

Golf Injuries, Part One

AN OVERVIEW OF THE CURRENT CRISIS

Jeffry Blanchard, DC

In the United States, it is estimated that more than 27 million people play the game of golf and, as shocking as it seems, they incur a reported 13.5 million golf-related injuries each year.

Unfortunately, your average patient does not prepare or condition their body for golf. They just play. They will show up minutes before their tee time and "bash it around" for 18 holes of golf. If they can't play a round of golf, they will go to a driving range and hit a couple hundred golf balls. No warm-up, no stretching - just playing golf or just hitting balls. Ball after ball after ball.

The average patient can swing their golf club 90 mph. The average tour pro swings their club about 115 mph. Paul Chek, in his book *The Biomechanics of Golf*, writes: "Amateur golfers achieve approximately 90 percent of their peak muscular activity when driving a golf ball. This is the same intensity as picking up a weight that can only be lifted 4 times before total fatigue."

And that's just one swing! Even though par on a regulation 18-hole golf course is 72 strokes, the average golfer needs more than 100 strokes. Assuming one-half of your patients' strokes are of lesser intensity (chipping and putting), this means your patients are swinging with "all their might" at the ball about 50 times during a five-hour round of golf. To make matters worse, there is often considerable down time between swings. There is time spent looking for wayward golf shots and time spent waiting for the slow groups ahead to move out of the way. Plus, many of your patients are probably using golf carts instead of walking. It's easy to understand why your the body cools off and stiffens up between swings.

The average patient has no warm-up or stretching protocols for golf. Your patients are swinging the club with violent, intermittent effort. If ever there were a recipe for injury, this would be it. In addition to intermittent "grip it and rip it" golf swings, many of your patients have varied amounts of pre-existing postural dysfunction and poor flexibility. When you add it all up, it's no wonder so many amateur golfers become injured. Your patients are suffering from repetitive strain injuries due to lack of flexibility, postural instability and poor swing mechanics.

Most common golf injuries are varieties of repetitive strain syndromes. In other words, patients are swinging the club in such a way that they are putting undo and often-extreme strain on muscles, tendons, ligaments, joints and bones. They swing often and with a determined violence to control the flight path of the ball through the air.

In subsequent articles, I will discuss the following common golf injuries: 1) hip/knee pain; 2) wrist pain; and 3) elbow pain. The intent of this four-part series is to help you understand if your patients are at risk of injury - hopefully before they experience pain. If your patients are in pain, you will gain an understanding of the mechanism of their injury and learn what you can do to help.

Note: Remember, you are not a golf instructor fixing golf swings. You are a health professional trying to prevent golf injuries. It is your responsibility to identify the root cause of a repetitive strain syndrome. When a patient's injury is due to poor swing mechanics, neuromuscular re-education can help your patients swing the club safely and efficiently. Imagine how much easier

your job will become when working with patients who are fit and physically conditioned to play golf.

MARCH 2008