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DRUM CLINIC Injury focus 1: Tendonitis

A look at one of the most common drumming injuries and how to treat and prevent it

hroughout this series, the threat of injury has often been used as a deterrent against bad practice, as we have focused on the way we set up our kit and how we use our body to play the drums. It is now time to examine exactly what these injuries are, how to spot them, how to treat them and most importantly, how to prevent them.

The drum kit is arguably the most physically involving instrument to play and often, 'for the music', we will push the limits of our construction beyond what is safe. As in sport, picking up an injury might put us out of action, which for a musician would mean having to cancel or deputise important gigs and sessions, damaging our career or worse, ending it prematurely.

The British Association for Performing Arts Medicine is an organisation that provides specialist treatment for musicians. There, registered osteopath and professional singer Jennie Morton works with drummers and other performing artists, applying her expert understanding of the physiology of drumming. Over the next two Drum Clinic articles, she will be helping me to shed some light on some typical drumming-inflicted problems. Amongst poking yourself in the eye or whacking your kneecap with a drumstick, tendonitis (or tendinitis) is one of the more common drumming injuries.

Tendons are tough bands of fibrous, inelastic tissue that serve to attach muscles to bones. They transmit the forces of those muscles into the bony attachment and therefore are normally the site of the symptoms (pain) of muscle overuse. Tendonitis is the resulting inflammation of the tendon.

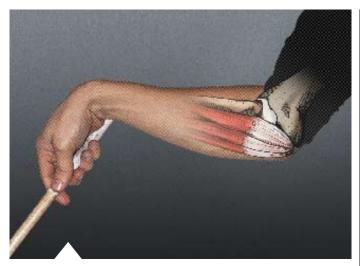


INSTITUTE

YOUR TUTOR JENNIE MORTON www.bapam.org.uk

1 Where?

Tendonitis can occur in any tendon of the body, but for drummers the usual sites are the common wrist flexor and extensor tendons that attach just above the elbow. Several muscles insert into these two tendon insertions and excessive tension of these muscles can exert a huge force, which all ultimately culminates at these very small points on the bone.



MEDIAL EPICONDYLITIS (Golfer's Elbow)

The muscles that flex the wrist (ie: pull the hand upwards towards the inside of the elbow, as when gripping something or to play a down-stroke) are the Wrist Flexors, which attach just above the elbow on the side nearest the body.



LATERAL EPICONDYLITIS (Tennis Elbow)

The muscles that extend the wrist (ie: pull the hand backwards towards the back of the elbow as when playing the up-stroke), are the Wrist Extensors which attach just above the elbow on the side furthest away from the body.

DRUM CLINIC ERGONOMICS AND TECHNIQUE

2 Causes

Posture

Poor postural habits will lead to excessive muscle tension and can have the effect of increasing the load on the arms. As the arms extend away from the body to play, muscle tension must increase to fight the effects of gravity. The positioning of the head, neck and back is therefore important in providing support to the arms.

To begin playing much more regularly, for longer periods or with more power, such as practising for a performance or beginning a tour or residency, can be too demanding on our muscles and could easily lead to a tendonitis injury. Changing to either heavier or lighter sticks can also lead to problems. Changing to a lighter stick often leads to using more force to compensate for the lack of weight, whilst drummers who change to a heavier stick are often inclined to then use too tight a grip.

Holding excessive tension in our bodies while we play increases the wear and tear on muscles and joints. Two sets of muscles are needed in order for a joint to function. One set will contract and shorten, while the muscles on the other side of the joint relax to lengthen. Co-contraction is an example of 'excessive muscle tension', where muscles on both sides of a joint contract together, restricting the movement of that joint. This excessive tension is not just the product of poor technique, but also a common reaction to stress - anxiety and fatigue can also be factors that will lead to co-contraction and its risk of injury.



3 Prevention

A good place to start is with your kit set up. It is important that we design a set-up that will not lead to us holding unnatural posture or contortions of the limbs. Rather than constantly fighting gravity, try lowering drum and cymbal positions where possible and hinge from the hips to gain extra reach as an alternative to extending out the arms.

Setting up mirrors in your practice space will help you check on your postural habits, but as discussed earlier in the series, a teacher of the Alexander Technique will not only be able help improve your posture and balance but will also help us manage tension, using various relaxation techniques.

Developing our technical facility is vital for performance to not only be musical, but also economical and therefore safe. A relaxed grip, along with learning to allow and work with the natural rebound of the stroke, reduces workload on the arms. Gladstone and Moeller techniques are just two examples of many techniques and concepts that drummers might choose to employ so that they can perform more efficiently.

Being able to let technique do the work for us makes all the hours of practice worthwhile. However, some practice sessions can be just as rigorous as a gig – planning rest periods within and between practice sessions is necessary for the body to recover. The brain needs time to store new movement patterns and muscles need plenty of rest periods to strengthen and adapt to increases in load. Specific warm-ups and stretches for the muscles that we use to play should also become a part of practice and performance

Specific warm-ups and stretches for the muscles that we use to play should become a part of practice and performance routines





Kit set-up, efficient technique, warmup excerises and hydration are a few of the things that will help prevent unnecessary muscle strain



routines. This will allow the muscles to become supple and will increase circulation so that they receive an adequate oxygen supply once we begin playing. It is also important to stretch and warm-down after playing, to release any muscle tension that may have built up and allow the circulation of blood to flush out the waste products produced by the muscles during activity. Try using the warm-up exercises on this month's *Rhythm* CD.

Staying hydrated is also helpful in diluting and flushing the chemical waste products that the body produces during physical activity. We can work to maintain the health of body tissues by keeping a healthy diet, as Jennie strongly encourages that we give the body the nourishment it needs the way nature intended, rather than relying on dietary supplements such as glucosamine, which may

Treatment

The treatment of a tendonitis injury will always rest mainly with identifying the cause and addressing that. This is why it is always best to seek professional advice from someone who can not only treat the problem, but has knowledge of specific technique and environmental issues related to drumming.

Steps to take when injury occurs:

When the tendonitis first flares up, rest the area and apply an ice pack for 10 minutes over the attachment site above the elbow a couple of times a day or after use.

2 If the problem doesn't resolve, then professional advice should be sought as soon as possible to prevent the injury becoming a long-term issue.

For temporary relief or to get through a gig/exam, a tennis elbow strap may be useful. This is a tight Velcro band placed below the site of the tendon injury in order that the forces from the muscles stop at the level of the strap and are not transmitted into the tendon attachment site, giving it a chance to heal. This should not, however, be used as a long-term measure.

have negative side-effects.

Next month we will continue our study of drumming injuries by taking a look at Carpel Tunnel Syndrome. In the meantime, if you would like to know more about The British Association for Performing Arts Medicine, check out their website: www.bapam.org.uk. **R**