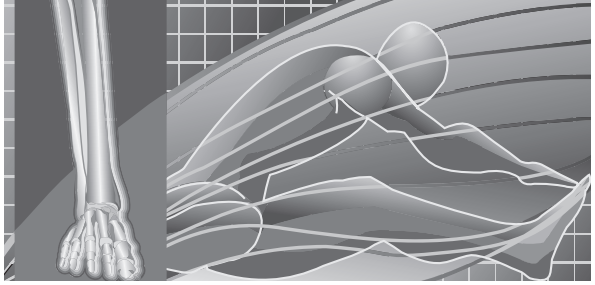

Egoscue Method Injury Prevention

Get "I-T" Up and Running!

by Brian Bradley – The Egoscue Method

In my series of articles, I have detailed a process designed to help you rediscover, restore and return your body to its original pain-free blueprint without the use of drugs, surgery and/or manipulation. This puts your health back into your control. You will be provided with personalized exercises that will retrain your muscles, realign your posture, reduce your pain, and increase your running efficiency! These simple exercises will also alleviate pain associated with knee injuries, shin splints, Plantar Fasciatis, IT Syndrome and more. Today, we'll focus on IT Syndrome and you'll discover why orthopedic surgeons report 60% of all runners are injured in an average year, and one-third of those are knee injuries.

Our recent article on *Back Pain and Running* (May-June '06 – 15.3) generated a tremendous response! My inbox was inundated with great questions and concerns about low back pain. However, I also received many requests for an article on the dreaded I-T (Ilio-Tibial) Band Syndrome (ITBS) and its relationship to running. Many wondered – can this crippling pain be avoided when training?

Orthopedic surgeons report that sixty percent of all runners are injured in an average year, and one-third of those are knee injuries. Pretty alarming statistic considering the millions of runners there are world-wide! Even though you love it and know it is good for you, running can sometimes seem debilitating. And yes, chronic pain can creep up on you while you're doing what you love to do, run.

"It is NOT the act of running that causes your pain; it's your body's alignment that's to blame!"

So human logic tells us running is the cause of your pain – "when you run it hurts, when you don't it feels OK." However, running is getting a bad rap here. It is NOT the act of running that causes your pain; simply put, your body's alignment is to blame!

We'll dig deeper into your body's alignment in a moment, but let's begin

"If running were really the problem, why is the symptom apparent on one leg when you run on two?"

by recognizing that I-T Band "Syndrome" does not exist. Labeling the condition as a syndrome hints that it is unavoidable and un-repairable. Nothing could be further from the truth. Yes, you may experience sharp debilitating lateral knee (outside knee) and lower leg pain, but describing it as something appearing out of the blue, that you have no control over, is simply not true. You'll uncover

"I-T Band 'Syndrome' does not exist"

the *true cause* of your I-T Band symptoms as you read on.

WHAT IS THE ILIO-TIBIAL BAND?

Your Ilio-tibial band, sometimes described incorrectly as a muscle, is a superficial layer of connective tissue on the outside of your thigh, extending from the outside of your pelvis, over your hip and knee, inserting at your tibia, just below your knee.

The best way to understand how your IT-Band functions is to visualize yourself running. Imagine your right heel landing on the ground as your left leg trails behind you. As your right heel hits the ground, it allows the advancement of your leg, hip and torso above it; your right foot begins to pronate slightly to facilitate this movement. The result is that your femur (thigh bone) moves inward. The major role of your IT Band is to control and decelerate this inward movement of your femur (thigh bone) …over and over again, during your run. In other words, your IT-band is crucial to stabilizing your knee during running.

WHY DOES YOUR LATERAL KNEE HURT?

When your IT-band hurts, you'll usually experience pain localized over your lateral femoral condyle (lateral knee or outside of your knee); the pain usually sets in after 2-3 miles, is intensified with continued running, frequently develops during downhill running, and is often relieved by resting.

Understanding why your outer knee experiences pain is very simple. During your running gait, your IT-band moves from behind your femur to the front of it. The continual rubbing of the band over your bone, combined with repeated flexion and extension of your knee, causes irritation.

> ***"60% of all runners are injured in an average year, and one-third of those are knee injuries."***

So let's paint the picture with a little more detail: as your knee bends, there is tension placed on your I-T band due to a pulling action over the lateral femoral epicondyle (bony prominence on the outside of your knee). When your knee straightens, the tension is reversed and the I-T Band moves forward again. This repetitive motion can cause irritation of the I-T Band or the bursa (fluid filled sacs which function as cushions) on its under side. If you're a runner that wants to avoid this irritation, it's essential to get your entire leg to line up with your hip and your ankle/foot.

