Introduction

The injured runner

Since the running boom of the 1970s, track and field and distance running has enjoyed an ever increasing participation. This has created the necessity for sports clinicians who understand the specific demands of the sport and the injuries commonly associated with running. This need has also resulted in the development of specific running injury clinics such as the one we have developed at the Tom Landry Sports Medicine and Research Center. Physicians treating runners realize that running injuries can be challenging conditions to evaluate and treat. Most often related to overuse, running injuries are often associated with a host of intrinsic and extrinsic factors which must be addressed in addition to the presenting injury itself. The satisfaction of assisting a runner back to activity, be it to a recreational level or elite competition, is very rewarding.

As physicians with a special, personal interest in running, we proposed the idea of an issue of the Journal of Back and Musculoskeletal Rehabilitation devoted exclusively to the diagnosis and treatment of running injuries. This concept has expanded into two editions in an effort to present the fundamentals needed to treat running injuries.

The first edition focuses on the diagnosis and treatment of specific running injuries. An understanding of the biomechanics of running, the relationships throughout the kinetic chain and the essential components of a comprehensive history and physical examination will allow the clinician to establish a correct pathoanatomic diagnosis and prescribe a proper rehabilitation program. Special attention is given to patellofemoral pain, stress fractures, and spine disorders, often some of the most challenging for the sports clinician. The second edition focuses on special topics related to running. ‘Overuse injuries of the hip and pelvis’ emphasizes manual medicine techniques which can be very useful in treating disorders in this area which serves as an important link in the kinetic chain between the spine and lower extremities. Special concerns of the female and pediatric runner are reviewed. Additional attention is given to shoes and orthoses, cross-training and periodization, and organizing a race medical team-topics of which the clinician interested in running should have a working knowledge.

Special thanks is extended to Robert P. Nirschl, MD, MS whose example of commitment to academics and research in addition to clinical medicine has continued as a source of encouragement in all our endeavors.

Robert P. Wilder, MD, FACSM
Director, Sports Rehabilitation Services
Director, Runners Injury Clinic
Tom Landry Sports Medicine and Research Center

Francis O’Connor, MD
Director, Primary Care Sports Medicine
De Witt Army Community Hospital
Ft. Belvoir, VA.