

Patello-femoral Pain

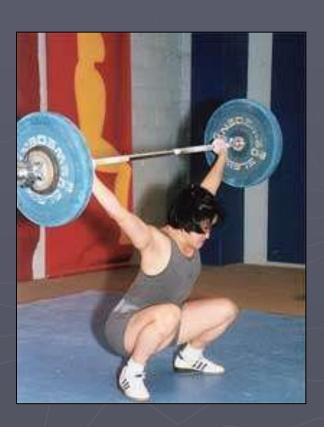
Martin Meyer Sports Physiotherapist

Subjective History

- Body chart
 - Location of pain
 - Severity
 - Other areas- joints above and below
 - Neural symptoms
 - Swelling
- Mechanism of injury
 - Acute- dislocation
 - Chronic- insidous onset
 - Activity related- training changes, shoes etc



- Aggravating Factors- weightbearing Vs non-weightbearing
 - Stairs
 - Squats
 - Lunges etc
 - Prolonged sitting- movie goers knee
- Special qnts
 - Clicking/locking/grinding
 - Apprehension
 - Instability
 - Use of orthotics
 - Other joints involved



Clinical Reasoning

- ▶ What is the main cause?
 - Acute trauma
 - Training factors
 - Shoes
- What is main source of problem?
- Are the feet a factor?
 - Weightbearing Vs Non-weightbearing agg's
 - Foot and ankle problems

- Is pelvic control a factor?
 - Lumbar pain/pelvic pain
 - Agg factors
- ► Is it more a muscle control issue or purely a tightness issue?
 - Agg factors- static Vs dynamic
- ▶ Is further referral/investigation required?
 - Pain severity
 - pm/am pain
 - Recurrent dislocations

Objective Examination

- Observation
 - Hip, knee, foot position
 - ▶ Bony factors ie genu valgum
 - Walking- kinetic chain, pelvic control
 - Muscle bulks
- Quick test
 - Agg activity
 - Critical test- add medial patella glide
- Q-Angle??



- Muscle Length
 - Thomas test- rec fem, ITB, psoas
 - Hamstrings
 - Calf
- Patella Mobility
 - Medial glide
 - Longitudinal glide
- Palpation
 - Medial and lateral pat facets
 - Medial and lateral femoral condyles
 - Plicas
 - Muscle tightness- ITB/VL
- Patella orientation
 - Glide
 - Tilt
 - Rotation
 - Alta/Baja

Muscle Function

- VMO
 - Timing- functional/non-weightbearing
 - Bulk
- Glut med
 - Functional
 - Single limb standing -trendelenburg sign
 - Non-weightbearing- side lying
- Core
 - Functional
 - Single limb standing

Special tests

- Apprehension sign
- Critical test
 - functional
- Plica palpation
- Clarkes Sign
 - Compression with active contraction.. pain++

Treatment

Release and move tight structures

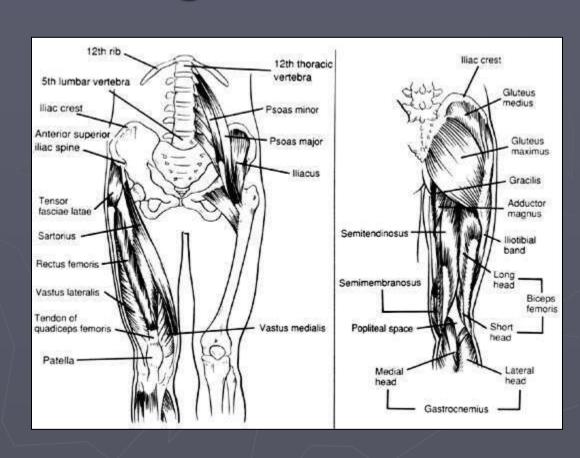
► Improve muscular insufficiencies

► Taping- glide, tilt, rotation

Change biomechanical factors- orthotics

Release and move tight structures

- Muscle releases
 - ITB/VL
 - Rec Fem
 - TFL
- Dry Needling
- Stretching
- Patellar mobes
 - medial, tilt, long-caud



Improve muscular insufficiencies

- ► VMO
 - Sitting
 - Weightbearing
 - Functional
 - muscle stim and bio-feedback
- Glut med
 - Side lying
 - Functional
- Core strength
 - Islolated
 - Functional

