



## COURSE 1.0 FUNDAMENTALS OF RUNNING INJURIES

(CPA Members code for 15% off: C1P5A)  
(Students get 50% off: email proof to [info@therunningclinic.com](mailto:info@therunningclinic.com))



Do you want to learn all the tricks for treating running patients, based on the latest research?  
Are you confused with all the questions injured runners ask?

This 2-day, 17-hour course covers all the fundamental aspects needed to effectively assess and treat runners. **Gait analysis** and retraining, **footwear** prescription, **mechanical stress quantification** (load management), **treatment** strategies for common running injuries, and so much more. Our flagship 1.0 course has been taught over 300 times in over 15 countries, since 2008.

After completing "Fundamentals of Running Injuries", **you'll feel confident assessing and treating injured runners**, have the answers to their questions, and will have access to countless new clinical tools to use in your practice!

*\* This course provides access to The Running Clinic's accreditation program (webinars, WebTV, updated course notes, listing on our website, etc.)*

[CLICK HERE FOR COURSE DATES & LOCATIONS](#)



## COURSE 1.1 DIAGNOSIS OF LOWER LIMB INJURIES: PRACTICAL ASPECTS

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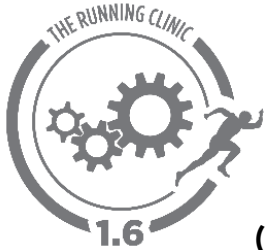
The wrong diagnosis may sometimes lead to the wrong treatment plan, and patients not getting better. Or worse, they may not even come back.

Any physiotherapist working with an orthopedic caseload will benefit from this 2-day, 16-hour course. You will learn a structured process to **streamline your subjective and objective assessment**, and **better diagnose** lower limb injuries, based on the latest science.

Perfect your differential diagnosis skills with **hands-on tests** and **case studies**. Get ready to hone your **clinical reasoning**, and get your patients on the right track better and faster!

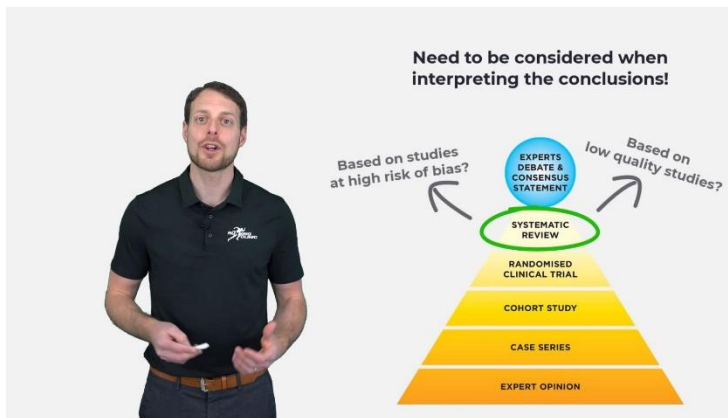
*\* This practical course will also give you exclusive access to over 70 videos of diagnostic tests.*

[CLICK HERE FOR COURSE DATES & LOCATIONS](#)



## COURSE 1.6 SCIENCE IN PRACTICE: APPLYING RESEARCH FOR CLINICIANS

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Need to be considered when interpreting the conclusions!

Based on studies at high risk of bias? →

← Based on low quality studies?

EXPERTS DEBATE & CONSENSUS STATEMENT

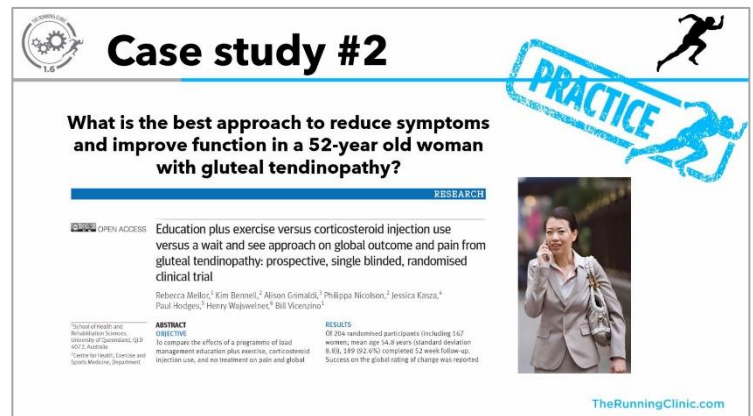
SYSTEMATIC REVIEW

RANDOMISED CLINICAL TRIAL

COHORT STUDY

CASE SERIES

EXPERT OPINION



### Case study #2

**What is the best approach to reduce symptoms and improve function in a 52-year old woman with gluteal tendinopathy?**

RESEARCH

OPEN ACCESS Education plus exercise versus corticosteroid injection use versus a wait and see approach on global outcome and pain from gluteal tendinopathy: prospective, single blinded, randomised clinical trial


Rebecca Mellor,<sup>1</sup> Kim Bennell,<sup>2</sup> Alison Grimaldi,<sup>3</sup> Philippa Nicolson,<sup>2</sup> Jessica Kosza,<sup>4</sup> Paul Hodges,<sup>5</sup> Henry Wajswilner,<sup>6</sup> Bill Vicenzino<sup>3</sup>

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**ABSTRACT**  
OBJECTIVE To compare the effects of a programme of load management education plus exercise, corticosteroid injection use, and no treatment on pain and global

**RESULTS**  
Of 204 randomised participants (including 157 women, mean age 54.9 years (standard deviation 6.8), 149 (92.6%) completed 12 week follow up). Successes on the global rating of change were reported.

