

# TIBIAL COLLATERAL LIGAMENT BURSITIS



## ■ ■ ■ Description

A bursa is like a water balloon between bone and a soft tissue structure to help reduce friction and wear of the soft tissue against the bone. The tibial collateral ligament is a ligament on the inner side of the knee that connects the thigh bone to the leg bone. The tibial collateral ligament bursa is the bursa between this ligament and the bone at the knee joint that allows the ligament to glide past the bone and cartilage at the joint. This condition causes inflammation and pain of this bursa (bursitis) and is usually not associated with other knee injuries.

## ■ ■ ■ Common Signs and Symptoms

- Pain, tenderness, or swelling (occasionally) over the tibial collateral ligament bursa on the inner knee
- Pain that may be worse with completely straightening the knee
- Crepitation (a crackling sound) when the tendon or bursa is moved or touched

## ■ ■ ■ Causes

- Unclear, although runners, tennis players, swimmers, and cyclists are more often found to have this problem

## ■ ■ ■ Risk Increases With

- Sports such as running, tennis, swimming, and cycling

## ■ ■ ■ Preventive Measures

- Unknown

## ■ ■ ■ Expected Outcome

This condition is usually curable within 6 weeks if treated appropriately with conservative treatment and resting of the affected area.

## ■ ■ ■ Possible Complications

- Prolonged healing time if not appropriately treated or if not given adequate time to heal
- Chronically inflamed bursa, causing persistent pain
- Recurrence of symptoms if activity is resumed too soon, with overuse, with a direct blow, or when using poor technique

## ■ ■ ■ General Treatment Considerations

Initial treatment consists of medication and ice to relieve the pain, stretching and strengthening exercises (particularly the quadriceps muscles), and modification of the activity that initially caused the problem. These all can be carried out at home, although referral to a physical therapist or athletic trainer for further evaluation and treatment may be helpful.

A knee sleeve or bandage may help keep the bursa warm during activity and reduce some of the symptoms. An injection of cortisone (to reduce the inflammation of the bursa) with lidocaine (to reduce pain and to confirm the diagnosis) into the bursa may be recommended. Surgery is rarely needed to remove the inflamed bursa and is usually only considered after at least 6 months of conservative treatment.

## ■ ■ ■ Medication

- Nonsteroidal anti-inflammatory medications, such as aspirin and ibuprofen (do not take within 7 days before surgery), or other minor pain relievers, such as acetaminophen, are often recommended. Take these as directed by your physician. Contact your physician immediately if any bleeding, stomach upset, or signs of an allergic reaction occur.
- Pain relievers are usually not prescribed for this condition, although your physician will determine this. Do not take prescription pain medication for longer than 4 to 7 days. Use only as directed and only as much as you need.
- Cortisone injections reduce inflammation, and anesthetics temporarily relieve pain.

## ■ ■ ■ Heat and Cold

- Cold is used to relieve pain and reduce inflammation for acute and chronic cases. Cold should be applied for 10 to 15 minutes every 2 to 3 hours for inflammation and pain and immediately after any activity that aggravates your symptoms. Use ice packs or an ice massage.

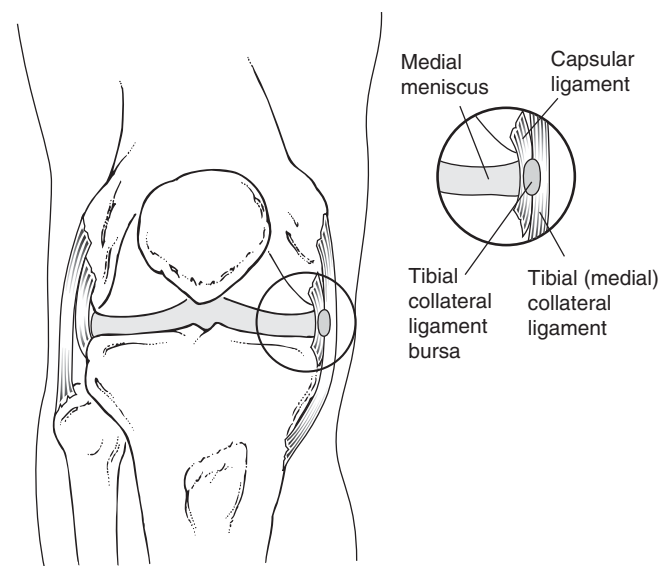


Figure 1

- Heat may be used before performing stretching and strengthening activities prescribed by your physician, physical therapist, or athletic trainer. Use a heat pack or a warm soak.

