

Argus Orthopaedic Zone

Jumper's Knee

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Transforming patient information into patient understanding.

Raise your hand if you have ever heard of Jumper's Knee before.
Hmm. I thought so.

Well, here goes with your continuing Orthopaedic education.

It is a condition located around the kneecap.

Anatomy

The tendon attached to the top of the kneecap is called the quadriceps tendon. The one attaching below is called the patellar tendon.

Tendons are very tough bands that attach our muscles to bones.

Cause of Jumper's Knee

Jumper's Knee is a type of tendinitis or inflammation that develops where the tendon connects with the kneecap. It can develop if you put too much stress on the knee with a variety of activities, especially jumping. It is really common in basketball and volleyball players.

The contraction of the thigh muscle (quadriceps) can put too much stress on the patellar tendon causing localized inflammation or tendinitis.

Location

Pain in the front of the knee specifically at the lower pole of the kneecap is typical. You can feel the tender spot where the pain is located if you push on it.

Activity

It really is almost always connected to some jumping. I don't see it much in runners. If you have the condition though, climbing stairs, running and squats can certainly aggravate it.

Disaster Strikes

I have rarely had a patient whose patellar tendon actually ruptured from the kneecap. It does happen, but it is rare. The tendon sometimes ruptures from the top of the kneecap. If it does you will have severe pain and won't be able to straighten your knee. You will probably end up in a heap on the ground and won't be able to put any weight on your leg.

Treatment

After I thoroughly examine the knee and entire leg, I will get plain knee x-rays. Sometimes an MRI x-ray study is needed to identify a partial or complete tear of the tendon.

Tendinitis and Partial Tear

- Rest and recuperate even though you don't want to. You have to!
- The usual ice for 15 minutes twice a day.
- Advil or similar to combat inflammation and relieve pain.
- A brace or compression strap is often prescribed.
- Theragesic applied to the sore place 2 or 3 times a day.
- Physical Therapy can be very beneficial.
- Home exercises supervised by a therapist.

Surgery

If the tendon either below or above the kneecap is completely ruptured, I have always preformed surgery to repair it. This injury is a big deal. After the tendon is repaired surgically it requires a period of immobilization postop, crutches, then bracing for weeks to a few months. You and the physical therapist will no doubt be well acquainted by the time this is over. In time you'll be able to do all the rehab exercises on your own.

It can take 6 months plus for rehab to be complete before you resume many activities.

Office Website and Argus Orthopaedic Zone Archive

All the Orthopaedic and musculoskeletal information you will ever need is yours at www.orthopodsurgeon.com! And what's more - The Argus Orthopaedic Zone Archive is on the website. Every article I have written for Argus can be located on the Archive. The complete article! Everyone please check all this out.

It is a wealth of information about all the things I treat in the office and hospital.

Our goal is simple - to help people return to more pain free functional lives. Call if you need me. I specialize in you.

Good health. Good life. All the best to you.

Be well.

Dr. Haverbush