

INJURY PREVENTION & PERFORMANCE OPTIMISATION SCHOOL / YOUTH ROWING

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BODYSYSTEM[®] PHYSIOTHERAPY EXERCISE PHYSIOLOGY REHAB

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Consensus statement

2021 consensus statement for preventing and managing low back pain in elite and subelite adult rowers

Fiona Wilson¹, Jane S Thornton^{2,3}, Kellie Wilkie⁴, Jan Hartvigsen⁵, Anders Vinther⁶, Kathryn E Ackerman⁷, J P Caneiro⁸, Larissa Trease⁹, Frank Nugent¹⁰, Conor Gissane¹, Sarah-Jane McDonnell¹¹, Alison McGregor¹², Craig Newlands¹³, Clare L Ardern^{14,15}



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OPTIMAL POSTURE



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OPTIMAL POSTURE: CATCH Ankle + knee + hip motion



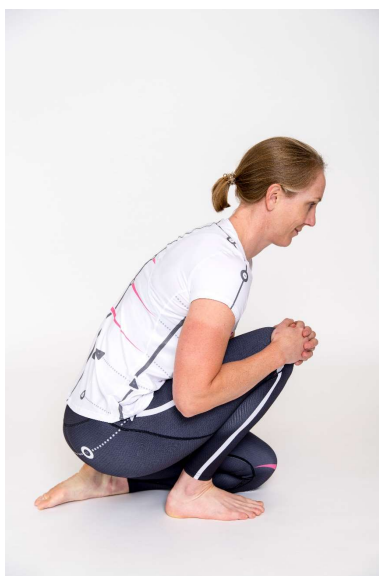
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ROWING SPECIFIC STRETCHES 1-2min hold



5

ROWING SPECIFIC STRETCHES 1-2min hold



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Importance of investing in adolescence from a developmental science perspective

Ronald E. Dahl, Nicholas B. Allen [✉], Linda Wilbrecht & Ahna Ballonoff Suleiman

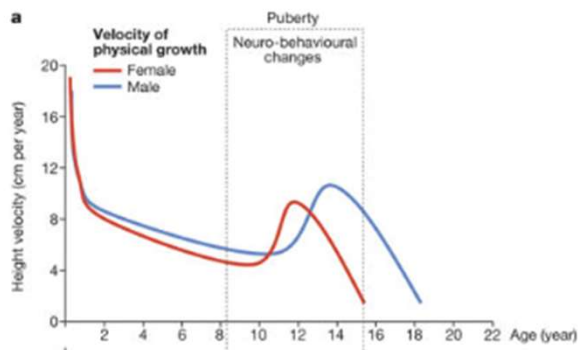
Nature **554**, 441–450 (22 February 2018)

Start rowing when start growing!

- Reduction in flexibility
- Reduction in strength

Male rowers – prioritise flexibility

Female rowers – prioritise strength



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MID-DRIVE & ROCKOVER Hamstring length

The Drive Phase



The Recovery Phase



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HAMSTRING FLEXIBILITY

Stretch 1-2min L+R Daily

Image credit : F Wilson 2016; Artist V Earle

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SWEEP

Not much rotation!

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END OF STROKE Abdominal strength + pelvic motion



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TRUNK / ABDOMINAL STRENGTH & ENDURANCE



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POSTERIOR (BACK) TRUNK STRENGTH & ENDURANCE



Female races = distance as male
 Races take longer
 Endurance demands are higher

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Hip flexion
Hamstring length
Abdominal strength

Ankle motion
Lat strength
Glut strength
Quad strength

WHAT IS MOST IMPORTANT?



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TRAINING LOAD

YOUNG GROWING BODIES

Sports-Specialized Intensive Training and the Risk of Injury in Young Athletes

A Clinical Case-Control Study

The American Journal of Sports Medicine, Vol. 43, No. 4
 DOI: 10.1177/0363546514567298
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**Increased injury risk if;
 Training hours / week
 GREATER THAN
 Age in Years**



Prescription of training load in relation to loading and unloading phases of training

