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Patellofemoral Syndrome Rehab

Patellofemoral Syndrome is one of the most common painful knee syndromes that presents in practice. This Rehab Report will highlight some of the primary considerations in the choice of exercises for the PFS patient.

The primary function of the patella is to enhance the strength of the knee extensors; however, an appropriate Knee Rehabilitation program for PFS should consider the following:

1. Patellofemoral joint forces are highest when performing knee extension exercises in an open kinetic chain with distal loading. Translate research into practice—this means that typical seated leg lift machines will stress the exact joint that your rehabilitation program is attempting to strengthen.
2. The vastus medialis (VMO) is often implicated as the weakness quadriceps and the TFL/ITB and vastus lateralis is often implicated as a short/tight muscle with resultant lateral patella. Again, translate research into practice—this means that target strengthening of the VMO must be balanced with target stretching lateral tight musculature.



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Fig. 1

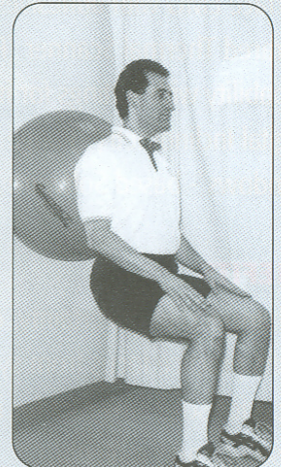


Fig. 2



Fig. 3



Fig. 4

Strategies for the rehabilitation of the PFS patient, should include:

Closed kinetic chain strengthening exercises like the wall squat (Fig. 1,2). The wall squat will ensure proper spinal posture while minimizing stress on the patellofemoral joint.

Cross leg side bends (Fig. 3,4). The cross leg side bend will help to target stretch tight muscles of the lateral thigh (i.e. TFL/ITB)