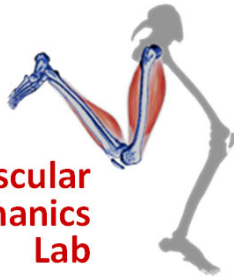


Rehabilitation of Hamstring Injuries: We Can Do Better

UW Neuromuscular
Biomechanics
Lab



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WISCONSIN
UNIVERSITY OF WISCONSIN-MADISON

Disclosure

- ☐ I have no actual or potential conflicts of interest in relation to this presentation

- ☐ Research has been supported by:
 - NIH
 - NFL Medical Charities
 - Aircast Foundation
 - NBA-GE Healthcare
 - DJO Global
 - UW Department of Orthopedics and Rehabilitation

Hamstring Strain Injury



When did the injury happen?

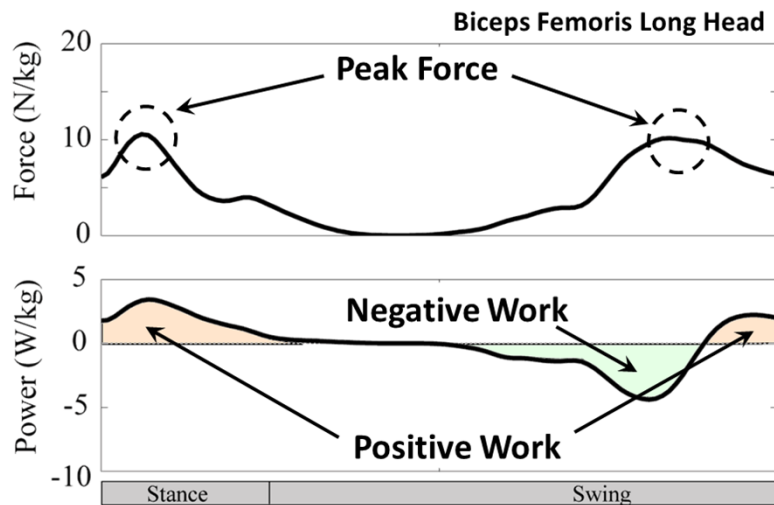
- ❑ Most common injury among sprinting athletes
 - Kujala et al. (1997) *Sports Med*
- ❑ 2nd most common injury among NFL team, with 8-25 days lost to injury
 - Feeley et al. (2008) *Am J Sports Med*
- ❑ Australian Football estimated the cost per hamstring injury in 2012 to be ~\$41,000
 - 71% increase over the preceding decade
- ❑ 30% re-injury rate
 - Orchard & Best (2002) *Clin J Sport Med*



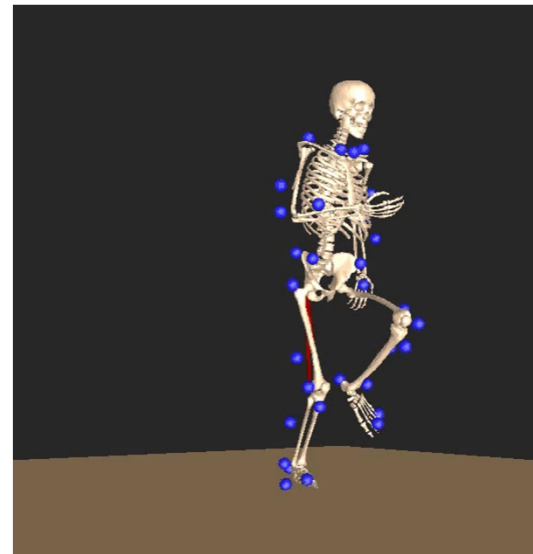
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Injury is Likely during Terminal Swing



- Biomechanical data from healthy athletes
- Case studies of injuries during biomechanical experiments



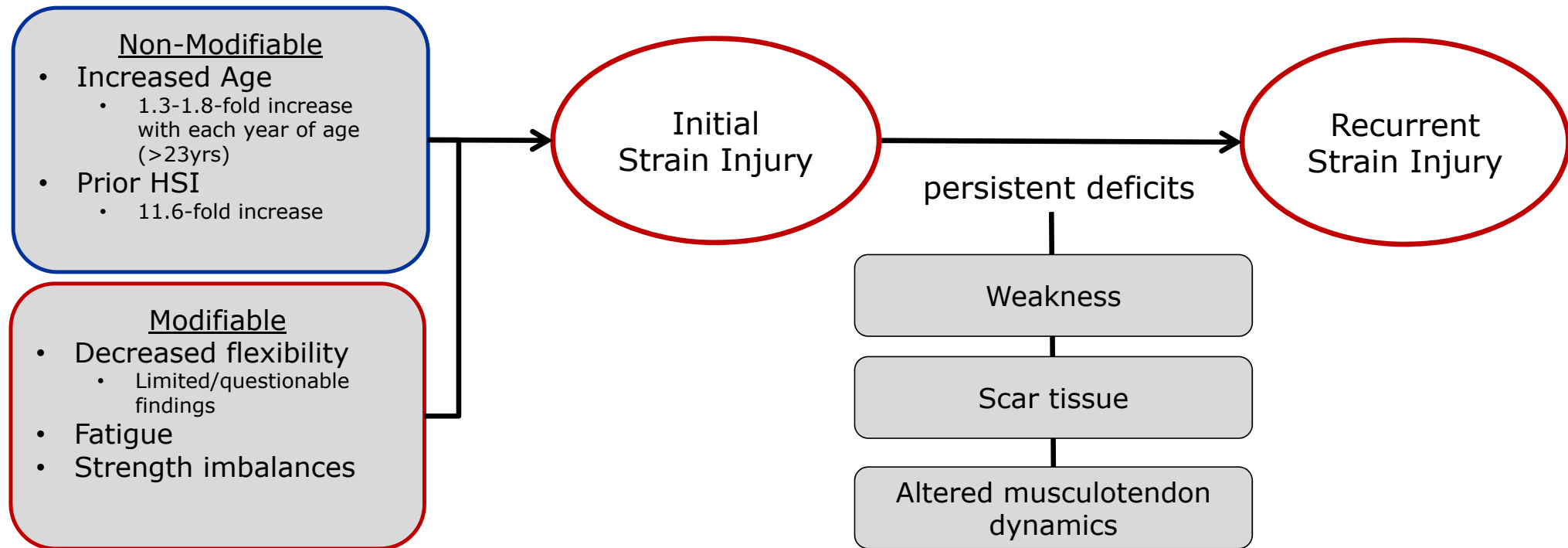
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Heiderscheit et al. (2005) *Clin Biomech*
Chumanov et al. (2007) *J Biomech*
Chumanov et al. (2011) *Med Sci Sports Exerc*

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Factors Affecting (Re)Injury Risk