THE CAUSE OF YOUR PAIN

Now that you know about what your IT-Band is and, technically, how it gets irritated, let us explore the causes of this injury. The believed cause of I-T Band Syndrome is commonly mis-diagnosed and treated as a tight tensor fascia lata and I-T band. Stretching exercises directly related to the I-T band and a layoff in running are commonly prescribed. The result is eventual relief and soon your running is resumed. Only now, you're still running with the same muscular imbalance. The result: ITBS returns and is often far worse the second time around. The second time around, you're prescribed an exuberant amount of stretching! You're led to believe you're getting to the *root* cause of your ITBS problems, when, in fact, your gains in flexibility must be combined with gains in strength to attain a functional I-T Band and surrounding tissue.

Now let's reveal the *true causes* of your lateral knee and lower leg pain symptoms, relative to the tight I-T Band. We've said it a thousand times and it bears repeating: *If your pelvis is imbalanced, everything—yes, everything—going north and south of your pelvis is imbalanced!* Think about it: If running were really the problem, why is the symptom apparent on one leg when you run on two? We also know that running on uneven surfaces isn't the problem because if that were the case, every runner would encounter these pain symptoms. Thirdly, a sudden increase in training intensity is often blamed as the cause; if this were true, everyone involved in a sudden increase in running frequency, intensity, and duration would have lateral knee and lower leg pain symptoms. *It is time to quit sugarcoating this diagnosis by labeling it a "syndrome" and identify it for what it really is – a simple postural imbalance.*

Below is a list of posture related symptoms that can affect your I-T Band (these do not include extrinsic factors such as downhill running or a sudden increase in training intensity/frequency/duration):

1. Weak Hip Abductors
2. Quad Weakness
3. Tightness in I-T Band
4. Hip, Knee, and Ankle range of motion issues
5. Leg Length Discrepancies
6. Excessive flat feet or high arches
7. Gluteus Max and TFL over-facilitation

> ***"If your pelvis is imbalanced, everything going north and south of your pelvis is imbalanced!"***

IS IT REALLY JUST YOUR POSTURE?

Whether it's a restriction at your hip, a weakness in your lateral hip musculature (hip abductors), or a leg length discrepancy, the root cause must be addressed in order for IT-Band symptoms to subside on a permanent basis. If you want a pain free running experience, you must get your joints aligned from top to bottom, and side to side. This isn't rocket science. If your ankle, foot and knee are misaligned, the result will eventually be pain. Same goes for the rest of your body.

Using a full length mirror, change into your running gear or a bathing suit. Find a relaxed stance on both feet. Look at your knees…are they aligned with your feet?

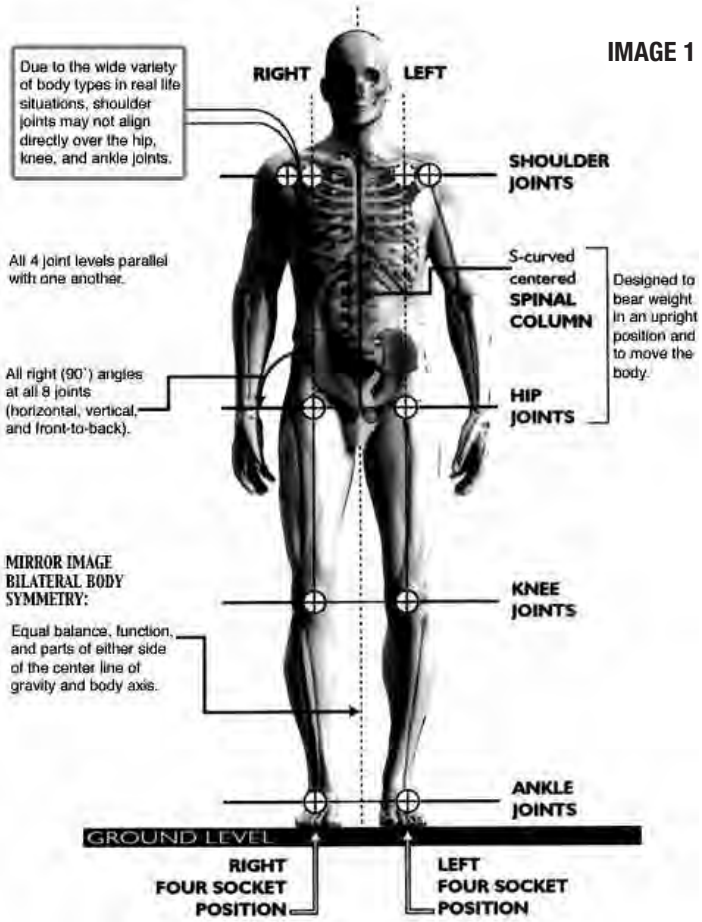

IMAGE 2

Look at your shoulders…are they level with one another? (See image 1 for an example of perfect alignment). If you're out of alignment in one, or both of those joints, then you're victim to one of the 7 previously mentioned posture related symptoms. With your posture compromised, one or more of these factors will surface, and the eventual result may be I-T Band Syndrome.

