

PHYSIOTHERAPY NEW ZEALAND | MOVEMENT FOR LIFE Kōmiri Aotearoa

ASKA SPORTS PHYSIO



NEW ZEALAND PHYSIOS ANSWER YOUR TOP 10 QUESTIONS



This advice is general in nature and is not intended as a substitute for care from a physio or other health care professional. If you experience signs or symptoms of injury, illness or disease you should seek the advice of a health care professional.

YOU ASKED, WE ANSWERED!

In 2014 Physiotherapy New Zealand threw this question out to the online community...

What one question would you like to ask a sports physio?

The resulting questions were wide and varied; they covered everything from performing the splits without injuring yourself (might be tricky!) to preventing shin splints.

In this ebook we highlight 10 of our favourite questions and ask some expert physios from across New Zealand to enlighten us with their answers.

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What causes shin splints and how do I prevent them?



Answered by Bharat Sukha

Shin splint pain is caused by repetitive loading and can occur with running and sports that involve jumping or rapid acceleration or deceleration. It is classified as an overuse injury.

When you do this type of exercise a lot of force is loaded on your shinbone (tibia) and the surrounding soft tissue. These structures eventually can't cope with the extra load and the result is the pain and swelling (inflammation) that you feel.

The worst that can happen with shin splints is a high pressure build up in the muscles called Compartment Syndrome or if bony cracks (splints) appear which can result in a stress fracture. These worst-case scenarios are not overly common. Nevertheless, you don't want to end up with severe pain — which is why it's a good idea to see a sports physio.

Shin splints are relatively common, but they are not a simple injury and there are a number of factors that can play a role.

Here are a few possibilities that a physio can look at:

- poor or incorrect shoes
- running on hard surfaces
- muscle weaknesses
- muscle imbalance or inflexibility
- poor body alignment
- training too much or too guickly.

What treatment and management is required?

There are a number of ways to treat, and in the long term, help prevent this injury. The best idea is to consult a sports physio who can design a treatment and rehabilitation plan that involves initial rest and local therapy and then addresses ALL the factors that cause you pain.

For example, you may need the correct shoes for your foot type and a programme that initially reduces your activity level and then addresses cross training, stretching and strengthening. Fixing just one factor won't resolve your problem so you need to have them all covered!

It is important to see your sports physio as EARLY as you can as this type of injury does progress relatively quickly and just resting and medication alone will not help you in the long term.

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lecturer in both Health Science and
Sport and Recreation.

I've pulled a hamstring muscle playing football, what's the best treatment advice and how do I prevent it from happening



Answered by Grant Plumbley

Surprisingly, considering that this is a very common injury and the financial impact involved in having a multi-million dollar football player side-lined for weeks, the research to support the best prevention strategies for this type of injury is inconclusive.

The only risk factor that has been identified conclusively for a hamstring injury is previous hamstring injury which doesn't really help!

So given you have 'pulled' your hamstring muscle it is important to visit a physio to determine exactly how bad your injury is; it can range from tightening or spasm of the muscle, to a few fibres of the muscle being torn, to many of the muscle fibres being torn, to a complete and total rupture of one (there are three back there) of the hamstring muscles. From taking a detailed history and examining your injury, the physio will be able to ascertain how severe your injury is, how long it is likely to take to repair and, along with yourself, determine the best treatment options and set out some goals for you to reach. A complete rupture would likely be best managed by surgical repair but this would depend on a few factors including the level of football you play.

What you can do to help your recovery:

- If you do sustain a hamstring injury then you should really stop the activity immediately or you risk making the injury worse.
- Follow the RICE regime (Rest, Ice, Compression, Elevation).
- Ice immediately on the side-line, for 20 mins.
- Shower and re-ice again.
- Apply a compression bandage or tubigrip to the injured area.
- Limit the amount of walking you do for at least the next 24 hours, and if you have to walk then allow any limp that the body may cause as this helps protect the injury.
- Then every 2-3 hours remove the bandage, re-ice for 20 mins, then re-apply the bandage again and continue the RICE regime for 2 -3 days.
- You should see a physio for assessment, advice, treatment and rehabilitation of the injury. This will help ensure that all the contributing factors are identified and a rehabilitation plan organised so as to rectify these problems.