Opar et al. (2012) Sports Med

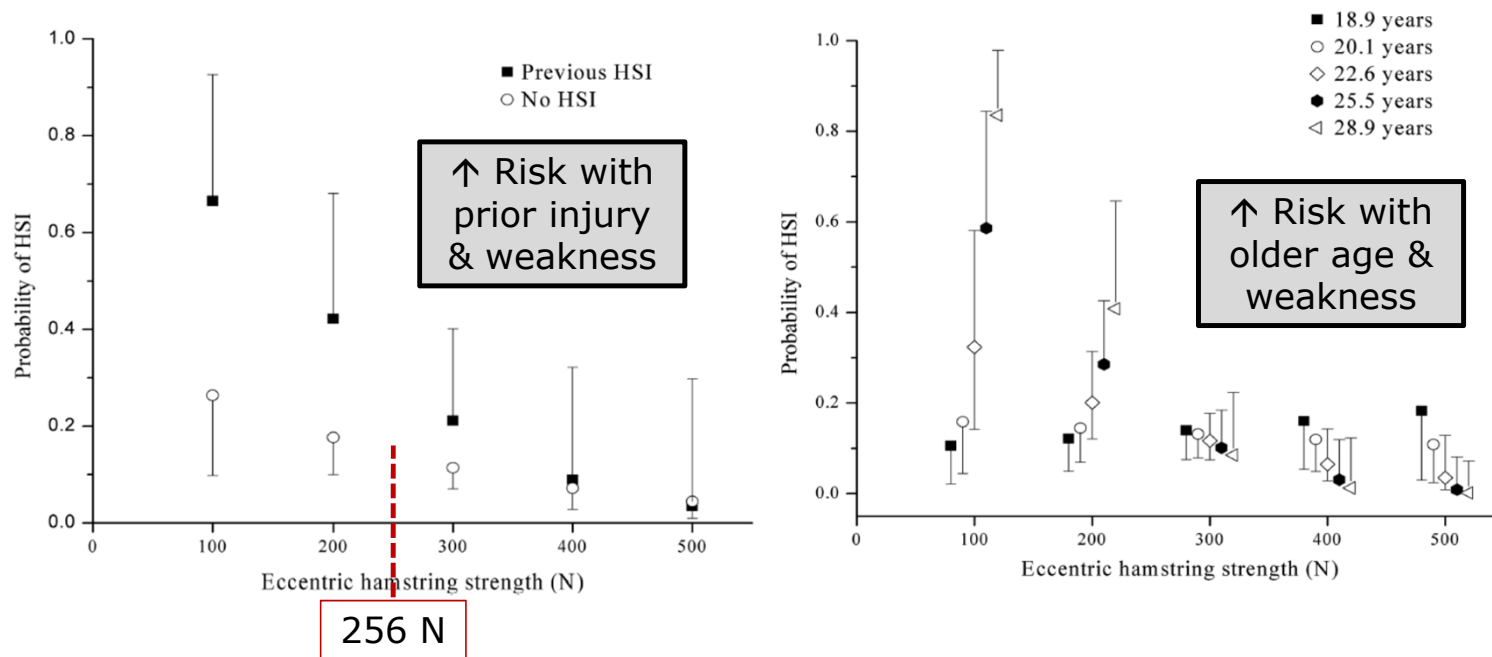


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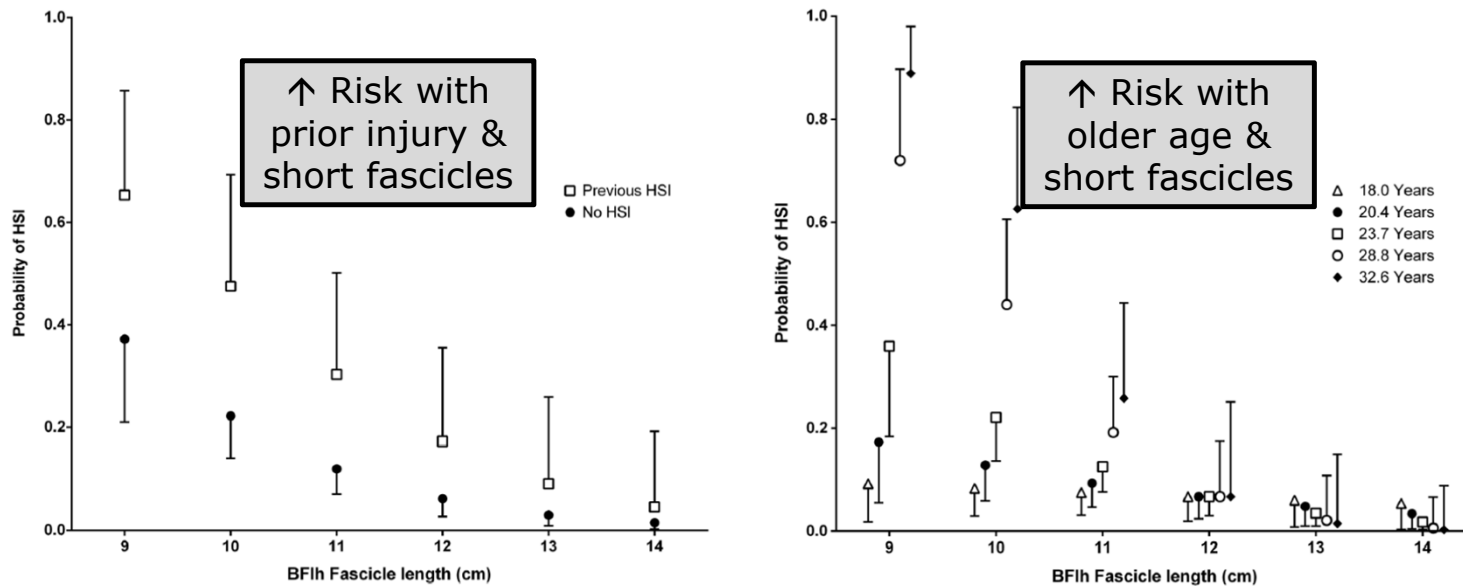
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Strength, Age and Prior Injury



- increased risk associated with history of HSI and age can be mitigated with greater levels of eccentric strength

Fascicle Length, Age and Prior Injury



□ increased risk associated with age and history of HSI can be mitigated with longer BFLh fascicles

Common Eccentric Exercises

Single leg
Deadlift



Straight-Knee
Bridge



Hip Extension
(Glute-Ham Raise)



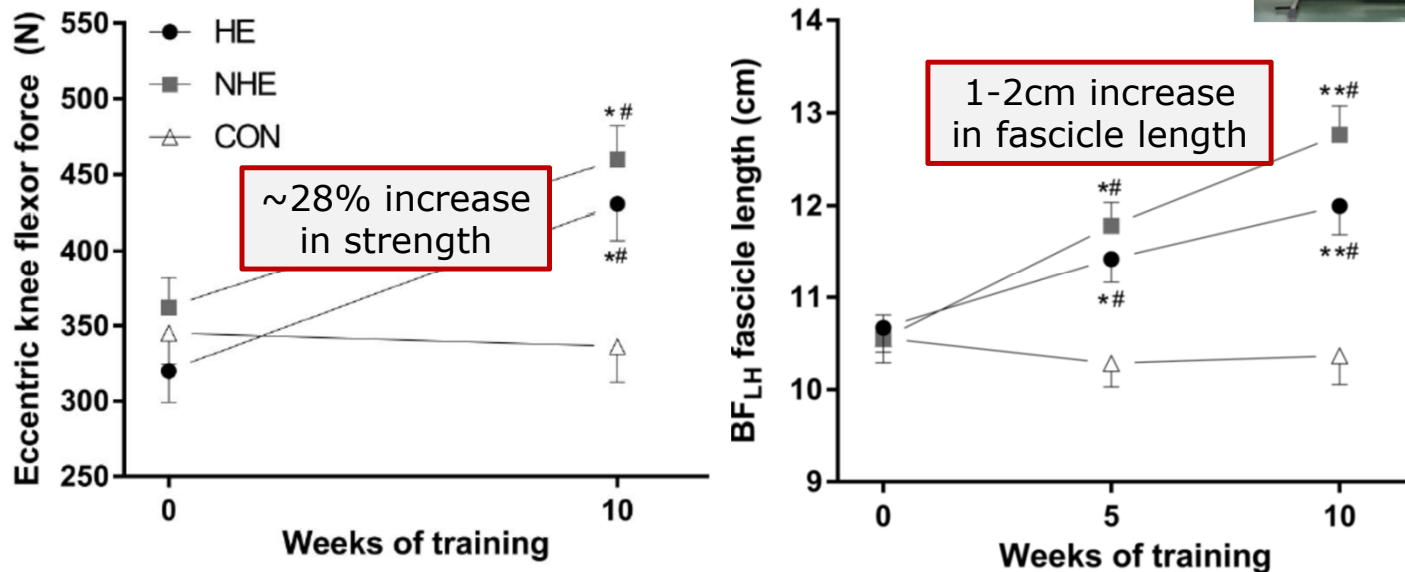
Nordic Hamstring
Curl



Bourne et al. (2017) Br J Sports Med

Effects of Eccentric Training

- 30 recreationally active males (22 ± 3.6 yrs)
 - 10-wks eccentric training: Nordic curl (n=10)
 - 10-wks eccentric training: Hip extension (n=10)
 - Control (n=10)



