first degree strain is mild and consists of soreness with movement and tenderness to the touch. These can worsen as the athlete often is not aware of the symptoms until the muscle is cooled down after the activity. Many athletes have a tendency to continue to train if they can work out the soreness causing more damage.

Second degree strains consist of partial tearing of the muscle belly. In this instance, the injury is immediately apparent as the athlete may experience an audible “pop” and the tear is accompanied by severe pain and some loss of movement.

Third degree strains are the most

severe strains and consist of complete rupture of the muscle or tendon. These usually involve significant hemorrhage and loss of function.



Treatment of hamstring strains varies according to severity. First degree strains are often dealt with by decreasing activity and avoiding sprinting and aggressive stretching. Return to explosive activities should be gradual and include a progressive stretching regimen.

Treatment of second and third degree strains involves a much more stringent process. In both cases, the athlete must

rest and physical therapy is often beneficial in the recovery process for these individuals. Treatment techniques employed by therapists include: ice, ultrasound, progressive stretching and exercise (including isokinetic), and gradual return to the sporting venue. Wrapping or taping may be done to apply some support to the hamstring and maintaining warmth in the muscle so it's not starting out cold.

Persistent hamstring injuries can become progressively more serious and should be evaluated by a doctor or therapist. If you have any questions regarding this condition, please contact the Marquette General Sports

Rehab department at 906-225-3186 or 1-800-200-TEAM.

Sports Injury Clinic
1-800-200-TEAM
24-Hour Injury Hotline

Clinic Hours
Monday & Thursday
3:30-5:00 PM
Walk-ins welcome anytime
Monday-Friday

 **UPPER MICHIGAN**
REHABILITATION CENTER
MARQUETTE GENERAL HEALTH SYSTEM

Delta County Sports Health

The Delta County Sports Health program is under the direction of Dr. Michael Keeker, a family practice physician at Marquette Medical Clinic-Gladstone and longtime provider of sports medicine services in Delta County. Assisting Dr. Keeker with specialty sports medicine services in Delta County is Dr. John Lehtinen, a family practice physician at FamilyCare Doctors in Marquette, chief medical officer for the United States Olympic Education Center located at Northern Michigan University, and team physician for Northern Michigan University.

Delta County Sports Health offers a number of sports medicine services, including diagnosis and treatment of exercise- and sports-related injuries, injury prevention and second opinions. Also offered are evaluations, treatment and therapy utilizing state-of-the-art equipment and specialized support staff. Services include: treatment for acute injuries and post-concussion injuries, fitness evaluation, coaching workshops, evaluation and comprehensive rehab, custom orthotics and sport bracing, timely consults, functional testing, custom exercise programs, and education and training. For more information on Delta County Sports Health, call Doctors Park Rehab at 906-789-2639. Doctors Park is located in Escanaba at 2500 Avenue South in Suite 201.

Rotator Cuff Injuries

By: Dee Olson, Physical Therapy Supervisor

Rotator cuff injuries are common in sports where the athletes use repetitive, overhead motions such as throwing, swimming the crawl or butterfly, tennis serving/smashing, and volleyball spiking. Signs of a rotator cuff injury may consist of shoulder joint pain, pain radiating down the outside of the arm, and/or restriction of shoulder movement.

One of the best ways to prevent rotator cuff injuries involves a proper warm-up. This consists of gradually increasing the intensity of the activity (throwing, hitting, etc.), rather than starting at a high intensity with cold muscles. Warm-up should also include general shoulder stretching.

Other ways to prevent rotator cuff injuries including strengthening the shoulder internal/external rotators and upper back muscles, and coaching proper technique. It is important that proper technique be used in all phases of the throwing motion. Sloppy technique is responsible for many repetitive injuries.

Once a rotator cuff injury is sustained, treatment will likely consist of rest followed by a gradual return to activity. A regimen of stretching and gradual strengthening will be implemented. Athletes experiencing pain and inflammation may benefit from a physical therapy treatment called

iontophoresis. Iontophoresis is the introduction of ions of soluble salts (in this case, in the form of an antiinflammatory medication) into the body by means of electric current. Ice following exercise is very common and beneficial for the relief of inflammation as well. An oral antiinflammatory drug and/or selective use of heat prior to working out may also be beneficial.

The last course of treatment reserved for severe tears, and those which have been allowed to progress beyond the early stages is surgery. Typically, in surgical cases, there is a significant tear which is limiting daily function.

For more information on rotator cuff injuries, call the Marquette General Sports Rehab department at 906-225-3186 or 1-800-200-TEAM.

