Osteopathic Medicine & Boxing/Kick Boxing/Full Contact Injuries

Osteopathic Medicine has taken on greater importance in boxing and extreme sports today. The issues of injury prevention, education and conditioning of athletes, and the treatment of injuries- fractures, dislocations, and intracranial bleeds are of major importance within these

Proper assessment and treatment of severe injuries require an understanding of specific musculoskeletal and neurological injuries proper to these sports.

The value of an inter disciplinary approach to these sports include physical therapists, massage therapists, certified fitness trainers and nutritionists is important to the approach of providing comprehensive health care

The mission of Osteopathic Medicine is to rehabilitate the injured athlete beyond the resolution of symptoms in order to allow a medically safe return to the sport and prevent further injury.



Osteopathic Physician

(Medical Doctor specialized in Osteopathic Medicine).
The physician is a physician licensed in medicine and specialized in Osteopathic Medicine who has a broad understanding of common injuries related to these sports as well-acute of medicine who has a second and the second of the sports are second or sec

injuries related to these sports as well acute emergencies. The role of the Osteopathic Physician is to ensure the participant safety and ability to perform in this contact sport. A background in sports medicine is an attribute for the physician.

O.M.T (Osteopathic

Manipulatives Techniques).
There are three major phases that exist in the treatment process in those Injuries: the acute, the recovery, and the maintenance phases

acute, the recovery, and the maintenance phases. The goal of Osteopathic Medicine includes the return of tissue healing, to maintain of mobility in the spine, liberating the blockages between the vertebras, maintenance of fitness, resolution of the injury cycle, and restoration of functional endurances and flexibility to return back to the sport.

In the acute phase of the rehabilitation, some modalities should be used to reduce the signs of acute inflammation and injury. Modalities such as ice, heat, hydrotherapy, electrical stimulation work to decrease the swelling and facilitate tissue healing. Anti-inflammatory medications, inflammatory medications, splinting and surgical treatment are all utilized in this primary phase of rehabilitation.

In the Recovery Phase of Rehabilitation, The recovery phase is often the most lengthy and most involved phase of rehabilitation. Emphasis in this stage shifts from resolution of clinical symptoms to restoration of function. Anti-inflammatory medication and physical therapy modalities are use much less frequently and assume a more adjunctive role. Appropriate tissue loading is assume a more adjunctive role. Appropriate tissue loading is the major modality that is used in this phase. As tissues regain their integrity, flexibility is increased and strength improved through isometric and isotonic exercises and then isokinetic ones.

Isometric exercise increases strength quickly essentially through no movement, (i.e., pushing against a wall).

Isotonic exercise promotes muscle conditioning through movement. Weightlifting is common examples of isotonic

Isokinetic exercise promotes strengthening and flexibility through a range of motion for which a maximal force is given which a maximal force is given at every point within this range of motion. Isokinetics frequently involve specialized machines that match the strength through every degree of motion.

An adjunct to isometric, isotonic and isokinetic exercise isotonic and isokinetic exercise Osteopathic manipulative sessions are required to give again the mobility to the verte-bras, thus liberating the root nerves or the impinged ones which will keep the muscles relaxed and ready to work-out.

In the Maintenance Phase of Rehabilitation, The maintenance phase is the final phase of rehabilitation and helps prevent future injury. In this phase, the athlete is prepared to return back to his level of athletic performance. Simulated activity within the sport's specific motions should be evaluated for any weaknesses and strength, lack of flexibility or pain. In the Maintenance Phase of

Osteopathic Manipulative Techniques should been done over a period of 6 months, a session each month, after injury in order to regain the equilibrium in the spine between each vertebra and permit the body especially the neck to absorb further shocks due to Boxing

IMPORTANT: The probability of injuries recurring is great if the athlete returns prior to completing rehabilitation. In completing rehabilitation. In order to ensure a safe recovery, five criteria should be met before participating in full physical activity: I) Absence of pain; 2) Full range of motion at the injured area; 3) Normal strength and size of the injured area; 4) Normal speed and agility; 5) Normal level of fitness.

In these kind of sports it is ABSOLUTELY IMPORTANT that the therapist must be a Medical Doctor to remove any serious health problem, especially after a neck injury where the life of the athlete could be in danger, for that it is especially recommended in Lebanon that the athletes patients verify at the LOP (Lebanese Order of Physi-cians) that the pretending therapist is a confirmed Medi cal doctor and this only for a unique purpose; their own health.

Elie MALEK MD, DOM

OSTEOPATHIC MEDICINE Member of the French Professional Association For Professional Association For Osteopathic Physicians Member of the French Society for Orthopedic and Osteopathic Mamber of the World Osteopathic Health Organization Training Monitor at the French Academy for Post-Graduate Training for Osteopathic Physicians - Paris