PREVENTING INJURY

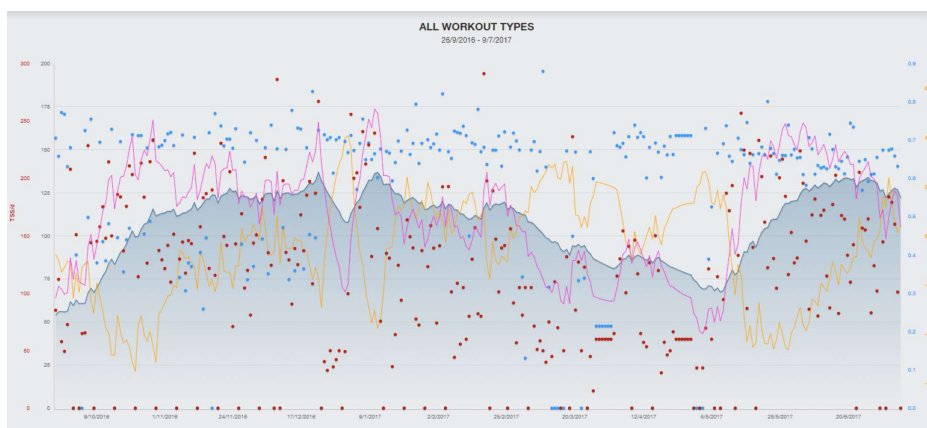
Planned & completed training must avoid;

- A sudden increase in load
- A 'dip' in load followed by increase in load

Understand that;

- An injury or illness results in an unload predisposing to secondary injury or illness
- High chronic (3 month) load is protective

TRAINING LOAD



U23 Rower 2016-17 Season
 Data provided by Rod Seigel VIS



TRAINING LOAD

Prescription of training load in relation to loading and unloading phases of training

Executive Summary, Version 1.4 May 2015

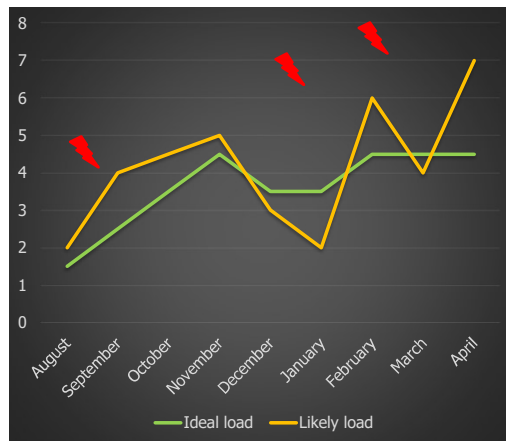
Table 1 – Determining modified training period on return from reduced training load.

		Weeks of modified training required to return to full training (total weeks of modified training)				
		0%	20%	40%	60%	80%
Weeks of training at a reduced load	8	8 (16)	6.9 (14.9)	5.8 (13.8)	4.8 (12.8)	3.7 (11.7)
	7	7.4 (14.4)	6.3 (13.4)	5.3 (12.3)	4.2 (11.2)	3.1 (10.1)
	6	6.9 (12.9)	5.8 (11.8)	4.7 (10.7)	3.7 (9.7)	2.6 (8.6)
	5	6.3 (11.3)	5.2 (10.2)	4.2 (9.2)	3.1 (8.1)	2.0 (7.0)
	4	5.7 (9.7)	4.7 (8.7)	3.6 (7.6)	2.5 (6.5)	1.5 (5.5)
	3	5.2 (8.2)	4.1 (7.1)	3.1 (6.1)	2.0 (5.0)	0.9 (3.9)
	2	4.6 (6.6)	3.6 (5.6)	2.5 (4.5)	1.4 (3.4)	0.4 (2.4)
		Percentage of training of normal training load completed				

CONSIDER
 Illness
 Injury
 Exams
 Moratorium /
 Christmas

SCHOOL ROWING CALENDAR

- Start Aug / Sept, term 3
- First regatta – Oct, term 4
- Summer break moratorium
- January camp
- Regatta throughout term 1
- Head River – March
- Nationals – March, April



ERGOMETER TRAINING

<20min at one time
Should be coached!

Fixed more loaded that dynamic
Dynamic may result in hip pain

world rowing

ROWING-RELATED LOW BACK PAIN
THINGS TO CONSIDER IF YOU NEED TO STOP OR CHANGE YOUR SCHEDULED TRAINING

Reference: Wilson, F. et al. 2021 consensus statement for preventing and managing low back pain in elite and subelite adult rowers. Br J Sports Med. 2021

LET YOUR COACH KNOW
Early unloading from aggravating activities = better outcome

SEE A DOCTOR OR PHYSIO
experienced in rowing injury for early assessment. Ensure communication with coach.