If you do sustain a hamstring injury then you should really **stop the activity** immediately or you risk making the injury worse.

What can be done to encourage the injury to heal well and reduce your chance of injury?

Your physio will comprehensively assess your injury and set out a rehabilitation programme which may include the following;

- Encourage adequate flexibility of the hamstring groups and ensure that the neural supply to the muscle is functioning well.
- Improve the strength, endurance and performance of the hamstring group by giving appropriate exercises during your recovery (including Nordic curls which the research has shown to be effective in rehabilitation and prevention of hamstring injury).
- Improve the function of the hamstring by encouraging you to run when appropriate, advancing to include sprinting, accelerating/decelerating, incorporating changes of direction, jumping, kicking and lunging as your injury heals.

- There is evidence in support of treatment and exercises directed at improving the mobility AND stability of the spine, and also the positioning sense and stability of the pelvis, hip, knee and foot.
- Review your footwear dependent on your specific foot type, e.g. pronator (flat), neutral or supinator (high arch) foot.
- Suggest a warm-up routine, including dynamic stretching and plyometric exercises.
- Teach you a gentle warm-down with stretching after activity to restore resting muscle length and help reduce the waste by-products formed with exercise.
- Discuss with you the need to keep hydrated.
- In the case of tournaments or many games in a row, consider the use of ice baths to help reduce muscle injury and assist recovery – are you tough enough!



Grant is a Co-Director and physiotherapist at Willis Street Physiotherapy in Wellington. Before his return to New Zealand he spent 13 years working in the UK.

During this time he gained extensive experience in performance, sports and corporate health sectors – including working as physiotherapist with Riverdance - The Show from 1997 to 1999, as they toured Europe, Australia and New Zealand and as a physiotherapist at Tottenham Hotspur Football Club in 2005 to 2007. Grant also looked after the 2000 Olympic Heavyweight boxing champion Audley Harrison, from 2000 until 2007.

What causes cramps and how do I get rid of them?

Answered by Greg Lynch

A 'cramp' is defined as a painful involuntary muscle contraction that occurs suddenly and can be quite debilitating.

Cramps most commonly occur in the leg muscles, particularly the calf muscle or the muscles in the feet. The onset can be quite sudden, but they usually resolve themselves in a few seconds. The muscle can be quite sore for several minutes or even a number of hours.

The cause of cramps is often unclear, however there are some theories. Cramps can occur during or after exercise and may be caused by the continued repetitive muscle contraction during exercise - which is why stretching the affected muscle often offers relief. The stretch needs to be sustained for 20–30 seconds and symptoms should improve within this time.

The stretch needs to be sustained for **20–30 seconds** and symptoms should improve within this time.

Exercise induced cramps may also be caused by a loss of 'electrolytes' (resulting in a chemical imbalance) which happens when we sweat a lot. Ensuring that you take plenty of fluid when exercising may help prevent cramps, if this is the cause.

If you suffer from cramps during or after exercise, then a physio can assist you with an appropriate stretching programme, assessing and correcting any muscle imbalances and ensuring that your muscles are conditioned for the activity that you are wanting to participate in.

Cramps may also be caused by various medications or disease, if this is the case then I would suggest you seek advice from your GP for management of cramps.



Greg graduated from the Otago School of Physiotherapy in 1991. He is an accredited provider for High performance Sport NZ, a Senior and International lecturer with the McKenzie Institute International and is an Advanced Practitioner with the NZ College of Physiotherapy. He is a co-director of Inform Physiotherapy in the Hutt Valley and Wellington Sports Medicine in Kilbirnie, Wellington.



With sore legs from running, is a hot bath or cold water better for recovery and to help prevent injuries or niggles?

Answered by Andy Schmidt

Judging by the number of times I get asked this, there seems there is a lot of confusion and possible misinformation out there about this very question!