Bourne et al. (2017) Br J Sports Med



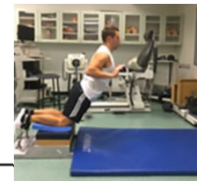
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Preventative Effect of Eccentrics

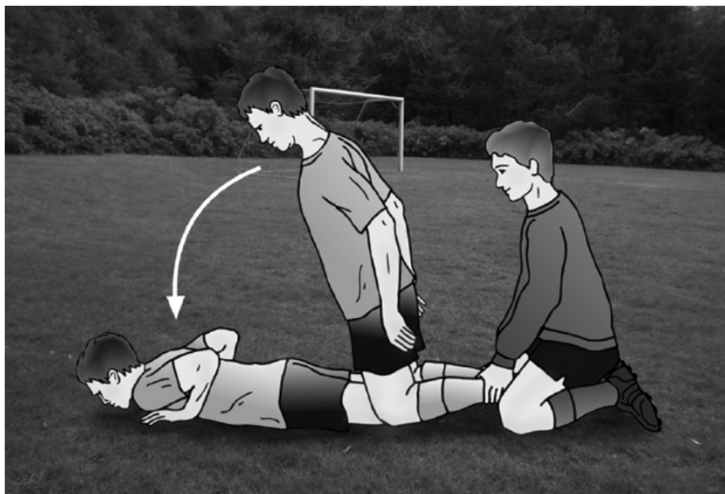
- male professional and amateur soccer teams randomized
 - 10-wk Eccentric training: 23 teams (461 players)
 - Usual training (control): 27 teams (481 players)
 - similar hamstring injury history between groups



Injury Type	Allocation Group	No. of Injuries	Player Seasons at Risk	Injury Rate Per 100 Player Seasons	NNT (95% CI)	Unadjusted Rate Ratio (95% CI)	Adjusted Rate Ratio (95% CI)
Total	Intervention (n = 461)	15	390	3.8	13 (9-23)	0.292 (0.136-0.631)	0.293 ^b (0.150-0.572)
	Control (n = 481)	52	396	13.1			
New	Intervention (n = 461)	12	348	3.1	25 (15-72)	0.380 (0.150-0.965)	0.410 ^c (0.180-0.933)
	Control (n = 481)	32	352	8.1			
Recurrent ^d	Intervention (n = 49)	3	42.0	7.1	3 (2-6)	0.156 (0.046-0.525)	0.137 ^c (0.037-0.509)
	Control (n = 54)	20	43.7	45.8			

- reduced the injury rate of new injuries by >60% and reduced the rate of recurrent injuries by 85%
 - No effect on injury severity

Nordic Hamstring Curl



Week	Sessions/wk	Sets/Reps
1	1	2 x 5
2	2	2 x 6
3	3	3 x 6-8
4	3	3 x 8-10
5-10	3	3 x 12-10-8
10+	1	3 x 12-10-8

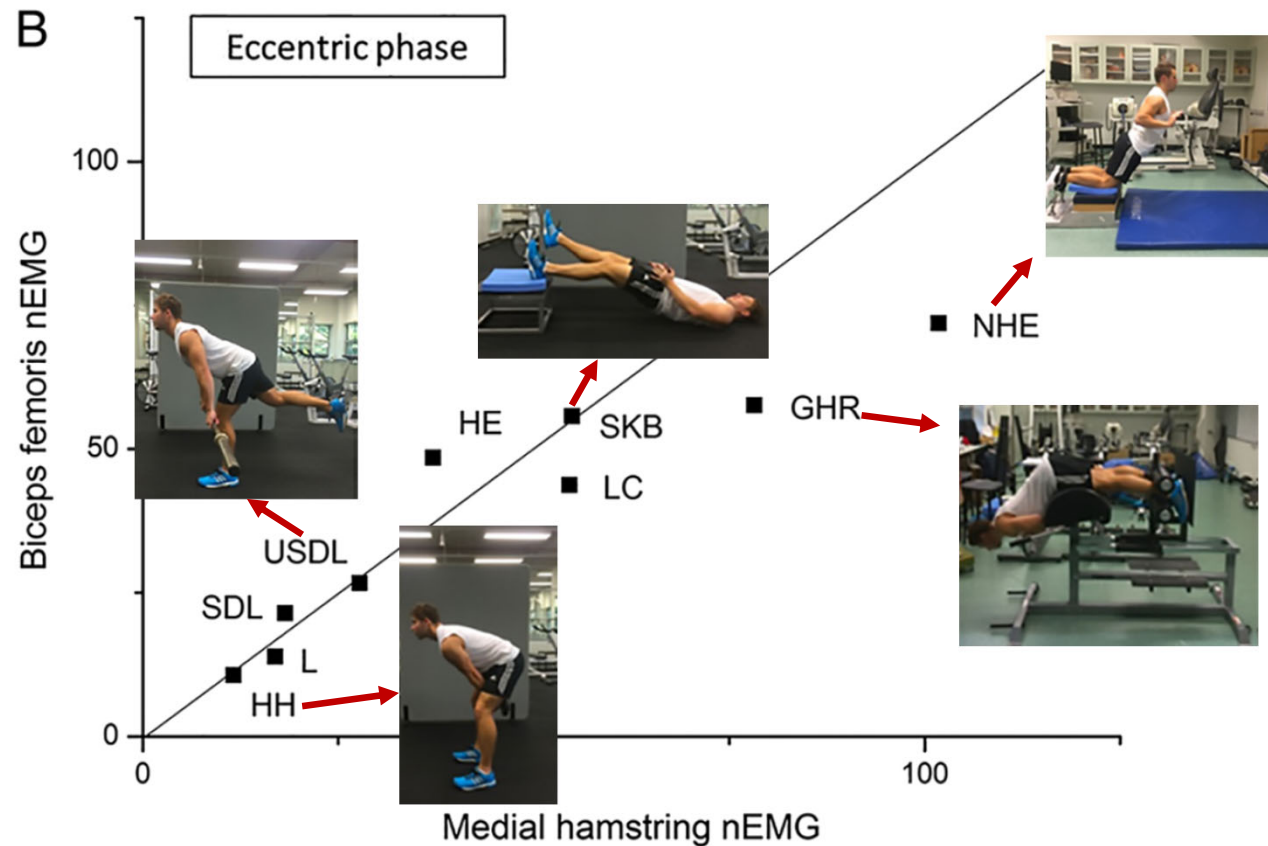
- ❑ Allow 3min of rest between sets
- ❑ If/when the athlete develops sufficient strength to completely stop the movement in the final 10–20° of the range of motion, s/he should hold a weight plate (range 5-45lbs) to the chest to ensure the exercise is still of supramaximal intensity.



