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Ilio-tibial Band Syndrome - Hard to Treat!

Ilio-tibial band syndrome (ITBS) can be described as outside (lateral) knee pain that is made worse by any lower limb activities, most notably running and cycling. The incidence of this injury is on the rise in my practice, but research also shows that ITBS is the most common running injury in the lateral knee, with an incidence of 1.6-12%. In cycling, ITBS may account for up to 15-24% of all overuse injuries.

It is thought that ITBS is an overuse injury in which the portion of the ilio-tibial band, which runs over the outside knee, rubs over the femoral bone with repetitive knee bending and straightening. This results in accumulated tissue damage and irritation of the ITB. Specifically with running, as each leg comes forward before heel strike, the tensor fascia latae (TFL) and gluteus maximus/medius are contracting to slow down the leg, which can result in a large amount of tissue tension generated in the ITB.

A study published in [Manual Therapy](#) systematically reviewed all studies on ITB treatment in order to determine which was the most successful method. What they found is that there is a marked lack of good evidence to support any one given treatment for

ITBS. All forms reviewed - ultrasound, friction massage, medication or ice all had very little benefit on the condition.

Part of the reason for this is that different treatments could work for different subsets of people (i.e. older cyclists respond better to one thing, while runners with chronic ITBS respond better to another).

This [Vancouver Chiropractor](#) will often see good results with ART (active release therapy) and other such soft tissue therapies, [kinesiotaping](#), [low intensity laser therapy](#) and chiropractic adjustments to restore proper function of the pelvis, hips and back. Of course, one must always look above the problem (pelvis) as well as below the problem (feet) for a source of dysfunction.

What is the bottom line of this article? So far, the evidence doesn't point to one therapy being better than another. So when seeking out treatment, be sure to set an appropriate treatment plan that includes regular re-evaluation with your therapist. If something isn't working, don't be afraid to move on and try another modality once you've given the first one a good shot.

Topics in this issue:

- Ilio-tibial Band Syndrome - Hard to Treat!
- Upcoming office closures

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Upcoming Office Closures

There are no scheduled office closures for September.