

sport-kine.lu newsletter

since 1985 the science of healing and the art of caring



AGENDA:

14 mars à 19h00

Applications des greffes ostéocondrales au poignet et à la main

Dr Thomas JAGER
Amphithéâtre Hôpital du Kirchberg

22 mars à 17h30

Sport et ostéoporose

Dr Claudine WIRTH
Dr. Isabelle LEHOBEY
Amphithéâtre Hôpital Municipal CHL

16 mai à 19h00

Muskelverletzungen aktuell: strukturelle und funktionelle Aspekte der Behandlung bei Sportlern

Dr Jacques MEHLEN
Amphithéâtre Hôpital du Kirchberg

17 mai à 13h00

Journée Kiné 2017

Prise en charge du patient respiratoire : update 2017

Amphithéâtre Hôpital Municipal CHL

CONVOCATION

ASSEMBLEE GENERALE S.L.K.S. 2017

Le Président et les membres du conseil d'administration de la SLKS ont le plaisir de vous inviter à l'assemblée générale qui aura lieu

le mercredi 22 mars 2017
à 19h00

au C.H.L.
salle R1A et R1B
4 rue Barblé – Luxembourg
ORDRE DU JOUR

1. Appel des membres et vérification des pouvoirs
2. Adoption de l'ordre du jour
3. Allocution du Président
4. Présentation des rapports du conseil d'administration
5. Rapport du trésorier
6. Rapport des réviseurs de caisse
7. Budget 2017
8. Fixation des cotisations
9. Admission de nouveaux membres
10. Exclusion de membres
11. Approbation et décharge à donner aux membres du C.A.
12. Constitution du bureau de vote
13. Election partielle des membres du C.A. (membres sortants et rééligibles: Sonja Schwamberger; Steve Dondlinger; Roland Krecké; Laurent Radrizzi; Jean-Marc Stauder; Daniel Theisen)
14. Election des réviseurs de caisse
15. Examens des propositions présentées du C.A. et/ou par les membres
16. Clôture de l'AG

S.L.K.S. Membership

To enjoy uninterrupted access to SLKS membership benefits, please renew your membership before 18 of March 2017.

Membership fee : 50 €

to CCPL (Compte Chèque Postal Luxembourg)

IBAN LU54 1111 1270 8010 0000

Infographics by Yann Le Meur,

Yann Le Meur is a French Sports scientist, who earned a Ph.D in Physiology of Exercise from the University of Nice-Sophia Antipolice in 2010. If you are interested in sports science and sports medicine then take a look at his homepage or Twitter account.

Yann Le Meur is well known for his eye-catching infographics which covers the latest sports and sports medicine research science infographics. These infographics are a good snapshot of scientific articles. These infographics summarize scientific articles into images and key messages. But it remains essential to read the full papers!

www.ylmsportscience.com

[https:// www.facebook.com/YLMSportScience/](https://www.facebook.com/YLMSportScience/)

<https://twitter.com/YLMSportScience>

2016 Consensus statement on return to sport

Reference: by Clare L Ardern et al. BJSM 2016
Designed by @YLMSportScience

- 1 TIMING**
Time to return to sport varies independent of the type and severity of injury, reflecting the challenge in accurately predicting injury prognosis and return to sport timelines
- 2 TESTING**
Always use information gathered from a battery of tests that mimic the reactive elements and the decision-making steps athletes use in real sport situations to guide return to sport decisions
- 3 WORKLOAD**
Take workload into account when making return to sport decisions because it may be linked to reinjury
- 4 PSYCHOLOGY**
Account for psychological factors during rehabilitation and at the time the athlete is making the transition back to sport
- 5 CONSENSUS**
Consensus is needed regarding the return to sport criteria for common athletic injuries

BJSM
APPROVED
CRASHBANK

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ANTERIOR CRUCIATE LIGAMENT INJURY PREVENTION PROGRAMS

Reference: Sugimoto et al., Sports Medicine 2015

Prevention programs should include multiple-plane biomechanical components

Compared with double-leg maneuvers, single-leg movements including cutting demonstrate more risk on ACL so that prevention training programs need to incorporate aspect of single-leg training

A correct foot positioning in dynamic movements needs to be a part of the prevention programs

Playing surface needs to be considered to reduce ACL injury

Protecting knee joint by bracing or taping may bring prophylactic benefit

Because ACL injury occurs at a higher rate in games compared with practice settings, reaction and decision making to unanticipated conditions should be a focus of the prevention programs

Fatigue likely attributes risk movements of ACL injury so that prevention programs need to stress the quality of dynamic movements

