

# **Sports Injuries**

## **A Self-Help Guide**



**Second Edition**

**Vivian Grisogono**

# Sports Injuries

## *A Self-Help Guide*

Second Edition

**Vivian Grisogono**



Lotus Publishing  
Chichester, England

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First published in 1984 by John Murray (Publishers) Ltd. This second edition published in 2012 by Lotus Publishing, Apple Tree Cottage, Inlands Road, Nutbourne, Chichester, West Sussex, PO18 8RJ, UK.

**Anatomical Drawings** Peter Gardiner

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**Text Design** Wendy Craig

**Cover Design** Jim Wilkie

**Printed and Bound** in the UK by Scotprint

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**British Library Cataloguing in Publication Data**

A CIP record for this book is available from the British Library

ISBN 978 1 905367 28 3

For patient queries and practitioner communications, Vivian Grisogono can be contacted on [www.viviangrisogono.com](http://www.viviangrisogono.com)

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***“The power of the human body to heal itself is awesome.”***

**Dedication**

Dedicated, with thanks, to my family, friends, colleagues and patients.



# Injuries and Diagnosis

Injuries put you out. This book aims to help you recognize and deal with physical problems which occur through sport or everyday activities. It explains:

- what injuries are and how they happen;
- complications of injury;
- how you can help your doctor or practitioner make an accurate diagnosis;
- what you can do to help yourself;
- how rehabilitation works;
- which exercises are suitable for different injuries.

The information and advice are not substitutes for professional help. For any injury which prevents you from carrying out your normal activities you should consult a professional practitioner. If you are given advice which conflicts with the suggestions in this book, you must accept the word of the person treating you, or seek a further opinion through your doctor.

## Types of injury

Physical injuries can be classified into two main groups, traumatic and overuse, and further categorized as extrinsic and intrinsic.

### Traumatic injuries

Accidents happen suddenly, and there are immediate effects – perhaps pain, swelling or bleeding. Disorientation and shock can follow shortly afterwards if the accident is serious enough.

Traumatic injuries can happen in two ways: an extrinsic traumatic injury has a recognizable cause, such as a blow, kick or fall; an intrinsic traumatic injury is equally sudden, but its cause is not immediately apparent. A typical example is an Achilles tendon rupture (p. 76), which can occur seemingly out of the blue.

There are three phases in a traumatic injury: the acute phase just after the injury has happened, which lasts a few days; the subacute phase, from about ten days up to four or six weeks; and the chronic phase, when the injury is long-standing and lasts for weeks, months or even longer. In the acute phase the initial pain can be severe, settling quite quickly, or there is little pain at first, but it may increase over the following hours. Through all the phases, the amount and type of pain are often affected by your posture and activities, as well as the degree of damage and inflammation. Very often there is a throbbing feeling. There may or may not be pain at night or when the injured area is at rest.

Sports which involve explosive movements, contact, speed and the possibility of falling or getting hit can give rise to trauma. Such sports include racket games, sprinting, hurdling, steeplechasing, pole vaulting, soccer, American football, rugby, handball, basketball, baseball, cricket, volleyball, field hockey, lacrosse, water polo, karate, tae kwon do, boxing, judo, wrestling, cycle-racing, trampolining, roller blading, skateboarding, horse riding, rock climbing, hang gliding, motor racing, skiing, ice skating, ice hockey and gymnastics.

### **First aid**

Basic first aid should be part of general education. Health professionals, sports coaches and PE teachers in many countries are required to have annual certificates in first aid and life-saving. Life-threatening accidents are rare, but when they happen you need to respond quickly.

As well as recognizing which accidents should be treated as emergencies, every adult involved in sport should be able to deal with minor injuries at any time. A sports kitbag should always include basic first-aid items, especially for dealing with cuts and bruises.

### **Overuse injuries**

Overuse or misuse injuries are intrinsic. They happen through overdoing a particular sport or repetitive activity, poor technique, fatigue, dehydration, excessive heat or cold, or inappropriate equipment. Typical examples include shinbone stress fracture (p. 89), 'shin splints' (p. 90), 'tennis elbow' (p. 279) and 'runner's knee' (p. 103). Overuse injuries are most associated with sports involving repetitive movements, such as running, rowing, canoeing, swimming and cycling, but almost any sport can give rise to overuse, including racket games, throwing events, cricket, golf, fencing, archery, baseball, handball, water polo, sailing, pole vaulting, gymnastics, powerlifting and tug-of-war.