To answer this question, some more information about the injury needs to be known, initially about the type of pain that it is present.

'Acute' pain comes from a sudden injury e.g. spraining your ankle. Common symptoms of an acute injury are pain, swelling, redness or heat, which generally come on after the first few days following an injury, and are all signs of acute inflammation.

In this case, cold or ice therapy is the best modality to use. Studies show that icing an area causes vasoconstriction, or narrowing of the blood vessels that supply circulation to the area. This is thought to therefore limit the inflammation occurring at the injury site.

The ice therapy should be applied for 15 to a maximum of 20 minutes, and should ideally be done every three or four hours over the first three days (although you don't have to wake yourself during the night to do this!) Ice itself should never be applied directly to the skin, as it can cause an ice burn, so a wet tea-towel is recommended if an ice pack or a pack of frozen vegetables are not available. It is also very helpful during this time period to elevate and compress the area if possible.

The other type of pain commonly seen is 'chronic' pain. This type of pain develops over time, and may come and go. Chronic pain is often a result of overuse of the body part. Sometimes it may follow on from an acute injury that hasn't been treated properly, or that hasn't healed within the usual timeframes.



For acute pain, **cold or ice therapy** is the best modality to use

For this type of pain, generally heat therapy is better to be used, as chronic injuries more often than not have no inflammation or swelling present. Stiff joints and nagging pain respond well to heat therapy.

Heat will increase the circulation to the area making stiff joints and tight muscles more flexible. Apply the heat using a wheatbag or hot water bottle for 15 to 20 minutes. Again, keep the skin protected with a towel. Sometimes in the presence of chronic pain, you may have an acute inflammation at the site after over-activity. In this case, you could use ice on the site for a few days, as described above.

Often over a period of exercise, you can also have symptoms of muscle soreness, and often for 24-72 hours after exercise. This type of pain is often called 'delayed onset muscle soreness', or DOMS for short, and is thought to be due to micro-trauma to muscle fibres.

In this situation, the evidence is mixed. One school of thought says that because muscle damage has taken place and probably inflammation, cold therapy should be used, however the results of studies into this have been mixed. Equally heat has also been trialled, and in some cases was found to effective, and other times not.

In high level sports therapy, immersion cold or ice baths are often used following a period of intense exercise, and a lot of athletes will testify to their effectiveness. Again the evidence behind the effectiveness of using these is also limited.

It is always important to take care of the skin when using both hot and cold, particularly for the elderly or those with skin conditions. As always, try to get your injuries assessed as early possible, so the best advice and treatment can be given and the correct therapy commenced.

Andy has a Masters in Health Practice with Distinction in Musculoskeletal Physiotherapy, and a Bachelor of Physiotherapy. He has been practicing in the musculoskeletal field for 18 years, and has worked with all levels of sport in the UK and New Zealand.

Andy is the co-owner and head physiotherapist of Active+ branches in Albany and Orewa, and is also currently the physiotherapist for the New Zealand Davis Cup tennis team. www.activeplus.co.nz

I walk every week (around 6-7k per walk) and I get quite sore hips/pelvis from doing this. I've been fitted for shoes but it's still quite sore. Is there anything I can do to help this?



- Answered by Greg Bell

As a physio looking at the body as a machine, and then as a creative feeling individual, you come up with a few possible questions to bounce back to the individual, which will hopefully provide some answers, or some actions to take to go the step further. Information is key.

Location Location

Where is the pain? Hip pain can be felt elsewhere; such as buttock, groin and thigh. Conversely low back pain can be referred into the hip, as can other structures — so a quick investigation of other joints should be done.

General Health

This is an essential part of questioning the walker. Were there any hip problems in the childhood of the walker? Is there any symptom that might suggest arthritis either osteoarthritis (creaking, weakness, stiffness progressing) or rheumatoid (joint pain, many joints involved, fatigue, stiffness of joints)? The physio needs to be aware that many conditions can look perfectly like a muscular or joint problem, but if we ask the right questions, we could avoid missing the rare severe condition.