BE INVOLVED IN YOUR PLAN
Participate in decision making with your medical team and coaches.

MODIFIABLE RISK FACTORS

- Increased stress
- Decreased hip motion & pelvis tilted back can increase risk
- Poor nutrition
- High volumes & >30 min of continuous ergometer rowing
- High volume & intensity of training & competition
- Fatigue & poor technique that loads spine
- Decreased hamstring flexibility
- Poor sleep habits

NON-MODIFIABLE RISK FACTORS

- Males may need to focus on hip movement
- Females may need to focus on trunk strength
- Previous history of low back pain
- Rough water training or weather change
- Athlete time in sport
- Young training age

PROTECTIVE

- Steady increase in training load
- Increased trunk strength & endurance
- Upright pelvis & 130° hip motion
- Careful consideration to change in boat setup & crew

ACUTE PHASE
Keep active with pain control. What cross-training can you do? Learn about self-management. Most of the time, scans are not needed.

SUB-ACUTE PHASE
Introduce rowing specific movement patterns. Increase on water rowing and decrease cross training progressively.

RETURN TO PERFORMANCE
Maintain fitness and progress training load with an interdisciplinary, athlete-centred and coach-approved approach.

CREATING A CULTURE OF EARLY RECOGNITION & MANAGEMENT OF LOW BACK PAIN IN TRAINING ENVIRONMENTS OPTIMISES LEARNING & PERFORMANCE
BASED ON EVIDENCE FOR BEST MANAGEMENT IN ELITE AND SUB-ELITE ROWERS, MASTERS, PARA AND DEVELOPING ROWERS SHOULD SEEK SPECIFIC ADVICE.

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EARLY MANAGEMENT OF LOW BACK PAIN

If Rower has;

- 1) Sharp pain
- 2) Pain getting worse
- 3) Pain lasting >30m after row erg
- 4) Have to modify training or technique

SEE PHYSIO WITH ROWING EXPERIENCE

2-4 days rest initially (can be up to 6 weeks)
Avoid complete rest

Row / erg = pain > avoid
If can sit without pain > bike
Sit = pain > walk, steps, hills, swim, elliptical

Aggressive unload = less time out of training
Continuing to row / erg with pain = muscle splinting, poor performance, increased severity of injury
Heat + simple pain relief + exercises +/- AIs

Communication with coach about what CAN do

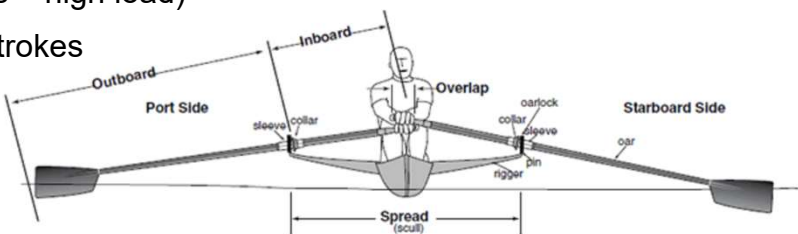
SAFE-GUARDING
Rowers should NEVER be made to row injured
Rowers should NOT persist with pain

**Culture of speak up early = early unload = early management
+ good communication = early return to boat**

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RETURNING ROWER TO BOAT

- Adhere to medical / health care advice
- Trail erg = great place to start – 10m
- Lighter first row back
 - in middle of big boat (not stroke)
 - Shorter row (coach boat not ideal)
 - Keep rate up (low rates = high load)
 - Avoid starts & power strokes
 - Avoid poor weather
 - Avoid injured boat!
- Ask rower how they are feeling?
- Observe the rower's movements
- Consider gearing
- Consider seat & foot stretcher height
- Consider what boat returning to

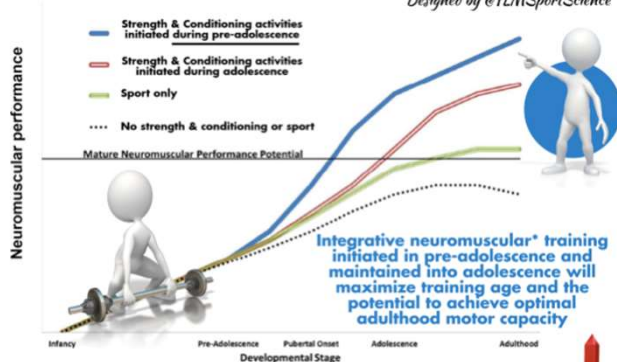


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STRENGTH & CONDITIONING

How Young is "Too Young" to Start Training?