Overuse injuries usually start gradually, which is known technically as 'insidious onset'. There is no acute phase. The first sign is pain felt during or after the activity, perhaps at night or the following morning. If you continue the activity which has caused the problem, the pain gradually gets worse and eventually you have to stop. After a few days' rest you may think the problem has gone, but it returns quickly if you restart your sport without having resolved it.

If an overuse injury is allowed to develop to a chronic phase, the pain increases and starts to interfere with other movements or activities besides the one which caused it. In the case of a stress fracture the bone will not heal if you keep trying it out too soon, and there is a risk that the bone might break altogether.

## Injury signs and symptoms

Clinical signs are the injury effects which can be seen or judged objectively, such as bleeding, bruising, swelling, skin colour changes, limited joint movement, muscle wasting (atrophy) and broken bones. They show up when a practitioner examines the injured area, or through diagnostic tests such as X-rays, scans, arthrograms or blood tests.

Injury symptoms are more subjective, although they may overlap with the objective signs. Symptoms are what you feel in the injured area, which may be tingling, numbness, stiffness, temperature changes or pain.

Two important effects of injury are pain and swelling.

### Pain

Pain is a warning that something is wrong in the body. Its technical name is 'nociception', meaning your awareness of an unpleasant sensation. Pain is not an accurate guide as to what has happened, or how bad an injury might be. Pain nerves are arranged to function in complex ways. Where you feel the pain is not necessarily where the damage is.

The surface layers of the skin are more sensitive than the deepest layers, so a superficial cut, burn or ligament tear is often more painful than an injury which penetrates more deeply. Pain nerves spread out so that different tissues are served by the same nerve. This means that a problem in one part of the body can transmit pain to another part. This is called 'referred pain'. For instance, injuring your lower back can cause sciatica (p. 219), while a whiplash injury in the neck can transmit symptoms down your arm (p. 227).

People react differently to pain and have different pain thresholds. Stress, fear and a poor diet can all make a pain feel worse. A pain which worries you or is truly agonizing dominates your thinking and can prevent both mental and physical activities.

### Swelling

Swelling is generally extra fluid which can form anywhere in the body as a result of injury, infection, disease, inflammation or disruption to the circulation. Fluid which forms as a result of injury is usually tissue fluid, blood, or synovial fluid, and is called fluid exudate. Blood in a joint is called a haemarthrosis. If blood forms an internal bruise it is a haematoma. An accumulation of tissue fluid is called oedema. When swelling consists of extra lymph fluid, it is known as lymphoedema. If the skin becomes dented when you press your finger into a swollen (oedematous) area, it is called pitting oedema.

Swelling gathers rapidly or slowly. It can look massive or slight on the surface. It can feel hot, cool, soft or firm to the touch. Swelling tends to track downwards under the influence of gravity, towards the foot from the leg, to the hand from the arm. This is called gravitational swelling.

When it appears in the early stages of an injury, swelling reflects the damage and inflammation. However, it can last beyond the healing stages. Chronic swelling can cause stiffness in the affected area, but is usually painless. It is a sign that the circulatory system has not yet recovered its efficiency and is not necessarily an indication that something is wrong.



If a painful hot swelling appears suddenly, especially in one or more joints, it can be a sign of an inflammatory condition such as rheumatoid arthritis (p. 12), infection (p. 13), or food intolerance (p. 11). This kind of swelling can occur out of the blue, or can coincide with an injury.

## Complications

Injuries normally heal through natural processes. However, occasionally there are complications which delay healing. There may be hidden damage which was not obvious at the time of injury. Some complications are directly linked to the injury, including hidden organ damage, hidden tissue damage, non-healing, ischaemia, avascular necrosis and reflex sympathetic dystrophy. In other cases injuries are complicated by underlying conditions, such as food intolerance, circulatory problems, organ problems, inflammatory conditions and illnesses. Occasionally these conditions mimic injury pain, even when you have not hurt yourself.

### Hidden organ damage

A direct blow or wound to the head or trunk carries the risk of damage to the organs, including the brain, spinal cord, spleen, kidneys, liver and heart.

#### Self-help for hidden organ damage

If there is any danger that you might have suffered internal damage or bleeding, you should be kept in hospital under observation for a suitable period of time, which is usually one to three days, depending on the circumstances.

### Hidden tissue damage

Joint and soft tissue injuries such as a sprain or strain can be complicated by a subtle tear deep inside the tissues. Sometimes small slivers of bone or cartilage, known as 'loose bodies', form inside a joint. They usually cause a clicking sound when the joint moves, and occasionally block joint movement.

