

Help with this leaflet:



If you would like this information in another language, large print or audio format, please ask the department to contact Patient Information: 01223 216032 or

patient.information@addenbrookes.nhs.uk



We are currently working towards a smoke free site. Smoking is only permitted in the designated smoking areas.

For advice and support in quitting, contact your GP or the free NHS stop smoking helpline on 0800 169 0 169

Addenbrooke's Hospital Outpatient Physiotherapy

Patient Information

Patello Femoral Syndrome (Anterior knee pain or Chondromalacia Patella)

Document history

| | |
|---------------------|---|
| Authors | Physiotherapy Department |
| Department | Cambridge University Hospitals NHS Foundation Trust, Hills Road, Cambridge, CB2 0QQ www.cuh.org.uk |
| Contact number | 01223 245151 |
| Publish/Review date | August 2011/August 2014 |
| File name | Patello_femoral_syndrome |
| Version number/Ref | 1/PIN2757 |

Patello Femoral Syndrome is an irritation of the kneecap (patella) and the underlying bone (femur). The irritation is caused by the patella not moving on the femur correctly when you bend and straighten your knee. It should stay centred and move up and down in a groove. If it is off-centre, it will be pulled to one side in the groove and cause excessive stress to one part of the underside of the kneecap. The cartilage here may become inflamed, or you may hear or feel "crunching sensations" or pressure behind your kneecap. You will probably experience pain with movements that involve bending the knee or with prolonged sitting.

Some or all of the following factors can contribute to the knee pain:

- Tight muscles or ligaments pulling the patella sideways
- Weak muscles not holding the patella in place
- Biomechanics i.e. altered position of the patella due to flat feet/overpronation. Special insoles (orthotics) may be recommended.

The exercises in this leaflet are designed to help address these factors. Your physiotherapist will advise which ones are suitable for you.

1. Step-ups

Stand facing a step with the foot of your affected knee resting on the step. Step up, straightening the knee and then lower back down slowly. Ensure that you control the alignment by keeping the middle of your kneecap over your second toe.

Repeat _____ times.



2. Single leg dips

Stand on one leg, bend and straighten the standing knee, keeping your hip, knee and foot in alignment.

Repeat _____ times.



9. Hip flexor stretch

In half kneeling with the leg to be stretched behind you, push your hip forward until you feel a stretch in the front of your thigh. Rotate your pelvis backwards to increase the stretch.

Hold for 20 seconds.

Repeat _____ times.



©PhysioTools Ltd

Contacts

Please contact our reception on 01223 216633 to leave a message for your physiotherapist, or to enquire about appointments.

Pain relief

To help us optimise your treatment, it is important that you have adequate pain relief. If you are suffering high levels of pain please seek advice from your pharmacist or GP.

Information

Please be aware that this handout is to be used as a guide. If you find these exercises painful please seek advice from your physiotherapist or GP.

This information has been compiled by the Physiotherapy team at Addenbrooke's Hospital. You may receive this information during an appointment with a physiotherapist, from your GP or via our website at www.cuh.org.uk/outpatient-physio

7. Tracking control:

Stand leaning with your back against a wall and your feet about five inches from the wall. Slowly slide down the wall until your hips and knees are at right angles. Make sure that your knees are in alignment with your second toes.

Hold for _____ seconds.

Return to starting position.

Repeat _____ times.



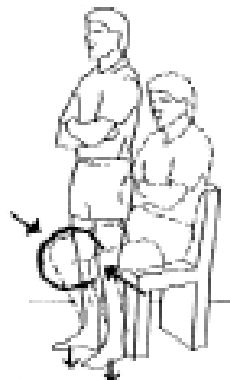
8. Vastus Medialis Oblique (VMO) activation:

(1) As above but with a ball or towel between your knees, squeeze the ball gently 10 times without letting the knees come together and then return to starting position.

Repeat _____ times.

(2) Sit with ball between your knees. Activate the inner knee muscle by pushing down through the feet and gently squeezing the ball. Maintain this activation as you stand up and then sit back down slowly on the chair. Begin on a higher seating surface and progress to lower heights to make it more difficult.

Repeat _____ times.



3. Lunges

Stand with one leg slightly forward and both knees bent. Lunge forward ensuring that you control the alignment by keeping the middle of your kneecap over your second toe.

Repeat _____ times.



4. Patellar Mobilisations

Sit with your leg straight or slightly bent and toes pointing forwards. Using the heel of your hand or your thumb, push the knee cap towards your opposite leg. Hold for a few seconds.

Repeat _____ times.



5. Iliotibial Band (ITB) stretch

Stand holding on to a wall. Start with your body, knees and feet straight forward. Place your closest leg to the wall behind the other leg and then lean your hip towards the wall until you can feel the stretch on the outside of your hip and thigh. Hold for 20 seconds

Repeat _____ times.



6. Quadriceps stretch:

Lie on your stomach. Bend one knee and take hold of the ankle or use a towel around the ankle to assist and draw your heel towards your buttock. Hold this position for 20 seconds.

Repeat _____ times.