Designed by @YLMSportScience



Strength

Best done in 'off season'

Females x3 per week

Males x2-3 per week

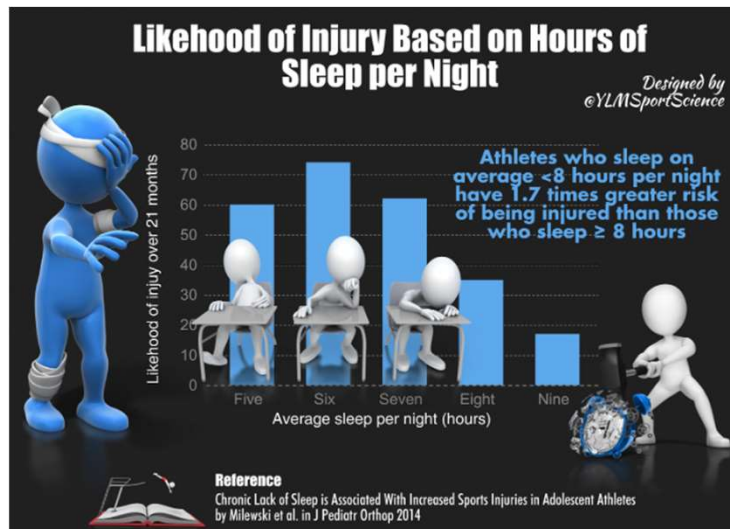
Smaller gains when endurance training is high

During season

Focus on core, flexibility & movement patterns

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SLEEP



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HOW DO YOU PUT THIS ALL INTO ACTION!!

WARM UP – best done on the water
 (push away & row ½, ¾ then full slide)

STRETCHING – best done after the session
 while you are debriefing
 (Glut, hip flexors, hamstrings, calf, quad 10m)

ERGOMETER ROW & CROSS TRAINING
 20min max before up and move (2x20min ok)
 Much greater load than on water
 Mix with bike is good
 Running is shock absorption – not always great

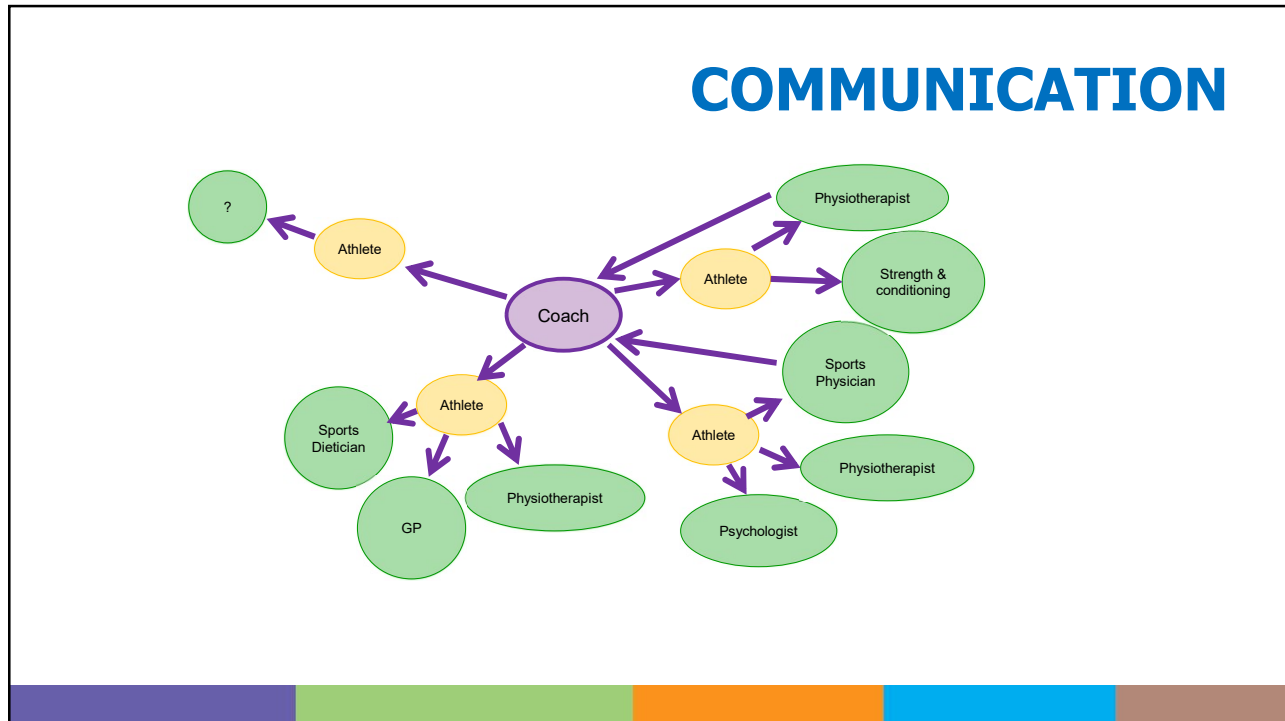
ABDOMINAL EXERCISES
 X3 / week 2x20 > 3x30 > 4x40 (ball or no ball)
 Not immediately before row / erg

