

Overview

The commonest problem of the patella is patellar tendonitis. This is also called “jumper’s knee” and is common in people who perform jumping sports eg. basketball. It is felt to be due to repetitive overstretching of the patellar tendon where the tendon attaches to the patella itself, at the lowest point of the knee cap.

Rarely, the patellar tendon can rupture, associated with trauma such as a fall downstairs, usually with a bent knee.

Symptoms

Patellar tendonitis starts off slowly. Acute pain is felt on activity and is better with rest, ice etc. Later on, it can become more chronically painful, not settling with rest.

Treatment

If you have been assessed by a physiotherapist or myself as having patellar tendonitis, you must rest your knee. Particularly sporting activity will make it worse. You need to get the site of inflammation to settle by rest, ice, compression and elevation; anti inflammatory medication etc. before you go back to sport.

It is usual for me to send you to be supervised by a physiotherapist who will help you get the inflammation out of the knee, then slowly build up your fitness, back to sporting activity.

Sometimes injections are worthwhile. Surgery is occasionally required to help this condition but I would recommend a discussion about these options with me before you decide about surgical treatment for this condition.

If you would like to arrange a consultation or just need an informal chat, please contact me at:

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For general enquiries and advice,
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