### ■ ■ ■ Notify Our Office If

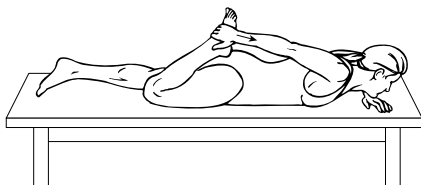
- Symptoms get worse or do not improve in 2 weeks despite treatment
- New, unexplained symptoms develop (drugs used in treatment may produce side effects)

## EXERCISES

### ➤ RANGE OF MOTION AND STRETCHING EXERCISES • Tibial Collateral Ligament Bursitis

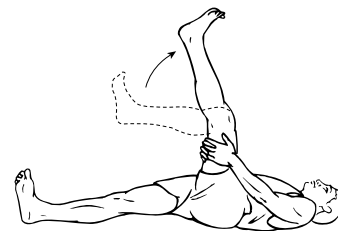
These are some of the *initial* exercises you may start your rehabilitation program with until you see your physician, physical therapist, or athletic trainer again or until your symptoms are resolved. Please remember:

- Flexible tissue is more tolerant of the stresses placed on it during activities.
- Each stretch should be held for 20 to 30 seconds.
- A *gentle* stretching sensation should be felt.



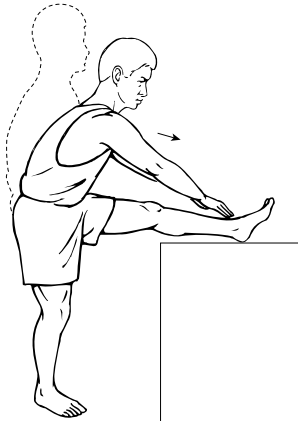
### STRETCH • Quadriceps, Prone

1. Lie on your stomach as shown.
2. Bend your knee, grasping your toes, foot, or ankle. If you are too “tight” to do this, loop a belt or towel around your ankle and grasp that.
3. Pull your heel toward your buttock until you feel a stretching sensation in the front of your thigh.
4. Keep your knees together.
5. Hold this position for \_\_\_\_\_ seconds.
6. Repeat exercise \_\_\_\_\_ times, \_\_\_\_\_ times per day.



### FLEXIBILITY • Hamstrings

1. Lie on your back with your leg bent and both hands holding on to it behind the thigh as shown.
2. Your hip should be bent to **90 degrees** and the thigh pointing straight at the ceiling.
3. Straighten out your knee as far as you can. Keep your thigh pointing straight toward the ceiling.
4. Keep the other leg flat on the floor.
5. Hold this position for \_\_\_\_\_ seconds.
6. Repeat exercise \_\_\_\_\_ times, \_\_\_\_\_ times per day.



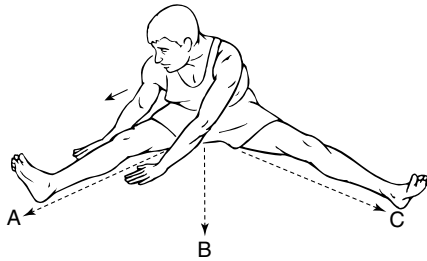
**FLEXIBILITY • Hamstrings, Ballet**

1. Stand and prop the leg you are stretching on a chair, table, or other stable object.
2. Place both hands on the outside of the leg you are stretching.
3. Make sure that your hips/pelvis are also facing the leg you are stretching.
4. Slide your hands down the outside of your leg.
5. Lead with your chest/breast bone. Keep your chest upright and back straight. Do not hunch over at the shoulders. Keep your toes pointing up.
6. You should feel a stretch in the back of your thigh.
7. Hold this position for \_\_\_\_\_ seconds.
8. Repeat exercise \_\_\_\_\_ times, \_\_\_\_\_ times per day.



**FLEXIBILITY • Adductors, Lunge**

1. Spread your legs wide while standing. Then assume a partial “squat” position.
2. “Lunge/Lean” away from the side you want to stretch, shifting your weight toward the bent leg.
3. Hold this position for \_\_\_\_\_ seconds.
4. Repeat exercise \_\_\_\_\_ times, \_\_\_\_\_ times per day.



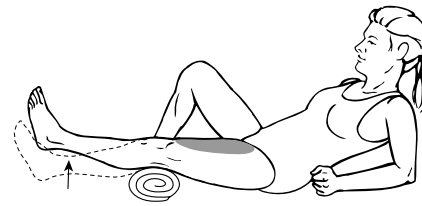
**FLEXIBILITY • Hamstrings/Adductors, V-Sit**

1. Sit on the floor with your legs spread as wide as possible in front of you. Your knees must be straight.
2. Lean over one leg with both hands. Keep your chest upright and reach for your toes. (Position A)
3. Hold this position for \_\_\_\_\_ seconds. Relax and return to your starting position.
4. Now reach forward between your legs. (Position B)
5. Repeat for Position C.
6. Repeat exercise \_\_\_\_\_ times, \_\_\_\_\_ times per day.