STRENGTH
 Best in the off season

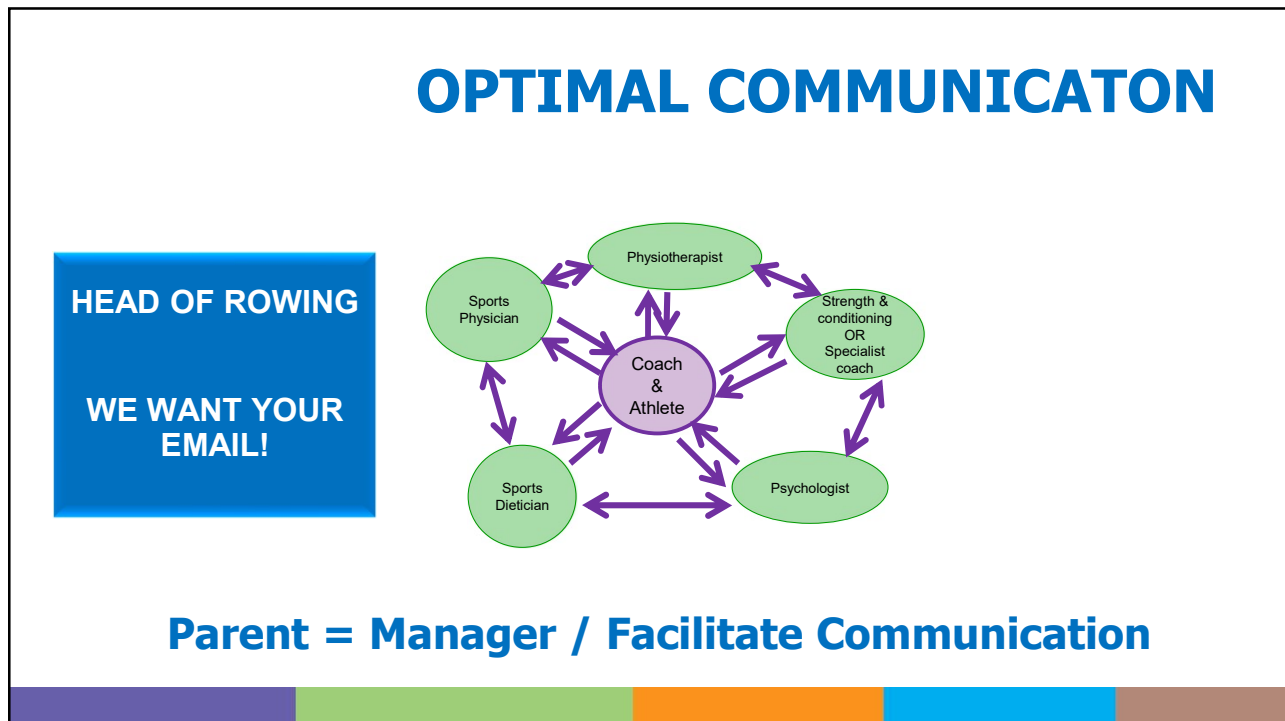
TRAINING LOAD
 Plan it and track actual load
 Be aware of individual needs
 Check it with Taylor – meet with him 1hr

Rowing is hard, create a culture of open communication & trust
Priorities are training consistency, sleep & food

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