

Royal Victoria Marathon
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October 12, 2008

October 11, 2009

Common Marathon Injuries and How To Prevent Them

- **Blisters** – Race in socks that you've trained in (and really, it's okay to wash them!). Often, thinner is better. Some runners find Vaseline between and around the toes helps, too. Another key is not racing in new runners (old isn't good either, see below). A month or so of use is perfect (the shoes, not the socks!).
- **Toenail Problems** – Everyone has heard the stories ("mine came off at 37k!" actually that is true...ouch). Proper shoe fit is key. Your toes should never feel the end of the shoe, except maybe going steeply downhill, when there is some slippage. Make sure your shoes are roomy enough, and this shouldn't be a problem. Consider a modest nail trim before racing, too, but not too short, that can cause another problem – ingrown toenails. Trim the big toe nails straight across. Your mother was right!
- **Heel Pain** – Often called "Plantar fasciitis" or inflammation of the thick band under the foot where it attaches to the heel bone. Common, often triggered by running in old shoes, increasing mileage too rapidly, weight gain, or too much barefoot contact with hard surfaces. Rest, ice, heel protection, new shoes and calf stretching helps in most cases.
- **Ankle Sprains** – Usually from stepping on uneven ground (can you say 'pothole'?) and rolling the ankle out (sole of foot in). Try to keep scanning ahead to watch for hazards. If you do roll your ankle, being unable to stand on that leg after means - seek medical attention.
- **Falls** – Easily done, in those last 10k especially, when the pain and fatigue (I mean, euphoria), really starts to hit. Hands, chins and knees usually take the brunt of these. Come and see us at the finish line medical tent, and we'll do our best to make you pretty again! Positive thinking (it's just a flesh wound!) will get you to the finish line. Of course, if you're really injured, we'll come and get you, and you get to go "first class"!
- **Hip Pain** – Also called "Trochanteric bursitis", causes sharp pain on the side of one or both hips, often the result of, again, old shoes (getting the message about old shoes yet?!), sudden increase in mileage, running on a slanted surface (i.e. only on the right side of the road, not in the center or near the left curb at times). Rest, ice, new shoes and hip/butt stretches and strengthening help to settle this in most cases.
- **Chafing** – Now this hurts, not so much during the race, but in the shower after. Usual places are inner thighs and underarms. Vaseline (they hold out sticks with Vaseline on one end at aid stations – don't mistake it for energy gels like others have done, really!) helps, as does "Body Glide", which looks like, but isn't, deodorant. Race in clothes you've trained in, so you'll be most comfortable.
- **"Stitches"** – Everyone's had these pesky sharp intercostal (between rib) or diaphragm (large muscle under the lungs) muscle cramps. Some find these techniques helpful: warming up before starting the run, breathing regularly and evenly while running, eating 2+ hours before running, or stopping and stretching the trunk "away" from the stitch. Another technique that I find works invariably is to run uphill and sure enough, the stitch is gone!

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- **Bloody Nipples** – We've all seen them, usually on unsuspecting men, especially if it has rained. Good old Band-Aids or fancy "Nip Guards" prevent this nasty phenomenon.
- **Marathon "Madness"** – When you cannot talk about or think about anything else but signing up for your next race. Glazed eyes, and exaggerated finish times are common. This is serious. Immediate attention is advised, along with some celebrations and/or libations. Congratulations! Sign up now for the 30th anniversary Royal Victoria Marathon in October 2009!

Written by Dr. Vanessa Young and Dr. Paddy McCluskey, Medical Directors, Royal Victoria Marathon 2008