

Don't let surgery be your sand trap...

Dr Rick Seah, Consultant in Sports and Exercise Medicine at The Wellington Hospital, London, tells us why surgery isn't the only answer for golf injuries and how you can prevent injury...

ABOUT THE AUTHOR

Dr Rick Seah is a consultant in Sport & Exercise Medicine (SEM). He has weekly musculoskeletal and sports injury clinics at The Wellington Hospital and the Institute of Sport, Exercise & Health (ISEH), London – who have recently been awarded Olympic status. He was also part of the LOCOG sports medicine team for the London 2012 Olympic & Paralympic Games. Further details are available at thewellingtonhospital.com and londonSPORTSphysician.co.uk

There are many golfers, both amateur and professional, who will encounter musculoskeletal injuries during their time playing the game. These can be caused by overuse or inefficient biomechanics. Physical therapies such as physiotherapy, osteopathy, chiropractic and massage will help a significant number of these injuries, as will rest, but what happens if there is no response to them? What options are available for those not so keen on surgery?

In these cases, there is a role for mechanical therapies also named 'mechanotherapy' and various types of injections, too. These include:

Shockwave Therapy

This is a form of mechanotherapy, which was developed many years ago to break up kidney stones. In the musculoskeletal system, these shockwaves break down calcification and stimulate the body's own healing processes.

It is particularly useful in treating conditions in the upper limb, such as: 'golfer's elbow' and 'tennis elbow' and calcific tendinopathy of the shoulder. For the lower limbs, it is used as a treatment for: Achilles tendinopathy, 'heel spurs' and 'jumper's knee'.



SIMPLE INJURY PREVENTION TIPS

These can help to reduce, but may not completely eliminate, a golfer's risk of injury.

- Warm up and stretch before playing
- Build in adequate rest periods between training or competing (give the body a chance to recover)
- Wear correct footwear
- Involve a golf coach to monitor and correct any technical errors that may creep in over time
- Stay hydrated throughout
- Don't forget to wear sunscreen if playing out in the sun

Injectable therapies

Injectable therapies are delivered directly to the site of injury, and are suitable for both acute and long standing musculoskeletal injuries. These range from corticosteroid to hyaluronic acid to PRP injections - and all work in different ways.

Corticosteroid injections

The most common type of injectable therapy, these have a potent pain relieving and anti-inflammatory action, and are often delivered together with local anaesthetic. Conditions suitable for treatment include knee and hip arthritis, swollen ankles and painful toes (capsulitis of the toe).

Platelet-rich plasma (PRP) injections

These injections take a patient's own blood and concentrate the levels of platelets and growth factors, to promote

healing in injured musculoskeletal tissue. It is popular with patients who want more of a natural approach to dealing with their injuries. Treatable conditions for PRP include: 'tennis and golfer's elbows', rotator cuff injuries, plantar fasciitis, hamstring injuries, longstanding muscle and ligament tears.

Hyaluronic acid injections

When knee and hip joints are injured, their ability to produce synovial fluid depletes. This fluid helps with shock absorption and reduction of friction. Hyaluronic acid injections are designed to restore this fluid and also encourage the synovial cells to start producing synovial fluid again. These injections can often reduce pain and delay surgical operations designed to replace the joint.

To make an appointment with Dr Rick Seah at The Wellington Hospital, London, NW8, simply call the hospital's Enquiry Helpline team on 020 3627 4660

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