Frequency

I would like to know if this set of legs is walking once a week or daily. What if this person is walking twice a day at this distance? There's nothing wrong with doing a lot of walking but were you accustomed to walking, have you been walking like this for years or have you just started? How fast are you walking? What are you walking on? Sand, concrete, paddock, bog, up hills? All these surfaces change how the hip interacts with the pelvis, so these must be questions that have answers.

Are you walking alone or with someone else? If you are a slow walker trying to keep up with a rocket powered buddy there could be some problems. Interestingly, Alison Grimaldi, a physio from Sydney and expert in hips, detailed a common hip pain possibility in the stature differences of walking buddies. Say there's a husband and wife who love walking briskly. He is 6'5", she is 5'0". If they are to walk abreast then the Mrs is going to have to walk harder, over stretching her hips to keep up with Michael Jordan.

It is possible that the wrong shoe for a walker could alter the mechanics of the lower limb enough to create gradual onset hip pain

"I've been fitted for shoes..."

Many people still choose to shop in the popular discount chains and end up choosing a shoe based on look and price, yet I have sent many a patient back to these stores when a pronating flat foot buys a shoe for a high arched foot. It is possible that the wrong shoe for a walker could alter the mechanics of the lower limb enough to create gradual onset hip pain. Road camber can also contribute to foot strike mechanics. I remember a runner I treated who had bought the wrong type of shoes for his foot type. He ran on cambered roads at high volume. He developed a case of bilateral shin splints which went away with the right shoes and flatter running surfaces. Many physios have undergone foot biomechanical training and can tell you with the chair side assessment technique what shoes will suit you. Sure, it's not a fancy technology-laced approach, but it's an expert opinion which can take in the whole picture of the person, rather than just the foot.

Is there anything I can do to help this?

Once the diagnosis is arrived at, then this question can be answered. If you had persistent troubling pain causing something as fundamental as walking to malfunction, you would want to get it seen to by a living breathing clinical reasoning physio wouldn't you? If all the red flags are put away, then there is a phenomenally good chance for physiotherapy to help.

To discuss every possibility would require a few thousand more words, but what's discussed here covers the thinking process required by physios to effectively treat or manage such conditions.

I hope I have described to you how seriously we take that quest to answer your question.

Greg practices physiotherapy in Wanganui and is part of a line of physiotherapists dating back to the polio epidemics where grandfather Bill Bell worked in USA and later New Zealand. He has developed some expertise in management of Jaw and Headache problems, but happily works with the rest of the human body as well. He is married to Vanessa, and proud father to four sons.

Is it better to use brace or strapping tape when coming back from an injury?



Following an injury controlled movement is important. Initially this is to prevent stiffness and regain mobility, but in the later stages it is import to help improve the strength of the healing tissue. As you do more there is the risk that you may do too much and reinjure yourself. This is where strapping and bracing can help over the short term.

The aim of strapping and bracing is to provide some external support to the healing tissues while you increase your activity and loading of the injured area. It should not be used to try and allow you to do activities that you (or your injury) are not ready for.



Strapping, though initially feeling tight, stretches and starts to give after 15-20 minutes – a way shorter timeframe than most trainings or games. The benefit therefore is largely sensory – the pulling of the tape on your skin helps keeps your body aware of the area and more responsive to movement. Strapping can cause skin irritation in some people, especially after being worn over a period of time and often needs someone else to apply it. If only used for a short period of time it is quite cost effective.

Braces come in many shapes and styles and if you are looking at a brace it is best to seek advice, as a good and appropriate fit is important for the best effect. Though the initial cost may be higher if you are going to need support over a longer time it can be cost effective. Braces don't usually need help to apply, which makes life easier if you need to put it on regularly. Some people find them a bit bulky, and some sports won't allow certain materials when involved in play.

So which is better? The simple answer is that either can be used, but in some body areas or situations, one may be more practical than the other. Discuss the best option for your injury with your physio.

Bracing and strapping should not be used to try and allow you to do

activities that you (or your injury) are not ready for.



