

## Jumping Away from Jumper's Knee



If you participate in any activity that involves frequent jumping and change of direction—basketball, for instance—you may be in danger of developing patellar tendinopathy (also known as **jumper's knee**). Although many people believe this to be no more than a nagging injury and try to “play through the pain,” if left unaddressed, jumper's knee can become a chronic condition requiring surgery.

The patellar tendon is an extremely strong tendon that joins the kneecap to the shinbone. It allows the quadriceps muscle to straighten the knee when you jump and to provide stabilization when you land.

**Repeated strain can result in micro-tears of the tendon and collagen degeneration.**

How can you tell if you have jumper's knee? Symptoms include

- **pain at the bottom and front of the kneecap;**
- **aching and stiffness after exertion;**
- **pain when you contract the quadriceps muscles;** and
- **a tendon that appears larger in one leg than in the other.**

Treatment depends on the severity of the injury. You will have to **modify your activities** to reduce the load on the tendon—possibly giving up basketball or whatever activity you participate in that caused the problem—until the knee heals. You may even have to **give your knee a complete rest** for a period of three months or more. When all else fails, **surgery** may be necessary.

No matter how bad a case of jumper's knee you have, part of the recovery process involves seeing us to design a course of treatment to rehabilitate and strengthen your quadriceps muscle and the patellar tendon. This may include strengthening of the quadriceps with an emphasis on **lowering weights (eccentric or negative exercise) and plyometric exercises**, which enable you to move and jump better while reducing your risk for jumper's knee.