

Shin Splints

Part II

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Shin splints are a common overuse injury occurring in the running athlete. The three basic causes of shin splints are abnormal biomechanical function, poor conditioning, and improper training methods. Symptoms of this injury generally include pain, tenderness and tightness in the lower leg.

Treatment of shin splints can usually be conservative in nature. As with any overuse injury, the affected muscles must be allowed to rest. Depending on the severity of the condition, rest may be necessary for a couple days or many weeks. The need for rest can be determined by the following: if pain is present only after activity - the workout should be cut down by 25%, if pain is present during and after a workout - cut the workout down by 50%, if pain interferes with a routine, running should be stopped completely. During the initial phase of rest, the athlete should continue cardiovascular conditioning by cross-training. Non-weight bearing activity such as swimming, biking and upper body training should be used. When biking, the athlete should avoid pushing off with the toes on the pedal.

As the pain decreases to an acceptable level, a program of stretching and strengthening should begin. Because the calf muscles are often ten times stronger than the frontal shin muscles, they must be stretched to reduce the progressive resistance exercises. Correction of abnormal running mechanics, particularly pronation, will also reduce stress contributing to shin splints. In persisting cases, professional care including ultrasound and/or sports massage therapy may prove useful.

A program of progressive running should be used to return the athlete to activity gradually. Continued stretching and strengthening is important during return to running. Using ice after workouts also proves useful in maintaining a pain free training program.

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