Hamish is a sports and general physiotherapist who works in a gym-based clinic in Tauranga. He has 20 years of experience working with teams in a multitude of sports, from club through to international level. He is a strong believer in prevention, so gets out and talks to groups on regular occasions. He also has sports science training, so he can help you take your performance to the next level. www.p2pphysio.com

What's the fastest way to relieve tension in the muscles without seeing a masseuse or leaving the house?

Answered by Gill Stotter

There are a number of reasons for people to feel tightness or tension in their muscles. It can be due to over-training, lack of preparation and conditioning or due to muscle imbalances. Muscles work together to perform functional movements; some can be weak and not activating correctly whereas others become tight due to over-activity. It is a fine balance for the body to function optimally, similar to keeping your car tyres balanced.

Tension in the muscles can be relieved by heat, self-massage and stretching. You may find a tight trigger point in the muscle or a tight band of tissue. Firstly warm the muscle with a heat pack for a few minutes to promote relaxation and increase blood flow, then gently massage along and across

the muscle fibres with an oil or cream. You can also use a tennis or spikey ball or a foam roller to ease out the tension.

Following the massage gently stretch the muscle using effective breathing techniques to increase relaxation and promote the length in the muscle. Gently work into the stretch, breathing in through your nose and out through your mouth, hold for 30 seconds and repeat 3-4 times, increasing the range of active movement. You may feel slight discomfort as the muscle is lengthening. Always maintain good alignment as you stretch; it is important that the stretch is not painful and it should never feel worse afterwards.

Education, injury prevention and teaching self-management strategies are all important roles of a physio – so if the tension doesn't disappear then make sure you seek professional advice.



Gill is an Advanced Practitioner with the New Zealand College of Physiotherapy and has over 30 years experience. She has expertise in musculoskeletal, sports and orthopaedic physiotherapy with a particular interest in education, prevention and management of problems by looking at the bigger picture. Gill is a physiotherapist and director at Wellington Sports Med. www.wellingtonsportsmed.co.nz

What's the best time to seek treatment on a sports injury? Should I wait until the swelling has gone down a bit?

- Answered by Dr. Angela Cadogan

The best time to seek treatment for a sports injury is 'as soon as possible'. This is especially true for significant injuries that affect your ability to walk or weight-bear or to carry out your normal activities. Physios can assess your injury and provide you with a diagnosis and a specific management plan for your injury. They can also refer you for further investigations such as x-rays or ultrasound scans to help with making a diagnosis or to rule-out a more serious injury.

The first 48 hours after an injury is the most critical time for the management of acute sporting injuries to avoid further damage that could later lead to impaired healing. We know that proper management in the early stages of injury can significantly reduce the time it takes for you to return to your sports or recreational activity. Your physio can advise you how to care for your injury in the early stages by providing you with specific

information and the necessary compression bandages and techniques to help with the RICE protocol (Rest, Ice, Compression, Elevation) and advise you how to avoid "HARM-ful" activities (Heat, Alcohol, Running and Massage) that may slow down your recovery.

To answer the question regarding whether you should wait until the swelling has gone down before you seek treatment, the answer is 'no', you don't have to wait. Swelling is usually a sign of tissue damage. As well as assessing the significance of the swelling and providing a diagnosis, your physio can show you how to manage and minimise the swelling in the early stages to optimise your recovery. As the swelling goes down, it is important that you begin to move the injured part slowly and progressively to avoid excessive stiffness that may develop later on. Your physio can provide advice about when

to begin moving, how much and how often, and provide valuable advice about what other activities you should and shouldn't be doing at various stages of your recovery. So even if there is some swelling, there are many things you can be doing to help your recovery with the guidance of your physio.

After the swelling has reduced, your physio can provide you with appropriate strengthening and rehabilitation exercises specific to your sporting activities to help minimise the risk of future injury to the same area, or to other areas that may compensate for any residual weaknesses.

A physio can also advise you on ways to maintain your general fitness if you are unable to run or carry out your usual fitness or sporting activities because of your injury. Physios can prescribe exercises and crosstraining/fitness activities that will help to keep the rest of your body in the best possible

shape for your return to sport while you recover from your injury. There is nothing worse than getting your sprained ankle ready to play again, only to find your lungs are letting you down!

