

## DISCUSSION

### DISCUSSION ON ILIO-TIBIAL BAND SYNDROME AND MUSCLE INJURIES

*S. ORAVA* opened the discussion and stated that Staff appeared to be the first to publish a description of the ilio-tibial band syndrome clearly. Other work on this condition found in runners has been published recently; Orava (1978) used conservative methods only, but Noble (1979) found operative treatment necessary in 3% of his cases.

*P. STAFF* used indirect stretching by deep friction in a transverse direction, as the ilio-tibial band cannot be stretched longitudinally. Stretching is an important part of treating overuse injuries to prevent scar contraction.

*P. RENSTRÖM* mentioned ruptures of the soleus muscle, seen mainly in sprinters, with haematomata tracking to the anterior aspect of the leg, unlike the gastrocnemius tears, noted by Corrigan.

*B. CORRIGAN* suggested that bleeding on the anterior aspect of the leg was likely to be from a rupture of the capsule of the knee joint, but agreed that it is difficult to differentiate between these conditions.

*J. G. P. WILLIAMS* regarded the inertia of body weight as a significant force of resistance in the unfit subject, and could also account for steeplechase injuries attributed to awkward landings.

*J. P. S. ENGLAND* asked for clarification from Renström regarding surgical management of adductor muscle strains.

*P. RENSTRÖM* described his exploratory operations on the adductor longus insertion; the tendon is inspected as far as the musculo-tendinous junction, and in some cases granulation tissue, resembling histologically as well as naked eye that found in Achilles tendon lesions, has been excised. Repair of damaged tendon and early rehabilitation have given good results, even when operation has been delayed for over six months after symptoms first presented.

Muscle tears not related to tendon attachments may also need excision of the scar tissue only, without attempting muscle repair. Removal of this inelastic damaged tissue enables the muscle to function efficiently again.



### A STUDY OF THE ANTI-INFLAMMATORY AND ANALGESIC ACTION OF IBUPROFEN IN SPORTS INJURIES

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In an uncontrolled trial on 100 patients with a mean age of 19.25 years, the known efficacy of proprionic acid derivatives (Ibuprofen) in relation to soft tissue injury was confirmed. The dosage used was 1200 mg. per day which is at the lower end of the range currently used in the treatment of soft tissue lesions. However, close analysis of the injury list shows 6 cases of fracture which were not quoted in the 97% cure rate. Additionally the 2 cases of meniscus damage are also excluded.