

MUSCLE IN FOCUS PLANTARIS MUSCLE

by **BRAD HISKINS**,
Soft Tissue Therapist, Clinic 88

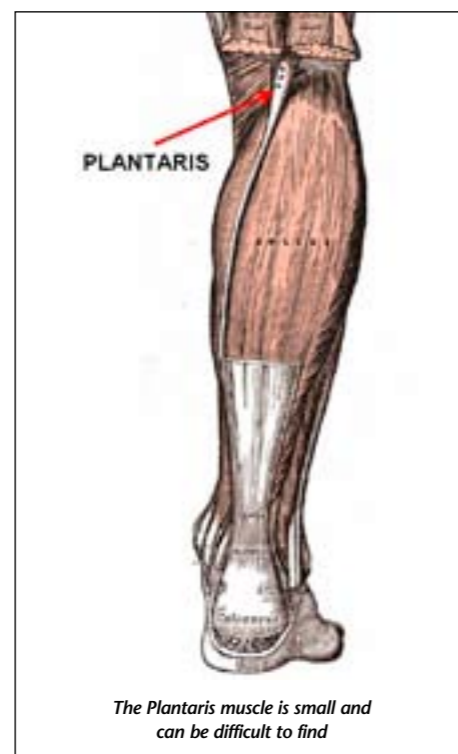
THE plantaris is a muscle that attaches to the posterior portion of your femur (upper leg bone), just above the back of your knee on the lateral side (outside). This muscle has a very small muscle belly in comparison to its incredibly long tendon. The muscle belly runs inferiorly from just above the posterior knee crease for approximately 4-6 cm before becoming a tendon. The tendon runs medially (on the inside) of the calf, sitting on top of the soleus (deep calf muscle), and underneath the gastrocnemius (superficial calf muscle). It then continues to run down the inside of your calf. It eventually becomes more superficial (the gastrocnemius doesn't hide it anymore) and can be palpated on the inside of your calf. The tendon can be easily palpated on some people, but not all. The tendon then continues down alongside your Achilles, often feeling like the same tendon, before inserting into the calcaneus (heel bone) next to the Achilles or with the Achilles.

As humans have evolved this muscle has lost its importance. In apes it continues to the toes and is important in tree climbing and mobility. Its function is so insignificant in humans that it can be harvested for surgical replacement of a damaged tendon elsewhere, with little to no loss of complete function of the knee and ankle. In a recently published study, it was found that 3% of those people viewed didn't even have a plantaris tendon.

So why discuss it? Because it has the ability to cause pain in athletes.

The plantaris muscle, although relatively useless, can be torn or ruptured. You may feel a whip-like sting in the calf while pushing off with that leg or when accelerating. There may be a 'snap' heard at

the time of injury. There will be consistent calf pain associated with swelling. The function of the foot and ankle will remain in tact however. This type of injury can be very difficult to assess. It is often



misdiagnosed for Achilles tears and an MRI of the area is still not 100% accurate. Hence, keep in mind when the standard treatment for achilles tear or rupture doesn't appear to be working.

Secondly, because the tendon runs along side

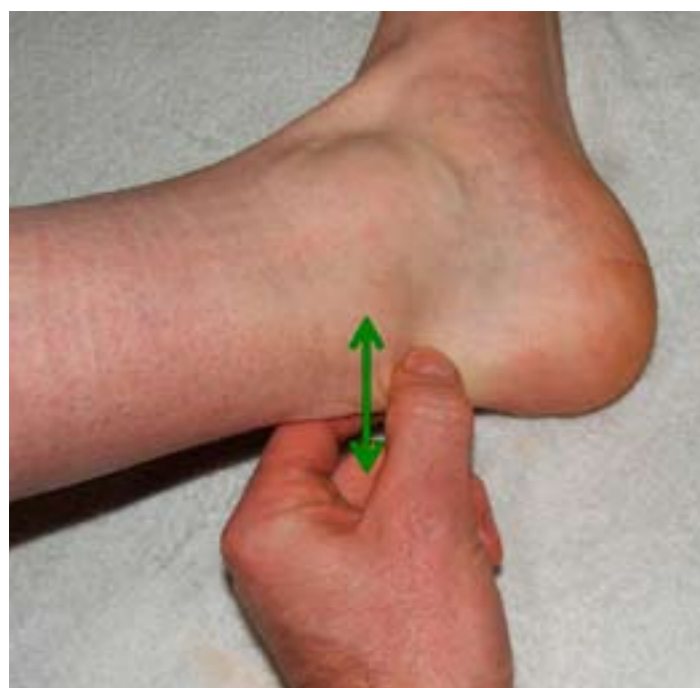
your Achilles it can occasionally become inflamed. This will give vague aching pain alongside the medial portion of your Achilles and sometimes into the insertion onto the calcaneus. Again, this is unusual and difficult to assess. Therefore, when standard assessment and treatment is not working for you, think plantaris. Go and visit your local Sports Physician or Sports Doctor and see what they think.

How to treat it yourself?

If the area seems inflamed then there is some simple treatment you can perform. Try icing after exercise or taking anti-inflammatories that can be obtained from your local chemist (please consult your medical practitioner if you are at all apprehensive about side affects). Functional rest is also a suitable method. Get into the pool (yes, that ugly word...pool) and cross train for a small period of time to allow some rest and recovery. Don't push off anything or accelerate too quickly. Be careful of stairs.

Soft tissue work to the muscle belly itself will help. The difficulty is having enough anatomical knowledge to find the little critter. Treatment to the calf and area around the Achilles tendon may also help. The two tendons (plantaris and Achilles) may become adhered (stuck together) via inflammatory processes and therefore lose their ability to slide over each other as they should. Get this treated and ask for some self-massage tips to self-treat at home. To begin with, try gently frictioning the site with your fingers (gentle, rhythmical backward and forward movements) for 2-3 minutes, a couple of times a day. This may be enough to mobilise the adhered area and improve your symptoms.

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Gently friction over the site with your fingers by performing rhythmical backward and forward movements for 2-3 minutes.



Ice can help settle down local inflammation

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