So, in summary, see your physio early for a diagnosis and advice on the best way to manage and rehabilitate your injury, and how to keep the rest of your body in the best possible shape to get you back to sport as soon as possible.





Dr Angela Cadogan Physiotherapy Specialist (Musculoskeletal) PhD, NZRPS, MNZCP (Advanced Practitioner – Sports & Orthopaedic)

Angela is a registered Physiotherapy Specialist (Musculoskeletal) working in clinical practice in Christchurch where she specialises in the assessment and management of sports injuries and musculoskeletal conditions. Angela has a special interest in shoulder pain and sees a large number of patients of all ages with a variety of shoulder conditions including sports-related shoulder pain and chronic joint and tendon disorders. Angela has a PhD in Musculoskeletal Diagnostics, specialising in the shoulder. Angela also has a Masters Degree in Sports Physiotherapy (Curtin University, Western Australia), and has worked with a number of sports teams, including working as the physiotherapist for the NZ White Ferns women's cricket team, and NZ Cricket men's "A" teams for eight years.

www.drangelacadogan.co.nz

Is R.I.C.E still the best advice for immediate injury treatment?

Answered by Blair Jarratt

Yes, you can go a long way to promoting appropriate healing with the simple RICE concept which stands for Rest, Ice, Compression and Elevation.

However, the most up-to-date research tells us that if you go a couple of steps further to this and add in *Protecting* the injured area and also introducing in the concept of *Optimal Load*.

So now the best acronym for acute injuries should be **P.O.L.I.C.E** (protection, optimal load, ice, compression, elevation)

Optimal load means replacing rest with a balanced and incremental rehabilitation programme where early activity encourages early recovery, as rest is not always appropriate and can sometimes slow recovery. An example of this type of situation is with a simple ankle sprain that we see in the clinic has simply become a stiff ankle as the ankle has been "rested" for too long.

So now the best acronym for acute injuries should be P.O.L.I.C.E (Protection, Optimal Load, Ice, Compression, Elevation).

Physios are excellent at knowing what and when to apply the 'Optimal Load' that I am describing and will accelerate your return to function following an injury.



Blair is a Director of Bureta Physiotherapy Tauranga. 2013-current Physiotherapist to NZ U19 Cricket, 2010-2013 Physiotherapist to the Canterbury Wizards Cricket, 2011-2013 Physiotherapist Canterbury Metro and Canterbury B ITM Rugby. www.buretaphysio.co.nz

I'm confused about warm up advice, should I be doing static or dynamic stretches, or something else?

Answered by Justin Lopes

Warming up is as much about injury prevention as it is about preparing your body and mind to perform at its best. By doing movements that are designed to prepare you for the activity you are about to do, you are preparing both physically and mentally. By gradually increasing the intensity of the exercise you are increasing the blood flow to muscles and also your core temperature, which can lead to reduced muscle and joint stiffness.



Current research suggests it is best to keep warm ups to dynamic stretches, or short static stretches. Progressively building up the tempo of the warm up is a good idea, making sure you are doing movements that are specific for your sport i.e., all footballers need to warm up the large muscles of their legs, but tennis players should spend time warming up their arms too.

Generally speaking, a warm up should start with some slow general movements (jogging for football, slow lengths for swimming etc.) then progressively increase in tempo. After a couple of minutes stop and do some dynamic stretches or core activation exercises (such as a plank). Once you are feeling warm, you can start to increase the tempo further by doing more sport-specific drills (using a ball for football, or hitting the ball for tennis). Finally, position-specific high intensity exercises should be left for just before you are ready to compete.

Having a routine that includes all the major muscles that you will be using in your sport is important. Warm ups can vary depending on what you are warming up for - for training you may include more strength drills, whereas pre-competition you would stick to the activities that warm up the muscles but which don't put extra load through them so you are not fatigued.

