

Chinese Traditional Medical Therapy in Common Chronic Upper Limb Strain of Table Tennis Players

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This paper presents an investigation made during the training period of two World Championship Competitions. Among 52 players of the national table tennis team, there were 16 suffering from shoulder strain (19 positions), 6 elbow strain, 8 wrist strain. They said that when they moved hard, the reaction was obvious. When the movement was mild, it became moderate. After treated with massage for 5-50 times, symptoms disappeared. If they had more training, symptoms appeared again. Treatment had no influence on players' training.

1. Shoulder strain

There were 6 cases of tenonitis of biceps brachii, 6 of deltoid strain, 4 of tenonitis of triceps brachii and 3 of rotator cuff strain. Courses were from 6 months to 6 years (average 2.59 years). Courses of treatment were 5 to 30 times (average 16.6 times).

It's quite common that table tennis players were suffering from deltoid strain. This is because of thousands of lifting and smashing in their training. To do lifting and smashing movements, a quick attacking player makes his upper arm introverted and extroverted rapidly. This, therefore, brings about strain of front and medium parts of deltoid muscle easily. While a player completes loop driving movements, he first makes his upper arm stretching backward, then rotating, and finishes with 120 degrees of stretching out. After that he begins another movement when his arm returns to the original posture rapidly.

Other three strains are similar to what I mentioned above.

Massage:

1. Looking for reaction points by relaxing muscles of shoulder or other parts.
2. Using different maneuvers according to specific conditions: Deltoid: Squeezing, pressing and pinching Biceps brachii: Pulling and stretching Triceps brachii: Rubbing and molding
3. Using thumb or hand bottom to rub musculi supraspinatus, infraspinatus, teres major, teres minor, patientiae, trapezirus.
4. Using digital acu-point pressure on Tianzong, Jianzhen, Jianyu, Quchi, Waiguan and Jianjing. Or give acupuncture.
5. relaxation: Holding the strained arm and making the shoulder tremble in the doctor's other hand.
6. Application of Chinese traditional medicine.

Note:

1. When massaging, it is desirable to be soft at first and hard later.
2. In the case of short course and minor strain, the treatment varies. Do not use hard pressure for those short course and minor cases. But do use hard pinching in treating serious cases.
3. The duration of treatment depends upon the doctor. If using hard pressure, it takes 20-40 seconds. Or it takes one minute or longer when using light force. Do this several times until the strained part becomes soft.
4. For those serious cases, it is better to touch and rub softly. But the doctor may use hard pressure in treating so as to get better result.
5. If there are two or three strains, it is good to use digital acu-point pressure and treat them one by one.

2. Elbow strain

It is mainly external humeral epicondylitis. There have been rapid development in table tennis games and the players have increased back hand training. Attacking players have more work to do in back hand half volley with push, back hand attack and back hand loop drive. While defensive players have more training in back hand cut and back hand attack. Therefore, muscles, ligaments and joint capsule of upper arm are torn by the impulsive force emerging from the ball. On the other, the forearm is pronated hard-ly. Both bring about external humeral epicondylitis. The survey presents six cases. Courses were from 2 months to 2 years (average 10.3 months) and the treatment were 10 to 50 times (average 25 times) with very satisfactory results.

Massage:

1. Relaxing the muscles of forearm and biceps brachii
2. Rubbing, molding and pressing brachioradial muscle.
3. Pinching and rubbing humeral epicondylitis muscle.
4. Using digital acu-point pressure on Quchi, Waiguan, Jianyu and Tianzong. Or give acupuncture.
5. Application of Chinese traditional medicine.

Note:

Do not use your force too hard or the reaction will be great. The bad effect will certainly influence the training. It is desirable to be very soft and the doctor must pay high attention to the patient.

3. Wrist strain

It is mainly fibrocartilaginous disc of wrist. The forearm of the player stretches to its utmost for thousands of times and the distal radioulnar joint is tended to be separated and the fibrocartilaginous disc of wrist is torn. This paper presents 8 cases. The courses were one to six months (average five months) and the treatment was 5-30 times (average 15.2 times).

Massage:

1. Relaxing the muscles of the forearm and looking for the reaction points. Usually the aching points are lower distal radioulnar joint and processus styloideus of ulna.

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2. Pinching, rubbing and molding aching points hardly.
3. Using digital acu-point pressure on Tianzong, Waiguan, Hand-wangu, Zongzhu, Lingdao and Tonli.
4. Holding the wrist with two hands and waving and pulling.
5. Meanwhile, application of Chinese traditional medicine.

Note:

It is desirable to arrange a reasonable training. Fixing the wrist joint with rubberized tape. Less movements for stretching forward and softly massaging.

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