Eccentrics In-Season?

- ❑ Gradually introduce in the off-season, prior to time of largest spike in hamstring strain injuries
 - Get past delayed onset muscle soreness
 - Achieve gains in eccentric strength
- ❑ Being too aggressive from the start could contribute to injury risk
- ❑ Must have maintenance program for remainder of year
 - Do not drop it during the season

Hamstring Muscle Activity



Bourne et al. (2017) Br J Sports Med

Other Exercise Options

45° Hip Extension

Beneficial Changes to Muscle | Not Studied for Injury Reduction



Week	Sessions/wk	Sets/Reps
1	2	2 x 6
2	2	3 x 6
3	2	4 x 8
4	2	4 x 10
5-8	2	5 x 8-10
9	2	6 x 6
10	2	5 x 5

- Train both limbs in alternating fashion; complete a set on one limb, rest 30 s before training the opposite limb, and then recover for 3 min before the next set
- load held to the chest in week 1 should represent 60–70% of the estimated 1-RM and progressively increased throughout the training period

Other Exercise Options

Single Leg Roman Chair Holds

Beneficial Changes to Muscle | Not Studied for Injury Reduction



Week	Sessions/wk	Sets/Reps
1	1	3 x 10s hold
2	2	3 x 10s hold with 20-25lb weight
3	3	3 x 10 plate rows with 20-25lb weight
4	3	Same as prior week
5	3	3 x 10 rows with 45lb weight
6	3	Same as prior week

- Train both limbs in alternating fashion; after completing a set on one limb, rest 15-30 s before training the opposite limb, and then recover for 2-3 min before the next set

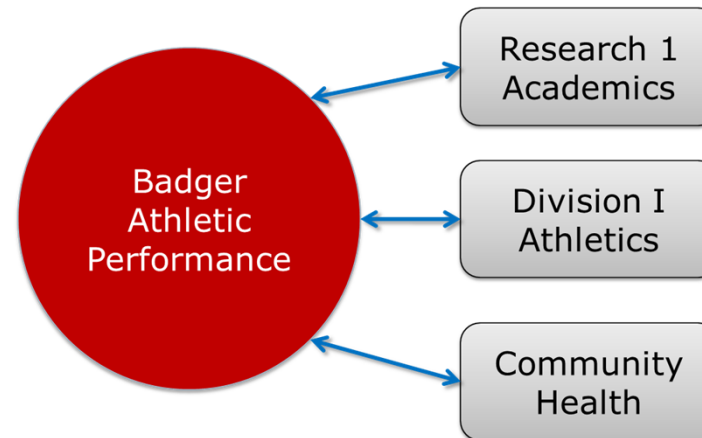
UW Badger Athletic Performance



Badger Athletic Performance dedicates itself to the mission of maximizing student-athlete's individual on-field performance through the integration of science, training, and injury management



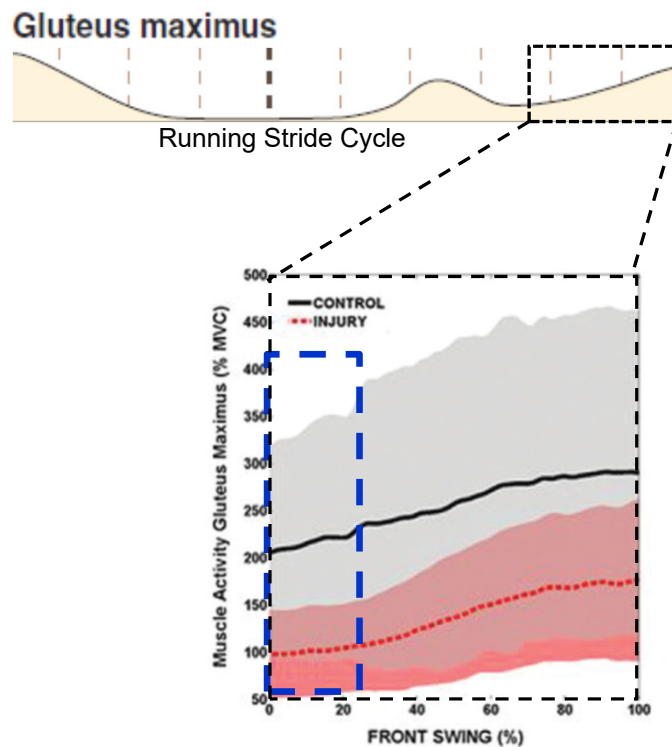
STUDENT ATHLETE PERFORMANCE CENTER



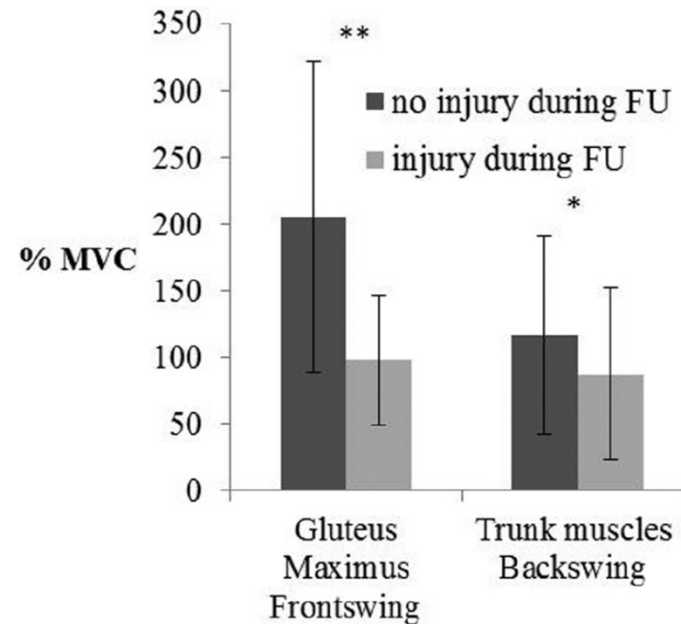
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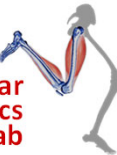
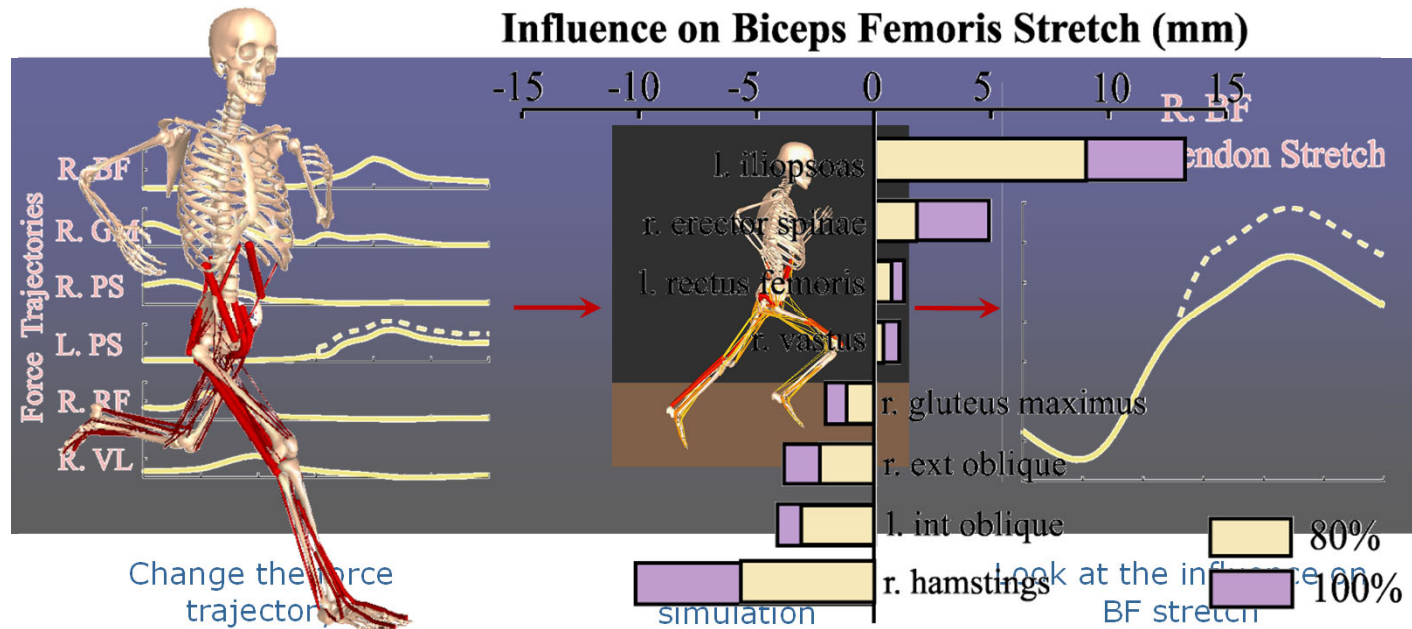
Gluteus Max Activity in Swing