Static stretches are used to increase the length of the muscle, and short duration static stretches can be used in the warm up, but be aware that repeating static stretches for 30 seconds or more can affect performance as this reduces the force output of the muscle.

Environmental factors can influence your warm up; you may need to warm up longer in colder conditions, or for shorter periods when it is really hot. The intensity of or level of competition can also have an influence on how intense your warm is.

To summarize:

 Warming up prepares your body and mind for performance and helps reduce the risk of injury. Current research suggests it is best to keep warm ups to dynamic stretches, or short static stretches.

- Progressively build up the intensity of your warm up.
- Progress from general movements, to sport specific, to position specific, and finally ballistic movements.
- It takes 3-5 minutes to raise muscle temperature and if you warm up for too long it can affect performance (keep it shorter than 20 minutes and below 80% intensity).
- Once you have increased your muscle temperature, do a couple of repetitions of dynamic stretches or short static stretches (8-12 seconds) for each of the major muscle groups you will be using.
- Use a couple of activation exercises such as plank or single leg supine bridge to activate stabilizing muscles.
- Static stretches of greater than 30 seconds can be used at the end of training to increase muscle length but may have a short term negative effect on performance.

Justin is the director and principal physiotherapist of Back to Your Feet Physiotherapy Ltd. He has over fourteen years sports physiotherapy experience and holds a Masters of Health Science (Hons), a Post Graduate Diploma in Musculoskeletal Physiotherapy and a Post Graduate Certificate in Western Acupuncture. He has worked with New Zealand Football since 2004. Justin also worked full time at the NZ Knights FC for two years and with Waitakere United for three seasons, and is currently the physiotherapist for New Zealand Football's elite referee group, the New Zealand Roller Derby Team, Western Springs AFC, Pirate City Rollers, and the Auckland Roller Derby League. www.backtoyourfeet.health.nz

GOT YOUR OWN PHYSIOTHERAPY QUESTION?

A sports physio can help you with all the questions listed in this book and many, many more. They are experts in injury prevention, injury rehabilitation and improving your sporting performance.

How can physio help?

Injury management and rehabilitation

- Pain management
- Postural education
- Joint mobilisation and manipulation
- Specific rehabilitation exercises
- Strapping and taping
- Developing a programme for a safe return to training, or modifying training to suit
- Referring you to a specialist if your injury needs further investigation.

Injury prevention

- Identifying any previous unhealed injuries
- Teaching correct techniques for warming up and stretching
- Prescribing an injury prevention programme specifically tailored to you and your sport
- Giving you a biomechanical screening assessment
- Prescribing an individual exercise programme to correct any muscle imbalances and improve your movement patterns.

HOW TO FIND A PHYSIO

Go to www.physiotherapy.org.nz and click on "Find a Physio" to see who's available in your area.

Check that your physio is a member of Physiotherapy New Zealand. This shows they're committed to high standards of professional practice. And remember that you don't need a GP referral to see a physio.

Sports performance

- Sport specific conditioning to meet your goals
- Home and gym-based strength and flexibility training
- Exercises to improve your efficiency of movement patterns
- Core stability programmes (such as pilates)
- Improving your breathing control
- Biomechanical screening assessment to identify any faulty movement patterns that may be impacting on your performance
- Many physios also offer video analysis of your activity and movements.

USEFUL RESOURCES

- 1 ACC Common Sports Injuries

 http://www.acc.co.nz/preventing-injuries/playing-sport/common-sports-injuries/index.htm
- 2 ACC SportSmart 10-point plan
 http://www.acc.co.nz/preventing-injuries/playing-sport/sportsmart-10-point-plan/PI00111
- 3 Physiotherapy New Zealand online find a physiotherapist tool www.physiotherapy.org.nz/findaphysio
- 4 PRICE needs updating, should we call the POLICE? http://bjsm.bmj.com/content/46/4/220.extract
- 5 Sports Physiotherapy New Zealand http://sportsphysiotherapy.org.nz
- 6 STOP Sports Injuries Sports Injury Prevention http://www.stopsportsinjuries.org/





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