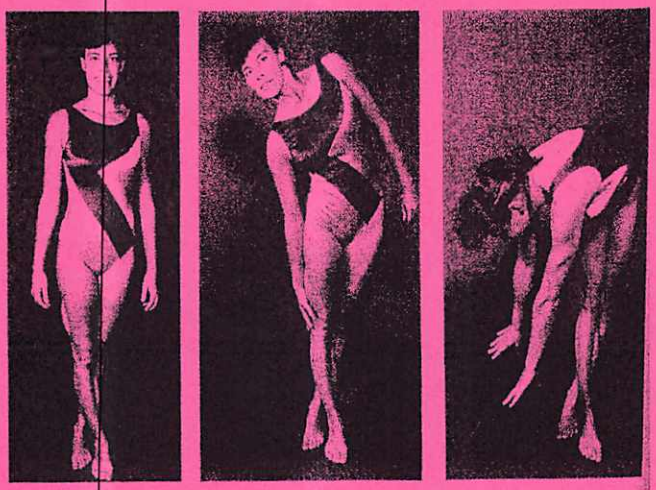
ILIOTIBIAL BAND SYNDROME



1. Standing with both knees in full extension.
2. The affected leg is extended and adducted as far as possible.
3. Side flex the trunk maximally to the unaffected side.
   OR
4. Rotate at the waist, away from the affected side, flexing the trunk and attempting to touch the heel of the

1. Lie on the affected side, hips and knees extended.
2. Using the arms, side-flex.
3. Opposite foot may be used to assisted stabilization and maximize the stretch.

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Consult your Physician and Physiotherapist for your individual rehabilitation program.

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ILIOTIBIAL BAND SYNDROME

What is Iliotibial Band Syndrome?

Iliotibial Band Syndrome is inflammation of a bursa at the side of the knee between the IT Band and the bone. The iliotibial band is made of fascia and runs down the side of the leg between the hip and knee. When it becomes tight friction develops at the bursa which causes inflammation and pain.

Clinical Presentation

Usually the pain begins as a mild aching sensation on the lateral side of the knee. It is most common in sports where weight-bearing is on one leg, such as running and jumping activities. Initially the pain is only present while performing the activity and may not be well localized. Going downstairs may be particularly painful, as is downhill running. If training continues through pain, the symptoms will progress to being present during walking as well. The pain may radiate up or down the lateral thigh. There is usually localized tenderness to pressure about 2 – 4 cm up from the joint line of the knee.

What are Some Factors that May Lead to Iliotibial Band Syndrome?

Iliotibial Band Syndrome is more common in lean individuals who have little body fat. Worn-out or inappropriate footwear may also contribute. Training errors such as excessive distance during a single run, increasing mileage too quickly, or insufficient warm-up can all precipitate this injury. As well, always running on the same side of a cambered road (especially in the leg on the down-side) and downhill running may cause this condition.

What Treatment Can Be Done?

- Determine contributing factors that may need to be addressed such as training techniques, warm-up, and footwear.
- Training should be reduced to the point of little or no pain and progressed gradually.
- Cross-training or complete rest may be required.
- Hill work should be avoided until the athlete has been asymptomatic for at least four weeks.
- Ice / ice massage is useful and prescription anti-inflammatories may be recommended by your physician to help reduce the inflammation.
- Self-massage and stretching of the iliotibial band are also helpful.
- Registered Massage Therapy can break down adhesions in the band and increase circulation to the area, increasing the extensibility of the tissue and reducing the friction of the band over the bursa.

A physiotherapist can help determine individual biomechanical problems such as leg length discrepancy, alignment factors and muscle imbalances (weak vs tight muscles) which may be causing your symptoms..

An individual exercise program will be developed by your physiotherapist to work on these areas and prevent recurrence. Treatment may include ultrasound, stretching and acupuncture which are helpful in reducing inflammation and promoting healing.

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