Joint damage can also lead to osteochondritis (osteochondrosis), or inflammation in the bone cartilage surfaces. If flakes of bone cartilage break off, the condition is called osteochondritis dissecans, which occurs particularly in the elbow and knee. If a ligament or tendon is badly strained near its attachment to a bone, a little bony outcrop – technically called an exostosis, spur or osteophyte – can appear at the edge of the bone. Small flakes of calcium can form in a soft tissue, causing irritation, and in a tendon this is termed calcific tendonitis. Following a muscle tear, bone fragments can form within the muscle tissue, causing pain and limitation of movement. This is myositis ossificans, and is most common in the front-thigh muscles (p. 122) and around the elbow (p. 282).

In children trauma can cause damage to the edges of the bones, rather than the soft tissues. Children often suffer avulsion fractures or epiphysis damage in situations which would cause ligament, tendon or muscle tears in an adult. Sometimes the diagnosis of bone damage is missed.

#### Self-help for hidden tissue damage

If your injury is not progressing as it should within a reasonable time frame, you should refer back to your practitioner in case there is damage which was missed at the time of your original assessment, or there is a problem which has arisen during the course of your recovery.

## Non-healing

Broken bones sometimes fail to unite properly within a normal time frame. When a bone is slow to mend, the problem is termed 'delayed union'; when it fails altogether, it is 'non-union'. Non-union can happen in any broken bone, but is a particular risk if you break a bone with a poor blood supply, such as the talus in the ankle or the scaphoid in the wrist. Different factors contribute to delayed or non-healing, including mineral deficiency, infection and bone disease.

### Self-help for non-healing

You should refer to your specialist for specific treatment and advice relevant to the cause of your problem. Generally, you should eat a healthy diet and avoid foods and drinks which might reduce body calcium. If in doubt, seek help from a professional nutritionist. If you smoke, you should stop, or at least cut down. You may need an operation to stabilize the fracture, treat an internal infection or stimulate bone growth.

## Ischaemia

Sometimes an injury causes pressure on one or more arteries, leading to loss of blood flow in the injured area. An artery can be blocked or occluded by damage from broken or dislocated bone ends, and this is classified as Type I ischaemia. Type II ischaemia describes blood flow problems caused by internal bleeding or tissue swelling pressing on the artery, as in compartment syndrome, which can happen as an acute or overuse injury in the lower leg (p. 91) and the forearm (p. 278).

Interruption of the blood flow usually causes loss of the normal pulses and skin colour, and can result in severe pain, deformity, joint stiffness, muscle tightness and muscle shortening in the area normally supplied by the damaged arteries. When Type II ischaemia causes deformity and dysfunction in the arm or leg following an injury, the problem is known as Volkmann's ischaemic contracture.

### Self-help for ischaemia

If you have suffered a traumatic injury which carries the risk of damaging the arteries, especially around the elbow, you should remain in hospital under observation for about 72 hours. If you develop the symptoms of arterial occlusion, you may need surgery by a vascular specialist to mend the damaged artery. If the ischaemia has been caused by compartment syndrome, you may need an operation called a fasciotomy to release the pressure which has blocked the blood flow.

## Avascular necrosis

When a bone loses its blood supply, the substance of the bone can degenerate and bone cells die. The condition is called avascular necrosis or osteonecrosis, and it can follow bone fracture. It can affect any bone, including the talus in the ankle, the medial condyle of the femur at the knee, the head of the femur at the hip (p. 153), the top of the humerus at the shoulder, and the scaphoid in the wrist. Many different factors might contribute to the condition, including steroid use, alcoholism, circulatory problems like thrombosis, diabetes, certain medicines, some arthritic conditions including rheumatoid arthritis, and the pressure changes involved in deep-sea diving.

**Self-help for avascular necrosis**

If you develop a nagging deep pain with increasing stiffness following a bone fracture or dislocation, you should refer to your doctor or specialist. You may be sent for a magnetic resonance imaging (MRI) scan or possibly a bone scan, as X-rays usually look normal in the early stages of avascular necrosis. You should avoid painful activities, but you will probably be advised to do exercises to improve the blood supply to the affected area. Sometimes electrical stimulation is also used. The damaged bone might regenerate, but, if not, surgery may be recommended. You should take care of your diet, with help from a professional nutritionist or dietician if necessary. Avoid alcohol and smoking.