YOU BE THE EXPERT!

It's your turn; you be the expert. Take a look at the photo of a young runner with I-T Band pain symptoms (image 2). Upon comparing this runner's left leg to image 1, you can see her foot is abducting from her body's mid-line (turning outward), and is accompanied by an excess ankle valgus stress (collapsed in) added to her foot pronation (flat foot). Now compare the torsion, or twisting, of her left leg to her right. Her right leg is much more in line from hip to knee to ankle. Is it any wonder she is having left leg symptoms? Accompanying this, but not pictured, her shoulders were also imbalanced and her jaw was offset or pulled laterally. All of these posture symptoms are related to her inability to load her left hip… something she definitely needs as a distance runner. The good news – she is on her way to running pain free, and she wants you to join her.

"If you want a pain free running experience, you must get your joints aligned"

By performing the four corrective exercises on pages 10 and 11 and the remaining 5 exercises at the provided URL (end of article), you can begin the process of improving your standing posture, which will eliminate the dreaded IT-Band symptoms for good! It is best to perform these exercises daily, preferably before you run.

Assisted Hip Lift

Sets: 1
Duration: 1 Minute with each leg.

How to Perform this E-cise™:
Lie on your back with your feet on the wall and your feet pointing straight. Cross the ankle of one foot to just above the other knee. As you press the crossed leg away using your hip muscles, remember to not allow your hips to shift to the side. For example, if you cross your left leg over the right knee and press it away, the right hip can NOT move out to the side. Hold this position and relax your shoulders.

What this E-cise™ does:
This exercise promotes bilateral pelvic stabilization through external femur rotation.

Floor Block

Sets: 1 Set
Duration: 1 Minute at each angle.

How to Perform this E-cise™:
Lie on your stomach with your forehead and nose flat to the floor. Place your hands straight ahead above your head and elevate them 4-6 inches just under the elbow joint. Use some sort of pillow for this. Lock your arms out and point your thumbs toward each other in the golfer's grip. Rotate your thumbs to the ceiling with the movement coming from your shoulders. Move your arms out to 45 degrees and repeat; then move your arms out to 90 degrees and repeat. Keep your hips relaxed so that your heels remain dropped out.

What this E-cise™ does:
This exercise repositions the shoulder blade in relationship to your pelvis and lumbar spine.

Skydiver

Sets: 1
Reps: 2

How to Perform this E-cise™:
Lie on your stomach with your forehead into the floor. Tuck your toes under and dig your knees into the floor which will

tilt the front of your pelvis off the floor and place a small arch into your lower back. As you are holding this position, lift your 90 degree arms straight off the floor with your thumbs facing the ceiling. HOLD this position and keep constant pressure into the floor with your knees.

What this E-cise™ does:
Promotes bilateral lumbar extension by linking the pelvic stabilizers and scapular stabilizers. The result: a more functional primary hip flexor.

Upper Spinal Floor Twist
Sets: 1
Duration: 1 Minute Each Side

How to Perform this E-cise™: Lie on one side in the fetal position with your arms straight out ahead of you on the floor. Open the top arm to the other side and look in the same direction. Do not let your knees come apart while moving the arm to the other side. You can take your bottom arm over to hold your knees together. Hold this position and allow your body to open up.

What this E-cise™ does:
This exercise promotes upper torso rotation to engage the pelvic girdle stabilization response.

Don't miss out on the remaining 5 IT-Band curing exercises. Relieve your pain now and log onto the address provided below.

Run Functional.

http://www.egoscue.com/htdocs/pperformance/itband.asp

__Brian Bradley__ is the Vice President of Therapy Protocol at the Egoscue Method world headquarters in San Diego, CA. Having treated the finest professional athletes such as Jack Nicklaus, Junior Seau (Miami Dolphins), and Abde Bile (Olympic Runner), the Egoscue Clinic is world renowned as "The Leader In Non-Medical Pain Relief". Brian basically sits in his office all day waiting for you to contact him with postural training questions or concerns at the email address and phone number listed below.

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