

## Don't do that

A widely held belief among health care professionals is that it is a waste of time to recommend to an injured runner to stop running. The assumption is a dedicated runner will not follow recommendation of “don't do that”.

With a few exceptions most injured runners do not need to be told “don't run”. The exception is a stress fracture, this injury requires stopping running. Injured runners do need to change the degree or manner of running. Most injured runners can continue to run and still recover from the injury. Cross training provides opportunity for decreasing the amount of running while substituting alternative forms of exercise in order to fulfill psychological needs and continuing physiological conditioning.

There are other things an injured runners needs to stop doing in order to recover from an injury. Some postures and movements may not result in immediate pain, but when performed repeatedly over time contribute to pain problems. Repeated movements and postures that are performed in the same direction during daily activities such as working, sitting, and standing can result in an accumulation of stress to tissues resulting in injury. Running becomes the proverbial “straw that broke the camels back”.

### Examples:

Sitting on your foot with one foot tucked underneath the opposite leg with the heel of the shoe pressing directly into the buttock region can lead to pain in the buttock (piriformis syndrome). Short females often sit this way because chairs are too tall and feet don't reach the floor. Usually this is not a balanced activity; one foot is tucked much more frequently than the other because of habits related to hand dominance. Using a foot stool can often assist in modifying this harmful sitting posture. Both piriformis muscles are used running, but the one subjected to direct compression from the heel of a shoe will experience pain when running.

Short people sitting in a chair which is too large for their stature will often position the foot in a “tip toe” position with the other foot crossed behind the foot that is contacting the ground. This leads to a concentrated pressure on the ball of the foot, and the toes being bent to an extreme position, much like wearing high heel shoes. Pain in the ball of the foot may not be noticeable when sitting, but becomes very apparent when running. Selecting chairs that are closer to the floor or using a foot stool helps.

A patient who complained of knee pain when running, presented as tall slender shy male teenager who frequently sat with his right leg crossed

over the left leg and the right leg wrapped around behind the left lower leg with the right foot twisted outward. The legs appeared much like a pretzel. His alignment when standing, walking, and running the right lower leg was in an outward rotated position. The knee pain was alleviated by avoiding sitting in a twisted position and consciously modifying his standing, walking, and running form by rotating the lower leg inward.

A patient whose favorite sitting position was with the left foot/ankle resting on the right knee in what is commonly called the "tailors position" complained of left arch/heel pain when running. Because the left foot was unsupported when sitting in this position the foot would hang downward. This resulted in an asymmetrical alignment that the left foot was rotated outward in a "duck position". The problem resolved by avoiding sitting in this habitual asymmetrical position in combination with actively bringing his left foot inward when walking and running.

Right handed mothers often carry their child perched on the left hip for significant amounts of time standing with a majority of the mother's and child weight on the left leg. This leads to changes in the muscle length and strength about the low back, pelvis and hip. Subjecting this poorly balanced spine and pelvis to running can lead to back, hip, knee, foot pain.

When wearing a dress ladies keep their knees together. Keeping the knees together when getting out of or into a chair can place abnormal stresses on the knees. Rising out of a chair may not hurt but if you run with your knees together it will hurt.

These are few examples of the way everyday habitual activities are performed can contribute to the development of repetitive use injuries. Identifying these harmful everyday activities may be simple, but often require a thorough Physical Therapy evaluation and examination in order to correlate observed joint alignments, movements, and the manner activities/postures are done with recurring injury. If these everyday activities are not identified and modified the prognosis for recovery from recurring injury is poor. Often the best treatment recommendation is "Don't Do That".