- Hamstring injuries in running have been associated with reduced G. Maximus activity in 2nd half of swing (front swing)

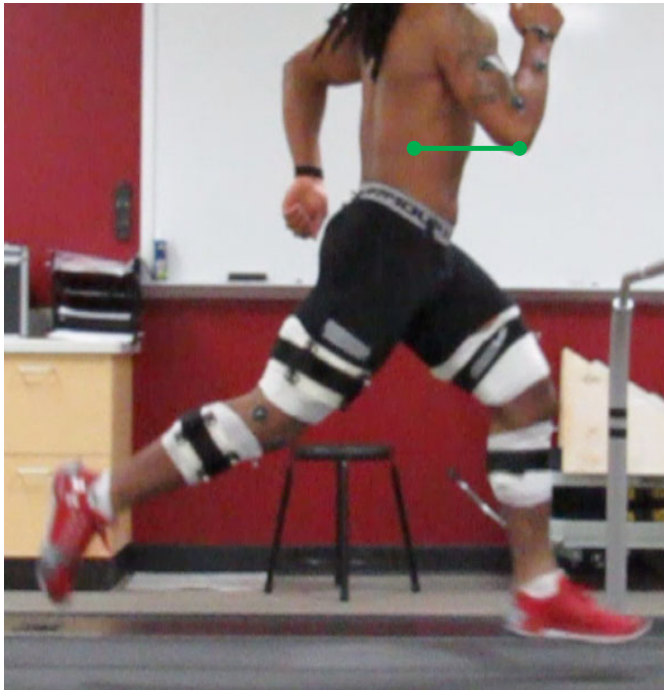


Influence of Adjacent Muscles on Hamstring Stretch during Running



Running Mechanics: Lumbopelvic Control

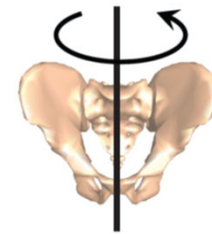
Healthy Limb in Terminal Swing



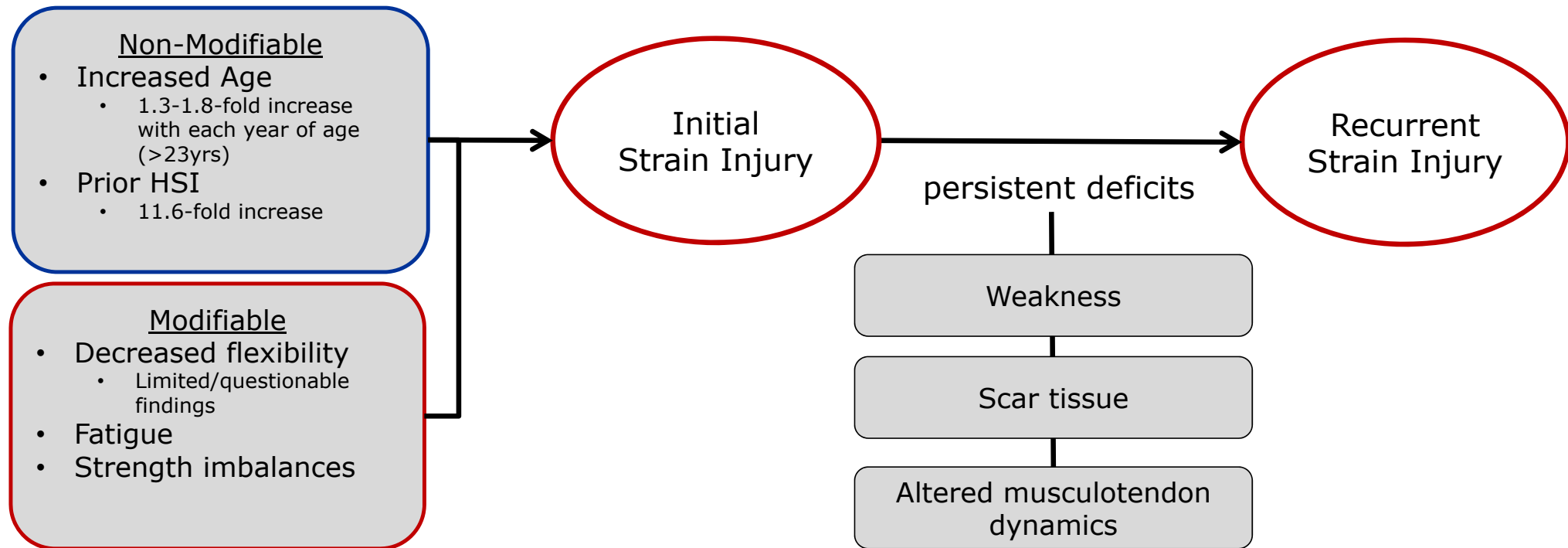
Injured Limb in Terminal Swing



- Limited left shoulder motion resulted in increased trunk and pelvic rotation
- Worse at high speeds



Factors Affecting (Re)Injury Risk



Opar et al. (2012) Sports Med



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So Many to Choose From...

Sherry-Best-Heiderscheit

SS
Stretching and
strengthening

Askling

C-protocol
Conventional
exercises

Mendiguchia

PATS
Progressive agility and
trunk stabilization

L-protocol
Lengthening exercises

Rehab Protocol
L-protocol +
progressive running

PRES
Progressive running
and eccentric strength

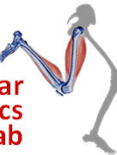
Rehab Algorithm
ECC + core + running
+ glutes + plyos

*Lower
re-injury rates*



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Outcomes from Different Approaches

Rehab Approach	Return to Sport (d)	Re-injuries (n)
SS	37.4 ± 27.6	7/10 (70%) 12 months
PATS-1	22.2 ± 8.3	1/13 (8%) 12 months
PATS-2	25.2 ± 6.3	1/16 (6%) 12 months
PRES	28.8 ± 11.4	3/13 (23%) 12 months
C-protocol	51 ± 21	1/38 (2.6%) 12 months
L-protocol	28 ± 15	0/37 (0%) 12 months
RP	23.2 ± 11.7	6/24 (25%) 6 months
RA	25.5 ± 7.8	1/24 (4%) 6 months

- Not just a result of the exercise selection but it chiefly involves the decision making regarding progression and readiness to return to sport

