

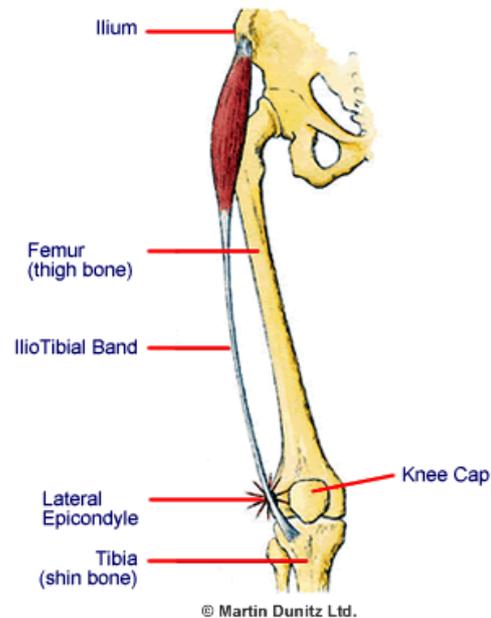
Why is ITB such a common injury among runners?

What is the ITB?

Your ITB is a band that starts on the outside of your hip and runs along the outside of your leg all the way to your knee. Generally when runners have ITB they complain of pain on the outside of the knee. I like to think of your ITB as a very strong elastic band. Its job is to absorb forces at the knee and hip to maintain optimal alignment when standing, walking or running.

The reason runners mostly experience pain at the side of the knee (some may feel it higher up the band) is because as you run the band “slips” over the bony protrusion of the knee when it bends causing inflammation and pain.

Running downhill may also feel worse than running uphill due to the angles of the knee on foot strike.



Why are runners so susceptible to this injury?

Remember when you run, you are literally jumping from one foot to the other with 3-4 times your body weight going through each limb every time you strike. These are huge forces to absorb and we ask it of our limbs over and over every time we strike.



There are 2 main reasons why runners are susceptible to ITB. Generally it's not a case of one or the other, but a combination of both or may even include some other contributing factor that should also be considered e.g. road camber or road surface.

1. Too much, too soon

Remember, our musculoskeletal system (muscles, ligaments, tendons) adapts much slower to running than our aerobic system (heart and lungs). We may feel like we're getting fitter but our joints and muscles have not had time to strengthen and adapt to the added forces. This can apply to the beginner runner who's just starting out, an experienced runner who suddenly goes from 10km runs to half marathons or runners going from road to trail running. In the case of ITB, the stabilising muscles in the hip/pelvis may fatigue and any biomechanical faults will be exacerbated e.g. weak gluts will lead to excessive movement at the pelvis which will tighten the ITB and cause pressure on the outside of the knee.

2. Biomechanical faults

This is when there is an inherent biomechanical fault e.g. over-pronation, knock-knees or leg length difference. Using the correct shoes and performing exercises that strengthen or stretch the muscles that help support your biomechanical faults can prevent and treat ITB.

What is the Biokinetics approach to ITB?

When assessing runners presenting with ITB, I always make sure that I consider every factor: gait, biomechanics, muscle strength and weaknesses, shoes, training programme etc.

I use massage and stretching to alleviate pain and specific exercises to strengthen supporting and stabilising muscles while stretching those which may be tight.

Advice on shoes and training is also of huge value to the overall treatment.

I generally find that although soft tissue therapies e.g. massage or dry needling are very useful in reducing pain, it is not a long-term solution to ITB unless the underlying causes of the injury are addressed and corrected.

If you are struggling with ITB and have any questions, feel free to contact me.

Written by: Jeanne Rapson (Registered Biokineticist) 2012