**Reflex sympathetic dystrophy (RSD)**

Reflex sympathetic dystrophy (RSD) is also known as causalgia, complex regional pain syndrome (CRPS) or Sudeck's atrophy. Its exact cause is not certain. RSD is a condition which can arise following apparently minor injuries. It can also follow operations, illnesses, including heart disease and breast cancer, and neurological conditions such as stroke or multiple sclerosis. It has been associated with taking barbiturates or drugs to treat tuberculosis.

RSD tends to occur mainly in the extremities. If it affects the foot, it can spread up the leg to the knee and even beyond. From the hand it can affect the elbow and then travel up to the shoulder. It can happen at any age, but is least common in very young children. It is more likely to happen in people who are anxious and tense, whether about their injury or generally. The condition is defined by its symptoms. The diagnosis is often missed in the early stages.

**Symptoms of RSD**

The affected area stops functioning normally. The skin over the affected area often turns a deep purplish-red colour, which is especially noticeable when you change position, for instance putting your foot to the floor as you get out of bed. At other times the skin may be unusually pale and shiny. It may feel clammy and sweaty, either hot to the touch, or abnormally cool. The skin hairs can disappear, or in some cases grow at an unusual rate.

Unusual, unexpected pain is characteristic. There is increased pain after or during even moderate exercise. The area becomes abnormally sensitive to the touch. Joints become tender and ever stiffer, while the muscles weaken, waste and tighten. If the condition develops, the bones in the area become thinner and weaker, and the nails of your fingers or toes may stop growing normally.

**Treatments for RSD**

Treatment is sometimes directed at the affected area, but this may aggravate the symptoms. The alternative is to activate the whole body, without emphasis on the painful part. For instance you can do exercises for the thigh and hip region when the foot is affected, or for the shoulder and upper arm if the problem is the hand. In all cases massage and acupuncture to the shoulder blade region can be helpful. Many RSD patients benefit from psychotherapy to alleviate underlying tension.

Individuals differ in their responses to the various treatments which might be offered for RSD. Some treatments are drastic, others more subtle. It takes time and patience to recover from RSD, and full recovery is always possible.



**Self-help for RSD**

- Look after your circulation (p. 27).
- Reduce stress.
- Practise relaxation techniques and deep-breathing exercises (p. 31).
- Keep your diet simple, and avoid irritants, especially caffeine and alcohol.
- Watch out for symptoms of food intolerance (p. 11).
- Find the right practitioner or team.
- If you are offered interventions like injections or surgery, make sure you are fully informed of the pros and cons.
- When you are confident you have found the right treatment or combination of treatments, follow the instructions to the letter.
- Always discuss with your practitioner(s) any fears or problems relating to the treatment.

**Food intolerance**

Food intolerance is an adverse reaction to foods, drinks, additives or preservatives. It is similar to allergy, but, unlike allergy, it is neither consistent nor constant.

Food intolerance can cause a wide variety of symptoms, including stiffness, swelling, heat and/or pain in one or more joints; muscular ache or cramping; nausea; vomiting; headache; skin blemishes; dry cracked skin, especially round the fingertips; irritability at the fingertips which makes you want to chew at the skin; eye soreness or dryness; and nose bleed. In children food intolerance is thought to be linked to hyperactivity. Gout can be considered a type of food intolerance.

Certain foodstuffs, artificial additives and preservatives are potential irritants. High-risk are caffeine, refined sugar and flour, dairy products, chocolates, acidic fruits like oranges and tomatoes, and spices. You can become intolerant to almost anything, including foods or drinks you are used to and which you consider healthy. Eating a lot of one type of food can lead to intolerance, for instance if you have a limited diet in which you eat and drink the same few things every day, or if you eat a lot of fruits such as plums or oranges because they are in season. Illness, infection, overtiredness and stress can make you more sensitive to potential irritants.

**Self-help for food intolerance**

- Keep a record of your food and drink intake and your symptoms.
- Eat regular, varied meals.
- Include plenty of fresh vegetables and non-irritant fruits in your diet.
- Eliminate any suspect foods or drinks.
- Avoid processed foods.
- Drink plain water regularly throughout the day.
- Avoid fruit juices and fizzy drinks.
- Avoid alcohol and caffeine.
- Do deep-breathing and relaxation exercises to reduce stress (p. 31).
- Rest and recover fully from any infection before resuming physical exercise.