JOURNAL OF ORTHOPAEDIC & SPORTS PHYSICAL THERAPY
VOLUME 40 | NUMBER 2 | FEBRUARY 2010

[CLINICAL COMMENTARY]



BRYAN C. HEIDERSCHEIT, PT, PhD¹ • MARC A. SHERRY, PT, DPT, LAT, CSCS² • AMY SILDER, PhD³
ELIZABETH S. CHUMANOV, PhD⁴ • DARRYL G. THELEN, PhD⁵

Hamstring Strain Injuries: Recommendations for Diagnosis, Rehabilitation, and Injury Prevention

Phase

Goals
atro
Protec
han

Phase

Goals
neu
Protec
is p

Phase

Goals

strength through full ROM and speeds; integrate
postural control into sport-specific movements
Protection: Avoid full intensity if pain/stiffness is
present

RTS Decision Making



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Heiderscheit et al. (2010) *J Orthop Sports Phys Ther*

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Criteria for Rehab Progression

- ❑ Progression is largely informed by pain (Hickey et al. Sports Med 2018)
 - Are there more objective factors to consider?
- ❑ Daily physical measures may be useful to inform the progression (Whiteley et al. Br J Sports Med 2018):
 - length of palpation pain
 - knee flexion strength at long muscle lengths
 - active knee extension in maximum hip flexion
 - reported pain during daily activity

Phase I

1. Normal walking stride without pain
2. Very low speed jog without pain
3. Pain-free isometric contraction against sub-max (50-70%) resistance during prone knee flexion (90°) manual strength test

Phase II

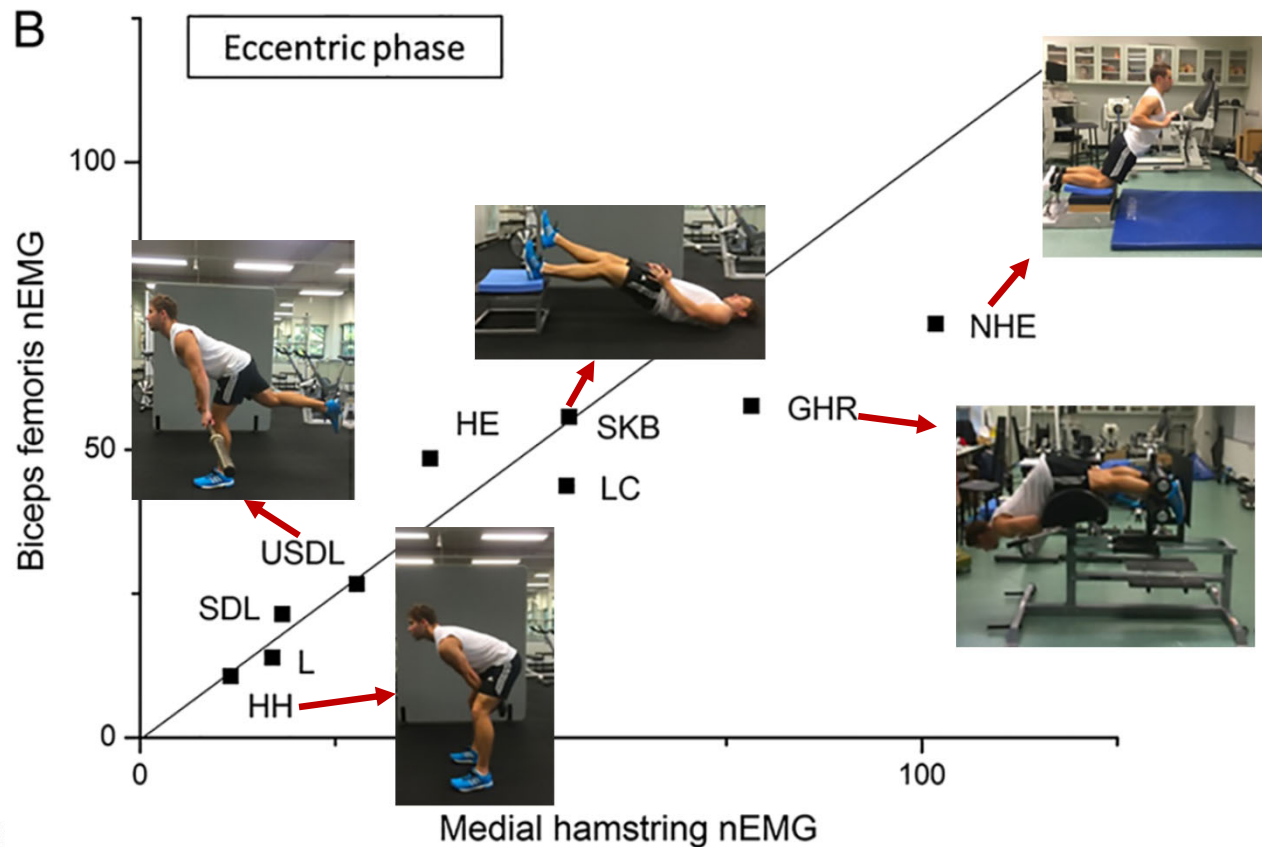
1. Full strength (5/5) without pain during prone knee flexion (90°) manual strength test
2. Pain-free forward and backward jog, moderate intensity

Phase III

RTS Decision Making

Heiderscheit et al. (2010) J Orthop Sports Phys Ther

Hamstring Muscle Activation



Bourne et al. (2017) Br J Sports Med

□ Intensity of muscle activation should be part of exercise selection

□ Also consider:

- Hamstring muscle length
- Lumbopelvic position
- Strictly sagittal (?)



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Return to Sport Decision Making

- ☐ Full strength without pain
 - 4 reps of max manual strength test in prone knee flexion position (90° & 15°)
 - Isokinetic torque ratios
 - Bilateral symmetry in knee flexion angle of peak concentric knee flexion torque
 - Eccentric knee flexion strength (?)
- ☐ Full range of motion without pain
- ☐ Replication of sport specific movements near maximal speed without pain
 - incremental sprint test for running athletes
 - Body posture replication
- ☐ Apprehension & fear of re-injury



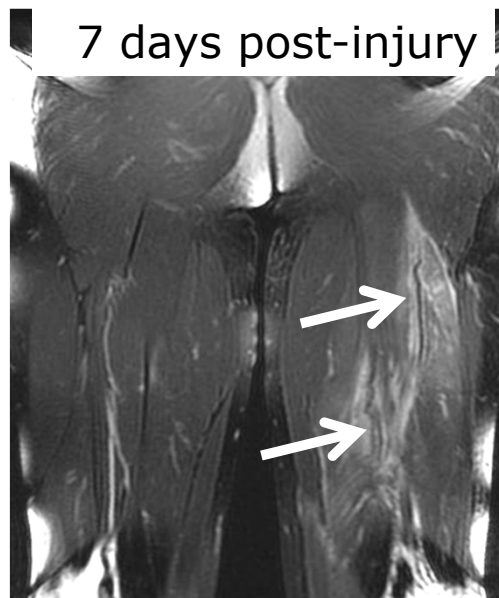
Return to Sport Factor Comparison

	Sherry-Best-Heiderscheit	Askling	Mendiguchia
Pain			
<i>Palpation</i>	x	x	x
<i>Activity</i>	x		
ROM	x	x	
Strength			
<i>Isometric</i>	x	x	x
<i>Concentric</i>			x
<i>Eccentric</i>			
Sport Movement			
<i>Quality</i>	x		x
<i>Speed</i>	x		x
Apprehension	x	x	x

