



SPORTS INJURY - PREVENTION IS THE BEST CURE

As I started to write this article, a doubt crept into my mind. Perhaps I am preaching to an audience already converted to the concept of injury prevention. In some respects this may be true, as a simple Google search under 'sports injury prevention' yielded some sixteen million results. It's a lot, yes, but when you compare it to seventy-nine million results under 'sports injury' and over ninety-three million for 'sports medicine', it's easy to see where the emphasis is.

By Julian Baker, director and principal instructor, [European College of Bowen Studies](#)

Seemingly most - if not all - sports injury prevention focuses primarily and quite sensibly on areas of training. These include using the right shoe, building in rest days, strength training, warm up and down and so on. Other specialist areas might focus on the health and safety aspects of a sport, particularly in contact sports.

Yet there is seemingly little or no focus on the role of the therapist in what I like to refer to as 'pre-management' of sporting injuries. This seems to me to be a missed opportunity because the therapist always assumes the role of a fire fighter, being employed in emergencies and not generally considered to be part of the global fitness regime of the athlete.

Considering that only 50% of sports injuries are in new areas, it means that a good number of clients present with problems that were never fully resolved at the time of the original injury (1). It also means that many athletes are leaving themselves at risk of further injury and training lay-offs.

There is a point at which an injured athlete is a sign of failure and bad management. John Smith plays five a side on a Sunday. He has poor flexibility levels, drinks too much and doesn't take any other exercise during the week before throwing himself at a ball for two hours once a week. We can be safe in the knowledge that before long, John is going to land on our doorstep for his back/hamstrings/knees to be addressed, a scenario with which we are all too familiar.

However, even the elite athlete can be the subject of poor management and lack of therapeutic care. This can be in several areas, all of which build up to create and perpetuate problems:

- Improper handling of original injury: Rushed or inappropriate treatment. 'The treatment is localised to the injury site.
- The injury is treated too often with no treatment recovery time built in.
- The athlete is returned to training and competition too soon with insufficient rehab and specific post injury training.
- Lack of a culture of ongoing preventative care. Athlete/coach too focussed on results and not focussed on fitness and flexibility levels and injury prevention.

These are all issues which pervade the highest level of sport in the UK and which can create a culture where injury is equated to failure on the part of the athlete and where, therefore, an athlete may not even mention an injury to the practitioner. Although many elite athletes will have access to generalised sports massage on a regular basis, the treatment of specific risk areas relating to their sport or history is very rare.

A programme whereby the athlete is treated like a formula one racing car is needed. In these environments, the car is designed, cared for and tuned on a constant basis and it would ill behove any racing team to wait until the car breaks down before any maintenance work is carried out.

This is where a therapy more recently arrived in the UK is trying to change hearts and minds. The Bowen Technique has been taught in the UK only since 1993, yet is already making a big impact across the field of physical therapy. It has become very popular with chartered physiotherapists, existing complementary therapists and some sports injury technicians.

Simple to learn and practise, it can be



Figure 1: Lateral ligament sprain treatment

applied regularly to a large number of people (in a team environment for instance) with no disruption to existing training or treatment. The main reason for its increasing popularity is the speed with which clients respond.

A standard soft tissue injury that might typically take ten days to two weeks to heal can often be addressed in half that time using The Bowen Technique. Bowen has a particular fondness for acute injuries and the normal waiting period to allow for inflammation to decrease is eliminated with Bowen.

The technique itself is simple in its approach and application and involves the rolling of skin and superficial fascia over deep fascia and muscle with thumbs and fingers. In between each set of moves there is a short pause, where the therapist ideally leaves the room, allowing the client to rest, before the next short set of moves is applied.

The pressure used is relatively light and gentle and a long way from the deep pressure associated with the work of many sports therapists. A side effect of this is the ease on the therapists themselves,



Figure 2: Use of elbow for deep pressure to hamstrings

who find they can treat more clients and attain better results while experiencing little or no fatigue themselves in the process.

The technique seems in some way to access the parasympathetic nervous system, promoting the body's ability to restore structural integrity, although the actual workings of it still remain firmly in the realm of theoretical speculation.

There is growing evidence that it works and some recent ground breaking research is about to be published and presented at the First International Fascia Research Congress in Boston in October 2007. Although there are many studies demonstrating that certain treatments can increase hamstring flexibility, there is none that has demonstrated that this increase can be maintained.

A randomised controlled trial allocated 116 male and female volunteers to either a control or an intervention group, using a single treatment of The Bowen Technique significantly increased the flexibility of the hamstring muscles in asymptomatic subjects and maintained this increase for a period of one week.