➤ **STRENGTHENING EXERCISES** • Tibial Collateral Ligament Bursitis

These are some of the *initial* exercises you may start your rehabilitation program with until you see your physician, physical therapist, or athletic trainer again or until your symptoms are resolved. Please remember:

- Strong muscles with good endurance tolerate stress better.
- Do the exercises as *initially* prescribed by your physician, physical therapist, or athletic trainer. Progress slowly with each exercise, gradually increasing the number of repetitions and weight used under their guidance.

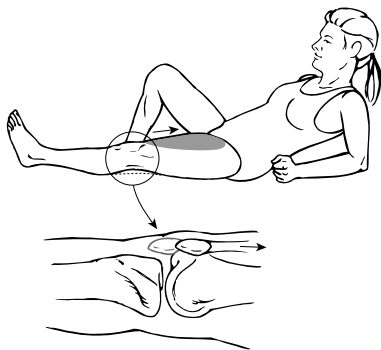


**STRENGTH** • Quadriceps, Short Arcs

1. Lie flat or sit with your leg straight.
2. Place a \_\_\_\_ inch roll under your knee, allowing it to bend.
3. Tighten the muscle in the front of your knee as much as you can, and lift your heel off the floor.
4. Hold this position for \_\_\_\_ seconds.
5. Repeat exercise \_\_\_\_ times, \_\_\_\_ times per day.

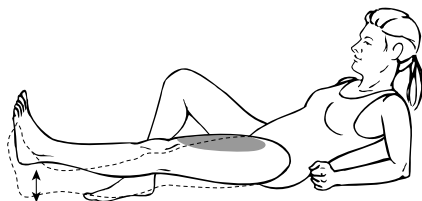
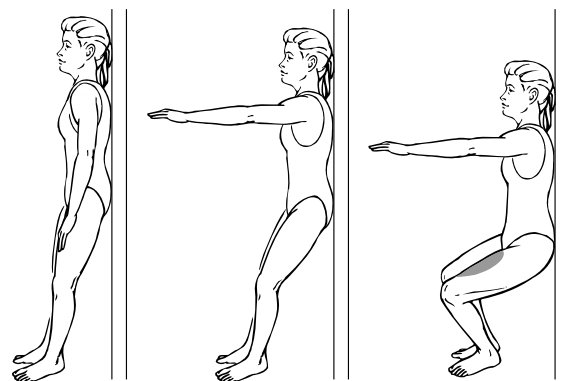
**Additional Weights: OK TO USE      DO NOT USE!!!**

**If okay'd by your physician, physical therapist, or athletic trainer, a \_\_\_\_ pound weight may be placed around your ankle for additional weight.**



**STRENGTH** • Quadriceps, Isometrics

1. Lie flat or sit with your leg straight.
2. Tighten the muscle in the front of your thigh as much as you can, pushing the back of your knee flat against the floor. This will pull your kneecap up your thigh, toward your hip.
3. Hold the muscle tight for \_\_\_\_ seconds.
4. Repeat this exercise \_\_\_\_ times, \_\_\_\_ times per day.



**STRENGTH** • Quadriceps, 7 Count

**The quality of the muscle contraction in this exercise is what counts the most, not just the ability to lift your leg!**

1. Tighten the muscle in front of your thigh as much as you can, pushing the back of your knee flat against the floor.
2. Tighten this muscle **harder**.
3. Lift your leg/heel 4 to 6 inches off the floor.
4. Tighten this muscle **harder again**.
5. Lower your leg/heel back to the floor. Keep the muscle in front of your thigh as tight as possible.
6. Tighten this muscle **harder again**.
7. Relax.
8. Repeat exercise \_\_\_\_ times, \_\_\_\_ times per day.

**STRENGTH** • Quadriceps, Wall Slide

1. Stand with your back against the wall. Your feet should be shoulder-width apart and approximately 18 to 24 inches away from the wall. Your kneecaps should be in line with the tip of your shoes or your second toe.
2. Slowly slide down the wall so that there is a \_\_\_\_ degree bend in your knees. (*Your physician, physical therapist, or athletic trainer will instruct you how to progress the amount of bend based on your symptoms and diagnosis.*)
3. Hold this position for \_\_\_\_ seconds. Stand up and rest for \_\_\_\_ seconds.
4. Repeat exercise \_\_\_\_ times, \_\_\_\_ times per day.

Notes:

(Up to 4400 characters only)

Notes and suggestions