

Avoid running injuries

Most runners have experienced them – those niggling and sometimes debilitating injuries – most likely to be overuse injuries. Despite being the most common running injuries, many runners are not sure as to what they are, their symptoms and most importantly how to avoid them.

During any 12-month period, up to 70% of recreational and competitive runners sustain overuse injuries.

They can occur from training errors – changes in running frequency, duration, speed and unfamiliar surfaces and terrain. A relative lack of leg strength and flexibility, and footwear, may also contribute.

To help prevent these injuries, Smartplay, Sports Medicine Australia's injury prevention program funded by VicHealth and the Department for Planning and Community Development (Sport and Recreation Victoria), outlines the types of overuse injuries that runners may experience, the symptoms to look out for and advice on how to avoid them.

Common overuse injuries

- Patellofemoral Pain Syndrome commonly referred to as runner's knee. Involves pain in or around the kneecap. Usually the result of the kneecap not tracking smoothly through the groove in the underlying bone when the leg is being bent and straightened. May be initiated by a twisting injury to the knee. Common in long-distance runners.
- Iliotibial Band Friction Syndrome sharp debilitating, lateral knee pain, usually occurring at a certain period of a run, especially after a change of footwear or running intensity. Downhill running makes it worse.
- Plantar Fasciitis affects the sole of the foot. Makes walking painful and pain is made worse by stepping down on the heel. People with very flat feet or very high arches are more prone to this injury.
- **Achilles Tendon** injury felt just above the heel, often stiff and sore when getting out of bed the day after a run.
- **Tibial Stress Syndrome** inflammation and pain along the inner part of the tibia (shin bone).



How to reduce the risk of overuse injuries

Good preparation

- Always warm up and cool down by jogging slowly.
- Hydrate prior to running and consider taking water on longer runs.

Good technique and practices

- Avoid doing too much too soon. Establish a graduated training program.
 Allow 24-48 hours rest and recovery between running sessions. Cross training, cycling or swimming can be done on 'rest' days.
- Build up the intensity of activity slowly to ease stress on load bearing tissue.
- Start slowly at a pace where you can have a conversation without breathlessness.
- Gradually build up running speed and distance (no more than 10% per week).
- Cut down if you experience pain. Pain is a sign that the body is not adapting to the exercise load.
- Avoid running when you are tired and at the hottest part of the day.
- Every runner has a unique running style, and there is no single ideal. However, poor pelvic stability can often predispose to injury. A sports physiotherapist or coach can help to correct this.
- A calf-strengthening program will help counteract many Achilles Tendon, shin and Plantar Fascia problems.

Check running surfaces

- Run on a clear, smooth, even and reasonably soft surface. Avoid uneven surfaces, sand and concrete.
- Gradually introduce surface changes. Running on a variety of surfaces is a good way to help the body adapt to increasing demands.

Wear the right equipment

Wear shoes specifically designed for running that match your foot type.
 When buying new shoes, have them fitted by a professional and take your old ones with you so the salesperson can identify where your shoes wear the most.

For further advice on how to prevent running injuries, download a copy of the *Smartplay Preventing Running Injuries Fact Sheet* at www.smartplay.com.au or contact Smartplay on phone 03 9674 8777 or email smartplay@vic.sma.org.au