## Circulatory problems

Conditions, medicines and performance-enhancing drugs which affect the circulation can affect your muscles, especially in the calf and lower leg. You may get cramp-like feelings which seem like a muscle strain, even if you have done little or no exercise. There is tightness in the leg muscles, which makes you more vulnerable to injury when the muscles are stressed by activity.

Blood clots can form in the blood vessels for a variety of reasons. They are a risk factor following major injuries or complicated surgery, but can also happen in the leg veins if you sit still for too long, especially on a long-haul flight. When a blood clot forms in a vein there is usually a localized tender area, and a consistent sharp pain. The area may feel swollen, hardened and sometimes hot to the touch. A clot which forms in one of the deep-lying veins is called a deep vein thrombosis (DVT). If part of the clot breaks off, it is called an embolism. A pulmonary embolism is a clot which has lodged in the lungs, and is potentially fatal.

### Self-help for circulatory problems

- Refer to your doctor or specialist as quickly as possible.
- Look after your circulation (p. 27).

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*Tip: Taking aspirin can help your arterial blood flow, but does not help to prevent venous blood clots.*

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## Pain from the internal organs

Organs can transmit pain to the surface of the body: stomach problems can give rise to pain just under the left shoulder blade; spleen problems can cause pain in the left shoulder; inflammation of the diaphragm, liver abscess or gastric ulcer can cause pain over the right shoulder region; while the liver itself and the gall bladder can reflect pain just below the right shoulder blade. Heart conditions can cause pain round the left side of the chest to the sternum (breastbone), and down the left arm to the little finger.

### Self-help for internal problems

- Make a note of all your symptoms.
- Rest.
- Alter your diet, if it seems relevant to the problem.
- Consult your doctor, who will refer you to an appropriate specialist for tests and treatment, if necessary.

## Pain from inflammatory conditions

Inflammatory conditions like rheumatoid arthritis cause joint pain and swelling. In the early stages a sports player may not be aware of having a disease, and may confuse the symptoms with injury.

### Self-help for inflammatory conditions

If you notice unexplained pain, swelling or other symptoms affecting your joints, try to work out what the cause might be. Seek specialist help through your doctor. Do not undertake heavy work or strenuous exercise. Changing your diet may make a difference to your symptoms. Simple measures may help, such as applying cold flannels or compresses with arnica or heparinoid cream (p. 29).

## Pain caused by illness and infection

Pain can be caused or aggravated by viral and bacterial illnesses such as flu, glandular fever, meningitis and pleurisy. In many cases pain is felt around the neck, shoulder and chest regions, often accompanied by marked stiffness. Sometimes there is also aching or cramping in the calf muscles. The symptoms start unexpectedly, not always after physical activity. The pain and stiffness precede the symptoms of illness, such as a raised temperature, sore throat, swollen glands, cough or runny nose, which can appear as much as two weeks later.

More rarely, serious illnesses, including some cancerous tumours, can start with symptoms such as pain or swelling which mimic injury.

Bacterial infections which have been introduced through cuts in the skin or sexual contact can cause injury-like pain and swelling, especially in joints. You may have a raised temperature at the same time.

Gum disease not only causes toothache and pain in your mouth, but can also be linked to heart problems, stroke and females giving birth prematurely.

Ignoring the warning signs is dangerous. If you do strenuous exercise when you have an infection, you risk inflammation around or in the heart (pericarditis or myocarditis), or even sudden death.

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*Tips: Keep your anti-tetanus injections up to date. If you travel to areas of risk, make sure you have the recommended inoculations against diseases such as malaria. If you do water sports in polluted areas, carry written advice about Weil's disease (leptospirosis) to show to the casualty doctor, in case you are taken ill after falling in.*

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### Self-help for illness or infection

- Stop or reduce all physical activities, especially if you have a raised temperature.
- Seek professional advice from your doctor or dentist, according to the symptoms.
- Rest lying down as much as possible during each day. Stay in bed if your symptoms are severe.
- Keep away from other people if you have an infectious illness.
- Never self-medicate with pharmaceutical, homeopathic or herbal remedies: always take professional advice.
- Do not do sport or demanding exercise while you are taking medicines, especially antibiotics.
- Allow several days after finishing a course of medicine so that your immune system regains strength before you take up sport again.
- Check your pulse first thing in the morning: if it is higher than normal and you feel tired or unwell, avoid strenuous exercise.
- Restart sport gradually and build up in easy stages.
- Allow rest phases in your daily schedule.
- Cut back physical activities immediately if you have signs of a recurrence of the illness or infection.