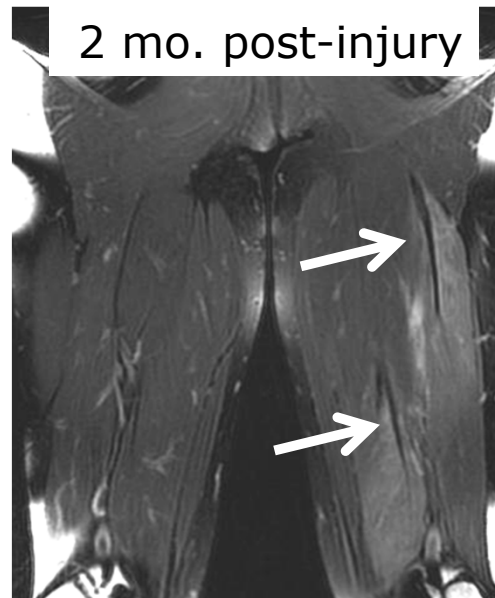
- Re-injuries most often occur:
 - same location as the index injury
 - early after RTS [median 24 days (IQR, 140 days); 50% within 4wks]
 - radiologically greater severity

(Wangenstein et al. Am J Sports Med 2016)

Post-Injury Remodeling



- ❑ Persistent edema; (~20%) of muscle
- ❑ Evidence of scar tissue



- ❑ Edema resolved
- ❑ Fully formed scar tissue
- 92% increase in biceps tendon volume



Silder et al. (2008) *Skeletal Radiology*
Connell et al. (2004) *AJR*

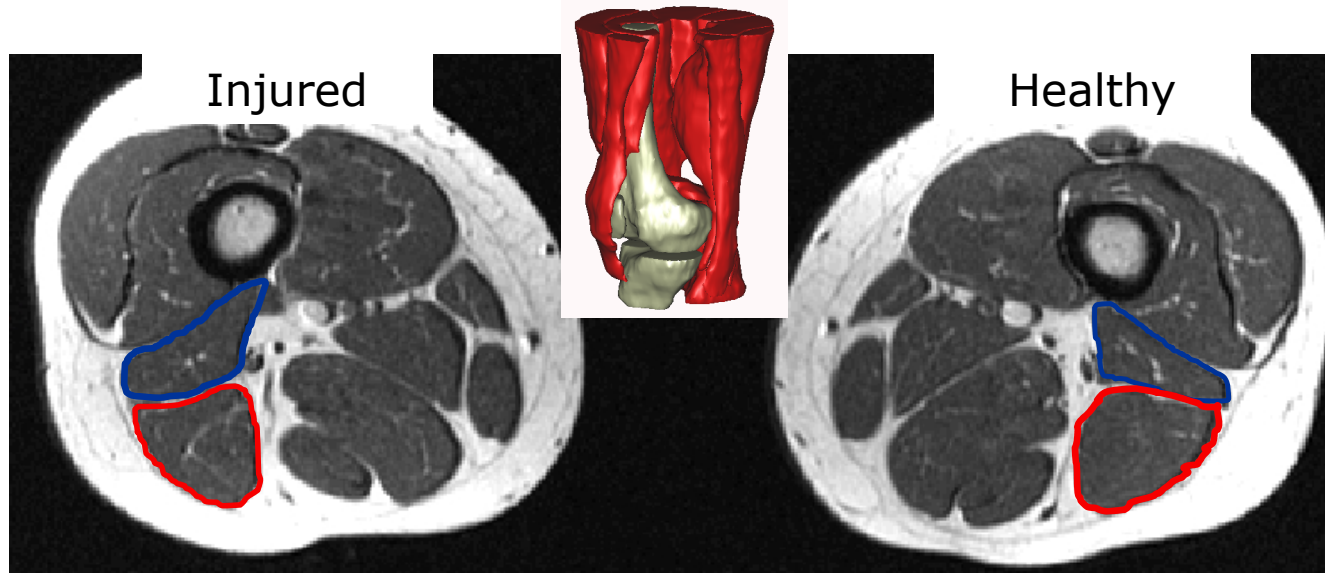


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Muscle Volume Changes



BFLH	BFSH
-12%	+22%
**p<0.01	**p=0.06

**Compared to healthy controls



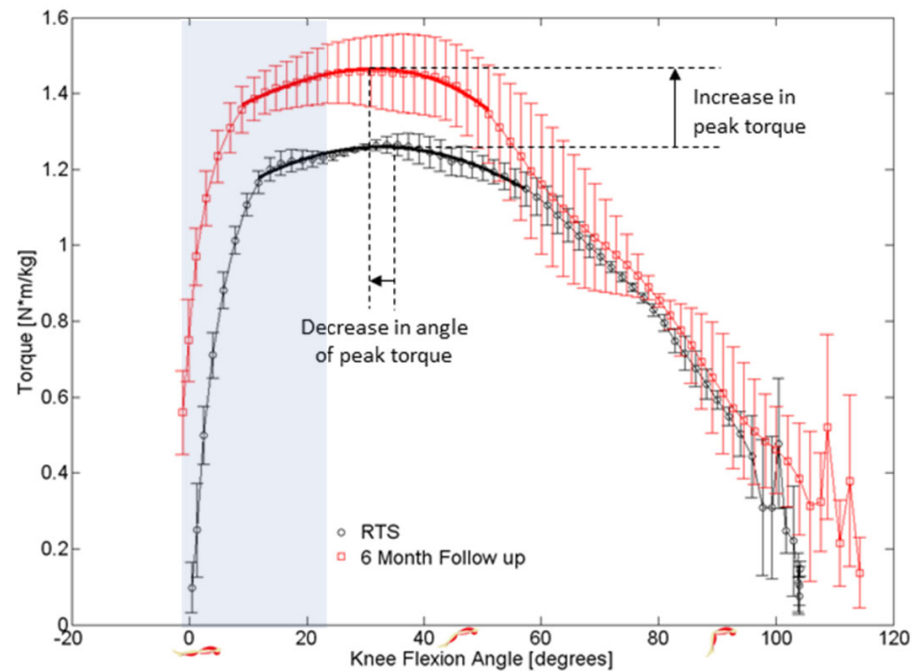
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Silder et al. (2008) *Skel Radiol*



Strength Deficits at Long Muscle Length

- Strength loss at longer muscle lengths may contribute to re-injury risk
- Residual deficits in torque-angle relationship addressed with eccentric training



long ← Hamstring Length → short



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Sanfilippo et al. (2013) *Med Sci Sports Exerc*
Silder et al. (2013) *J Orthop Sports Phys Ther*

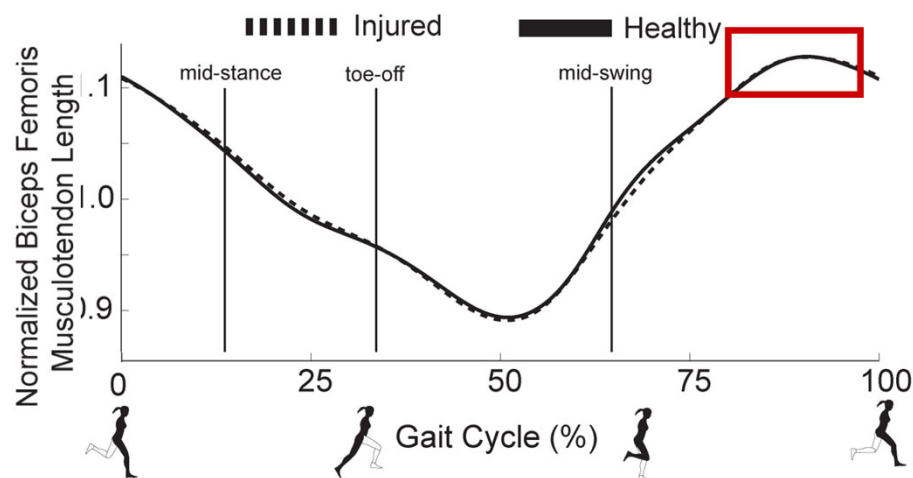
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Dynamic Deficits and Fascicle Strain



