



The Association of Paediatric Chartered Physiotherapists

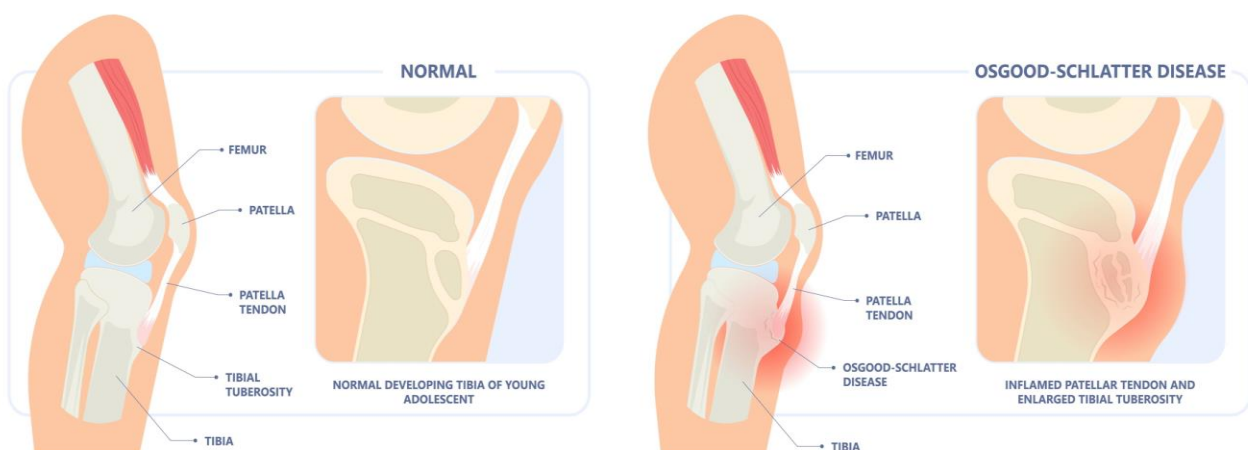
APCP Information – Osgood Schlatter / Traction Apophysitis

What is Osgood Schlatter / Traction Apophysitis ?

Osgood Schlatter is a term used to describe pain, in an area just below the knee on the lower leg. This can also be called a 'traction apophysitis'. It affects 1 in 10 young people and is often related to growing and being active. Having pain in this area is not dangerous and is a normal reaction to your body being overprotective.

What causes Traction Apophysitis ?

The large quadriceps muscle on the front of the thigh pulls on the kneecap (patella) and the patellar tendon, to straighten the knee. The patellar tendon attaches to the front of the shin bone (tibial tuberosity). It is thought that repeated stress and strain in this area (traction) from activities such as running, jumping, changing direction and kneeling can cause inflammation and pain (apophysitis).



OSGOOD-SCHLATTER DISEASE

What are the symptoms of Traction Apophysitis?

- Pain on the bony part at the top of the shin bone, below the knee
- There may be swelling over the bony area. As this improves, a hard bump may develop for some
- Pain may get worse during and after sport and usually appears around puberty (10-14 years) when you are having a growth spurt. Usually only one knee is painful, but both can be affected
- The diagnosis is often clear from the typical symptoms. No x-rays or scans are necessary

What is the treatment for Traction Apophysitis ?

In most cases you can continue with your activities but may need to find the right balance between physical activity and rest. Your physiotherapist can help you with this, for example:

- Reducing the amount of running and jumping you do
- Reducing how long you exercise for or how often you exercise
- Changing the type of activities you do, to lessen impact such as swimming and cycling
- A period of rest can often help symptoms if you are experiencing severe pain

Other things which may help manage your symptoms include:

- The use of an ice pack when sore or just after activity (follow instructions on the pack)
- Analgesia (as advised by your doctor or pharmacist)
- Stretching and strengthening exercises may be advised by your physiotherapist
- Taking Vitamin D which is good for bone health when growing as recommended by Public Health England and the World Health Organisation.

Will it get better?

Sometimes symptoms can last for 12-24 months and at the times, sport or physical activity can make your pain feel worse. Finding the right balance between pain and activity is essential. The pain usually goes away within a few months by following the advice given above. The good thing is sport or physical activity is not likely to cause any permanent issues or problems.

According to the World Health Organization (WHO):

- Children under 5 should engage in a variety of physical activities for a total of 180 minutes throughout the day
- Children and adolescents aged 5-17 should aim for an average of 60 minutes of moderate-to-vigorous aerobic activity per day, spread across the week

This leaflet has been produced after a review of literature and where there is a lack of evidence, a consensus of expert opinion is agreed, correct at time of publication.

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The Association of Paediatric Chartered Physiotherapists (APCP) is one of the CSP's largest Professional Networks and continues to thrive with a membership of over 2,900 paediatric members.

We encourage our members and support staff to work together to enhance the quality of life, wellbeing and independence of babies', children, and young people that we deliver care to.



The Chartered Society of Physiotherapy (CSP) is the professional, educational and trade union body for the UK's 64,000 chartered physiotherapists, physiotherapy students and support workers.



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