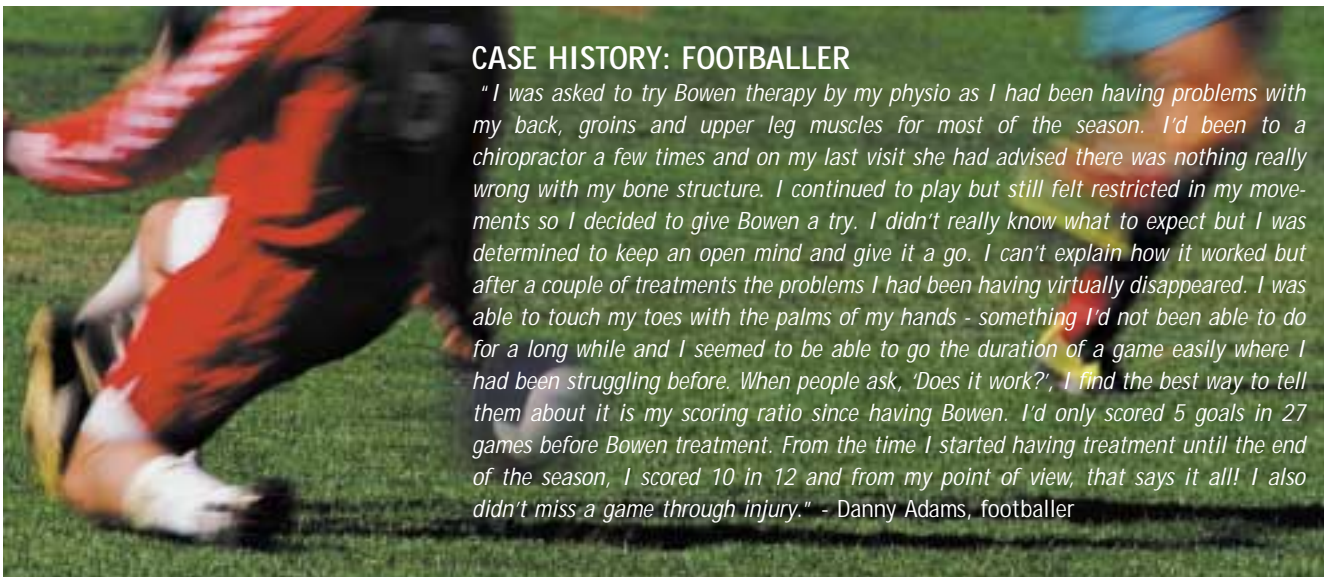


Figure 3: "Mummy bear" release of hamstrings

No other treatment technique has been shown to maintain improvements in flexibility for a complete week without further treatment. In addition, this increase was demonstrated without any form of loading, warm up or stretching pre- or post-treatment.

It is the lasting effects of Bowen that could offer opportunities as far as sports therapists are concerned. Neil Burke is a sports rehabilitator working with the Gaelic Athletic Association (GAA). This covers the incredibly physical sports of Irish Football and Hurling. "The mindset of most of the GAA players is that a rub will fix everything, but I have been sold on Bowen mainly from the work I have done with hamstrings."

Burke who works mostly with the GAA team Moyle Rovers, cites the case of one player who had a torn left ACL and developed a hamstring tightness as protection. 'He had a lump in the head of his hamstring twice the size of a fist and after five or six heavy sessions using my elbow I'd made little or no headway. The change with Bowen however was almost immediate and after two Bowen sessions the lump had disappeared and the range of movement



CASE HISTORY: FOOTBALLER

"I was asked to try Bowen therapy by my physio as I had been having problems with my back, groins and upper leg muscles for most of the season. I'd been to a chiropractor a few times and on my last visit she had advised there was nothing really wrong with my bone structure. I continued to play but still felt restricted in my movements so I decided to give Bowen a try. I didn't really know what to expect but I was determined to keep an open mind and give it a go. I can't explain how it worked but after a couple of treatments the problems I had been having virtually disappeared. I was able to touch my toes with the palms of my hands - something I'd not been able to do for a long while and I seemed to be able to go the duration of a game easily where I had been struggling before. When people ask, 'Does it work?', I find the best way to tell them about it is my scoring ratio since having Bowen. I'd only scored 5 goals in 27 games before Bowen treatment. From the time I started having treatment until the end of the season, I scored 10 in 12 and from my point of view, that says it all! I also didn't miss a game through injury." - Danny Adams, footballer



Figure 4: Bowen Knee Procedure

had increased 'massively.' The amount of work I have to do with Bowen is significantly less for the same results compared to my traditional treatments comparable to what I normally do,' Burke says.

It's early days for Burke as he only started his Bowen Technique training in January 2007, yet Bowen already accounts for around 20% of his work. And word is spreading. "I'd like to think that as the rugby season starts, I can be doing 80% of my hamstring work using Bowen. It will certainly make life easier."

An uninjured athlete is quite simply the one that has the edge over the competition. If the average loss to training is 12% of competition time, then reducing



Figure 5: Location and timing are all important

this element by 50% is a massive boost. Reducing it further - as has been seen with regular Bowen treatments - can mean that a competitor is spending more time concentrating on fitness levels, has greater commitment and therefore the enhanced ability to compete.

Neil Gibson was a Team Great Britain pentathlete before a misdiagnosed injury resulted in drastic and unnecessary surgery. A pelvic imbalance had left him with a leg length difference of nearly two inches. After six Bowen sessions, he had returned to training, was back on the team and continued to represent his country at international level. In addition he was able to train fully without losing a single day of training to injury over the

subsequent two years of his career. Now a qualified Bowen therapist, Gibson has no doubts about the profound role that Bowen can play in the effective prevention and management of injury.

From a team perspective it can make the difference between success and failure. In football, the common complaint by the end of January is the level of injuries that a club carries and the subsequent lack of players available for selection. Anecdotal evidence from those involved suggests that Bowen in particular could be just the tool to reduce this problem.

If we mean what we say when we talk about sports medicine, then we are duty bound to explore the health option rather than concentrating solely on problem solving. The paradigm shift is waiting to happen.

References

1. Archives of Internal Medicine, 1989: 149(11);2561-2564

Julian Baker will be presenting in more detail at the sportEX 2007 conference.

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