Neuromuscular aspects including proprioception, muscle activation, and inter-joint coordination need to be focused in the prevention programs

Designed by @YLMSportScience

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Femoroacetabular Impingement Syndrome

Reference: The 2016 Warwick Agreement by DR Griffin et al. BJSM 2016

Designed by @YLMsportScience

DEFINITION

FAI syndrome is a motion-related clinical disorder of the hip with a triad of symptoms, clinical signs, and imaging findings. It represents a symptomatic premature contact between the proximal femur and the acetabulum



DIAGNOSIS

FAI SYNDROME = **SYMPTOMS** + **CLINICAL SIGNS** + **DIAGNOSTIC IMAGING**

SYMPTOMS

- 1 Motion or position related hip or groin pain
- 2 Sometimes back, buttock or thigh pain
- 3 Sometimes clicking, catching, locking, stiffness, restricted range of motion or giving way



CLINICAL SIGNS

- 1 Hip impingement tests should reproduce the patients symptoms
- 2 Often there is limited range of motion



DIAGNOSTIC IMAGING

- 1 Antero-posterior radiograph of the pelvis and a lateral femoral neck view of the symptomatic hip to identify cam or pincer morphologies, and identify other causes of hip pain
- 2 Where further assessment of hip morphology and associated cartilage and labral lesions is desired, cross sectional imaging is appropriate



TREATMENTS

TREATMENT CHOICE SHOULD BE PERSONALIZED FOR EACH PATIENT



REHABILITATION

To improve hip stability, neuromuscular control, strength, range of motion and movement patterns



SURGERY

(Open or arthroscopic) to improve the hip morphology and repair damaged tissue



CONSERVATIVE CARE

Education, watchful waiting, lifestyle and activity modification

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**Mercredi
17.05.2017**

13h00-17h30
Amphithéâtre CHL-Centre



**Prise en charge du
patient respiratoire:
update 2017**

Académie Luxembourgeoise
de Médecine, de Kinésithérapie et des Sciences du Sport



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inscription: physio@chl.lu

INVITATION - CONGRESS

LUXEMBOURGISH ACADEMY FOR SPORTS
MEDICINE, SPORTS PHYSIOTHERAPY
AND SPORTS SCIENCE

LUXEMBOURG

16

SEPTEMBER 2017

Sat. 8:00

MEDICAL AND TRAINING ASPECTS IN HANDBALL

11th Sports Medical Workshop meets
2nd Meeting on medical aspects in Handball



IN COOPERATION WITH



Ville de
Differdange

More information coming soon: www.handball-congress.lu

SPEAKERS

Prof Romain Seil, Prof Kurt Steuer, MSc Stig Anderson,
Dr Jesper Bencke, Dr Lior Laver, Dr Patrick Luig, Dr Gérard Juin,
Dr Lars Michalsik, Dr Laurent Malisoux, BSc Véronique Jung,
MSc Jeff Paulus, Mr Dan Ley

Special lecture: **Olivier Krumbholz**

LOCATION

LUNEX

International University of
Health, Exercise and Sports S.A.

50, avenue du Parc des Sports
L-4671 Differdange

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Sport & Incontinence

7. SYMPOSIUM SPORTKINE

18 novembre 2017



2 rue L.Hengen
L-1745 Luxembourg-
Kirchberg

8h00- 15h00

La pratique d'un sport est synonyme de bonne santé. Pourtant, lorsqu'il est mal choisi ou mal pratiqué, le sport peut être à l'origine de diverses pathologies. La pratique intensive d'exercice physique a été identifiée comme un facteur de risque à part entière d'incontinence urinaire, définie par « la plainte de toute fuite involontaire d'urine ». Il s'agit essentiellement d'incontinence urinaire d'effort, survenant du fait

du phénomène d'hyperpression intrabdominale, inhérent à certains exercices et dépassant les capacités sphinctériennes. Certains sports étant plus à risques que d'autres, et les sportives de haut niveau étant les plus exposées. Le médecin traitant et le médecin du sport ainsi que le kinésithérapeute du sport jouent un rôle primordial dans l'information, le dépistage, la prévention, l'orientation

thérapeutique et le suivi des athlètes. Une meilleure information est nécessaire pour ce problème de santé, car il existe des solutions thérapeutiques simples, efficaces adaptées à la sévérité de l'incontinence d'effort et de son retentissement. L'objectif de ce symposium est d'établir un état des lieux des connaissances scientifiques concernant ce sujet, afin d'aider le praticien dans la prise en charge de ces patients.

Org: Société Luxembourgeoise de Kinésithérapie du Sport

inscription: sport-kine.lu