



# Modified Lateral Patella Pain Syndrome Stretch

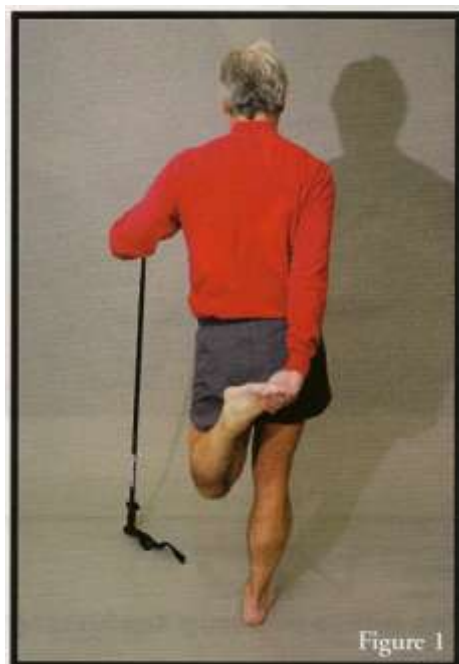


Figure 1

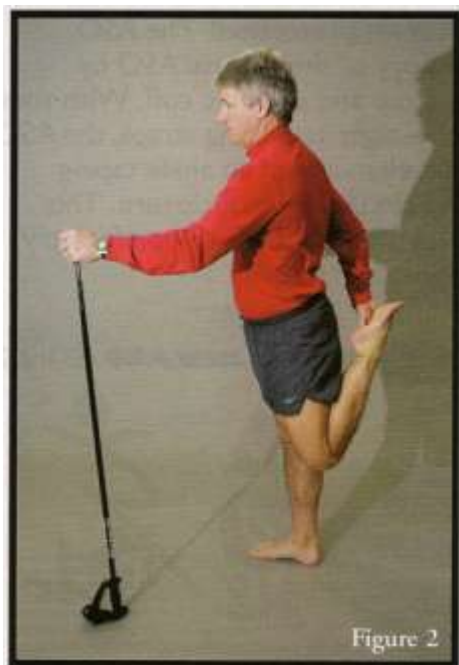


Figure 2

**L**ateral patella pain is a common injury among runners and female athletes. Contributing factors may include excessive tightness of the quadriceps muscle, lateral tissues around the knee and the iliotibial band.

Additionally, excessive pronation increases the valgus forces at the knee and external rotation of the tibia increasing the Q angle. This increases the chance of excessive pressure on the lateral aspect of the patella.

## Current Stretch

Treatment approaches for lateral patella pain vary widely. Stretching the quadriceps and lateral structures of the knee and iliotibial band are common elements of many rehabilitation programs.

Currently, programs for lateral patella pain often include stretching the quadriceps muscle and lateral tissues around the knee. This is done by having the athlete bring his/her heel to the buttocks using the ipsi-lateral hand to pull the heel to the buttocks. Using the ipsi-lateral hand has the potential to abduct the hip, increase the valgus forces in the knee and externally rotate the tibia.

Performing the stretch in this manner stretches the medial structures of the knee, rather than the lateral tissues around the knee and iliotibial band.

## Modified Stretch

Modify this stretch by using the contra-lateral hand to bring the heel to the buttocks, as we see in Figure 1. Pay attention to keeping the femur and tibia in the sagittal plane, and slightly adducted.

Additionally, keep the trunk vertical and the involved thigh slightly behind the other leg, as shown in Figure 2. This positioning is more likely to stretch the lateral tissues around the knee and the iliotibial band. The tibia is more likely to have varus forces across the joint with tibial internal rotation.

The resulting stretch has greater potential to stretch the structures that are frequently identified as being too tight while not creating any valgus laxity.