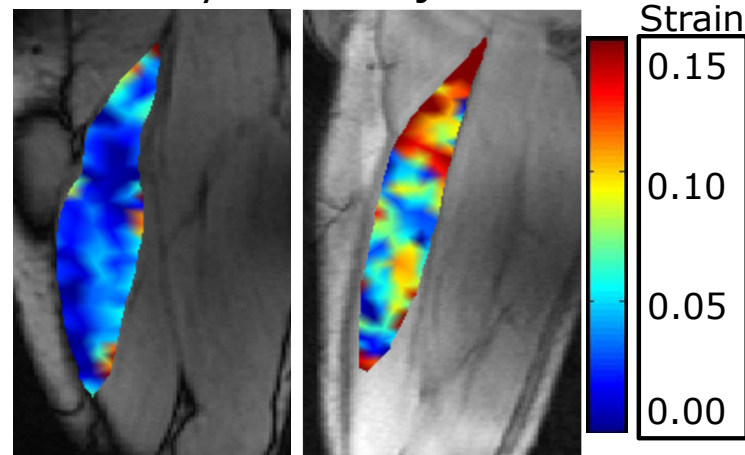
No significant bilateral differences in peak musculotendon stretch



Inertial Loading

Healthy

Injured



- Strains greater for injured subjects adjacent to injury site



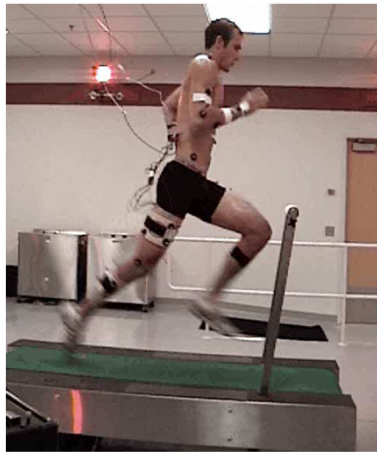
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Silder et al. (2010) Clin Biomech
Silder et al (2010) J Biomechanics

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What are Hamstring Loads during Sprinting?

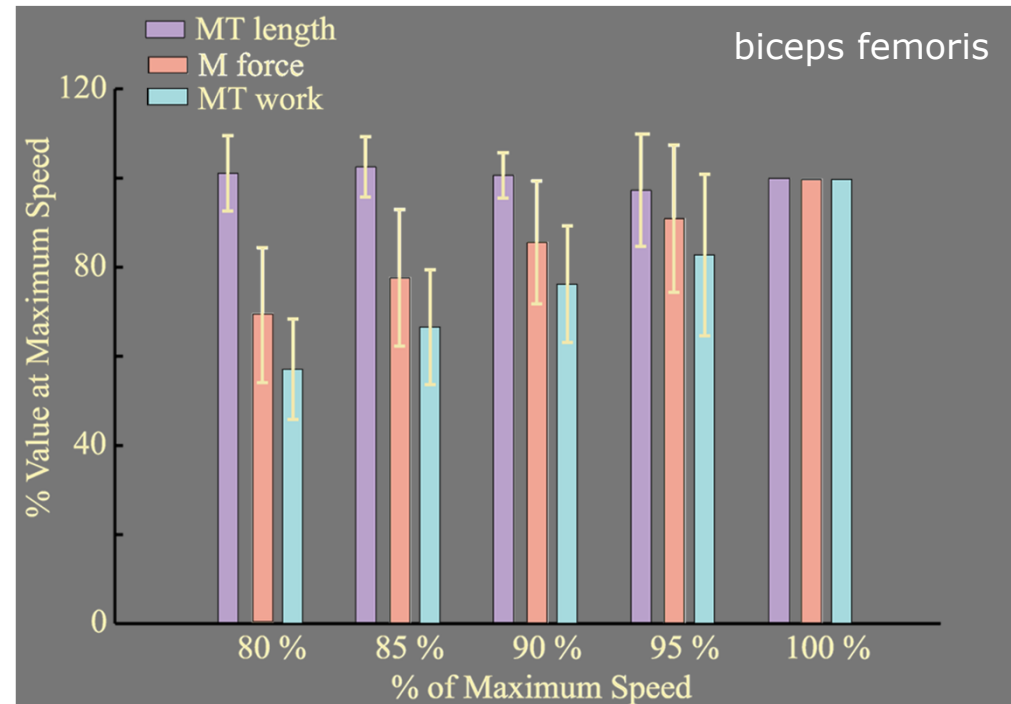


Measured Kinematics

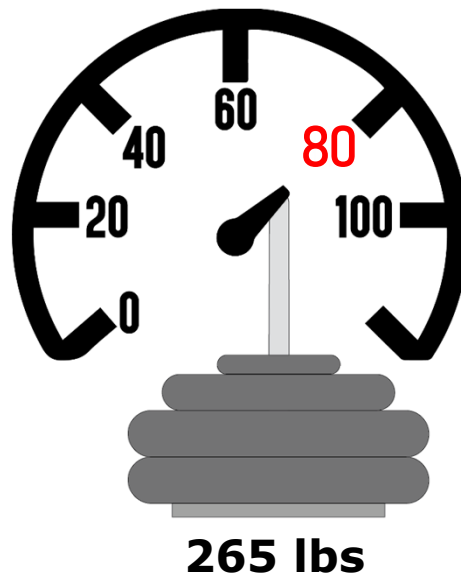


Forward Dynamics

- 80% to 100% running speed:
 - Force increases by ~50%
 - Negative work increases by ~70%



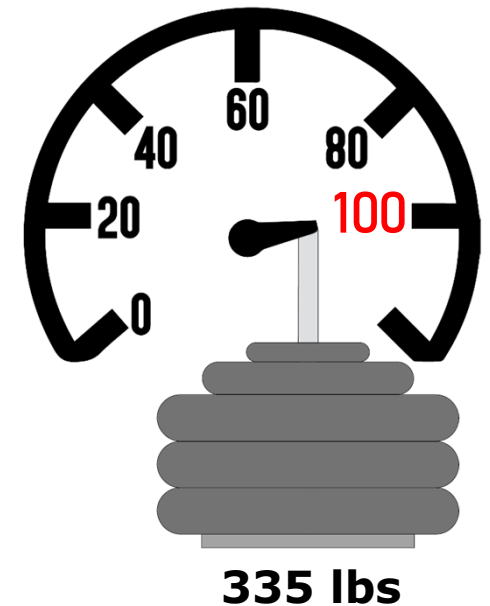
Hamstring Load during Sprinting



25% ↑
Speed

30% ↑
Muscle
Force

50% ↑
Eccentric
Load



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Summary

- ❑ Progression-based rehabilitation approaches
 - Phase 1: protect scar development and minimize atrophy
 - Phase 2: build strength and neuromuscular control of trunk and pelvis
 - Phase 3: symptom-free, normal strength, sport-specific movements
- ❑ Even with effective rehabilitation approaches, at return to sport
 - On average, 20% of muscle shows evidence of injury
 - Clear evidence of scar tissue formation
 - On average, 10% strength deficit
- ❑ Suggestive of needing better return to play criteria
- ❑ Eccentric strength and progressive high speed running are critical components to mitigate re-injury risk

Thank You



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