**PRACTICE**



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Are you interested in using research, but can't understand it well enough to do so? Would you like to take your analysis to the next level?

Through eleven chapters (8 hours), clinician-researcher Jean-Francois Esculier, PT PhD, will help you **integrate evidence-based data into your clinical practice**. No useless jargon, only concepts that are accessible and useful, **explained in a simple way**, with case studies and articles analyzed for you.

After completing this course, you'll be able to **stay up to date on all the latest research**. Your patients will thank you for using the most recent evidence to guide their care!

*\* This course will help you get the most out of The Running Clinic's Journal Club, during which articles are analyzed using a clinical focus.*

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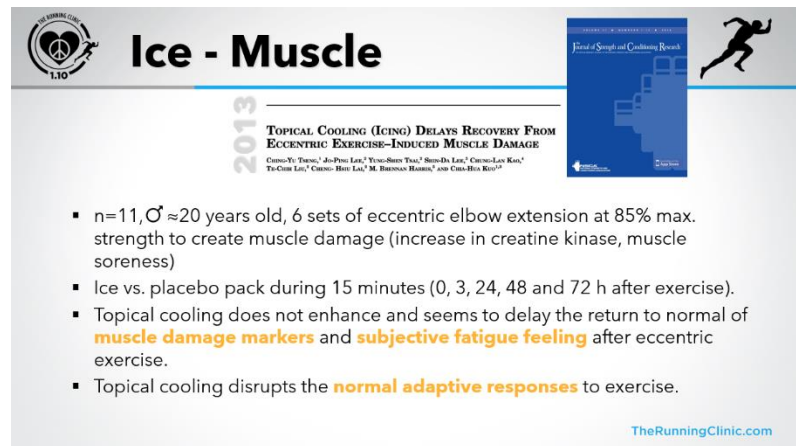




## COURSE 1.10 PEACE & LOVE: MANAGEMENT OF SOFT-TISSUE INJURIES

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- P**  **PROTECTION**  
Avoid activities and movements that increase pain during the first few days after injury.
- E**  **ELEVATION**  
Elevate the injured limb higher than the heart as often as possible.
- A**  **AVOID ANTI-INFLAMMATORIES**  
Avoid taking anti-inflammatory medications as they reduce tissue healing. Avoid icing.
- C**  **COMPRESSION**  
Use elastic bandage or taping to reduce swelling.
- E**  **EDUCATION**  
Your body knows best. Avoid unnecessary passive treatments and medical investigations and let nature play its role.
- &**
- L**  **LOAD**  
Let pain guide your gradual return to normal activities. Your body will tell you when it's safe to increase load.
- O**  **OPTIMISM**  
Condition your brain for optimal recovery by being confident and positive.
- V**  **VASCULARISATION**  
Choose pain-free cardiovascular activities to increase blood flow to repairing tissues.
- E**  **EXERCISE**  
Restore mobility, strength and proprioception by adopting an active approach to recovery.



**Ice - Muscle**

2019  
TOPICAL COOLING (ICING) DELAYS RECOVERY FROM ECCENTRIC EXERCISE-INDUCED MUSCLE DAMAGE  
Chen Y, Tansel J, de Pina L, et al. *British Journal of Sports Medicine* 2019;43(37):700-706. doi:10.1136/bjsm.2018.100000

- n=11, ♂ ≈20 years old, 6 sets of eccentric elbow extension at 85% max. strength to create muscle damage (increase in creatine kinase, muscle soreness)
- Ice vs. placebo pack during 15 minutes (0, 3, 24, 48 and 72 h after exercise).
- Topical cooling does not enhance and seems to delay the return to normal of **muscle damage markers** and **subjective fatigue feeling** after eccentric exercise.
- Topical cooling disrupts the **normal adaptive responses** to exercise.

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What should we recommend to patients who sprained their ankle, or those who injured a muscle? Former acronyms, like RICE and PRICE, are outdated and don't tell patients what to do after the acute phase of recovery.

This online course (6 to 8 hours) presents **all the science supporting the latest acronym, PEACE & LOVE**, created by The Running Clinic and published in the British Journal of Sports Medicine. Enjoy this **summary of findings** from over 80 randomized clinical trials, systematic reviews and expert consensuses, presented by Blaise Dubois, PT, and Jean-Francois Esculier, PT PhD, the authors of the acronym.

Get your patients on the right track using the latest science, because **soft-tissue injuries simply need PEACE & LOVE!**

*\* This course goes beyond the acronym by exploring related concepts such as therapeutic alliance, factors that predict clinical success, cost-effectiveness, overinvestigation, overmedicalization, etc.*

[\*\*CLICK HERE TO REGISTER\*\*](#)