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**PART I: SCIENTIFIC FOUNDATIONS**

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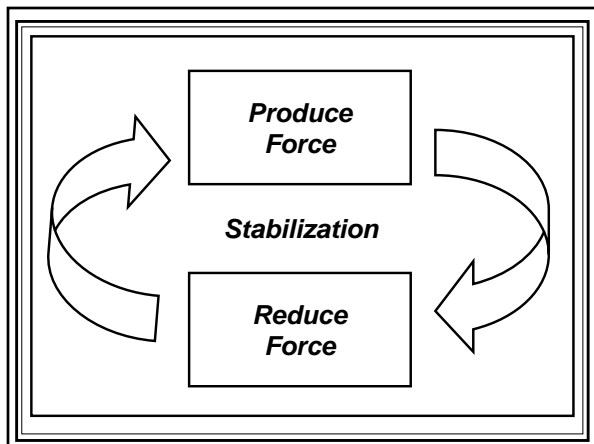
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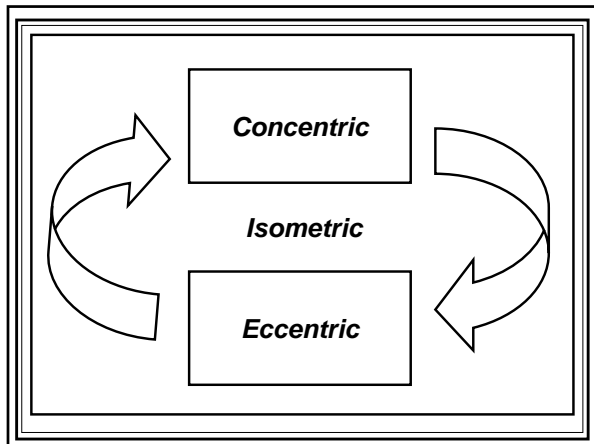
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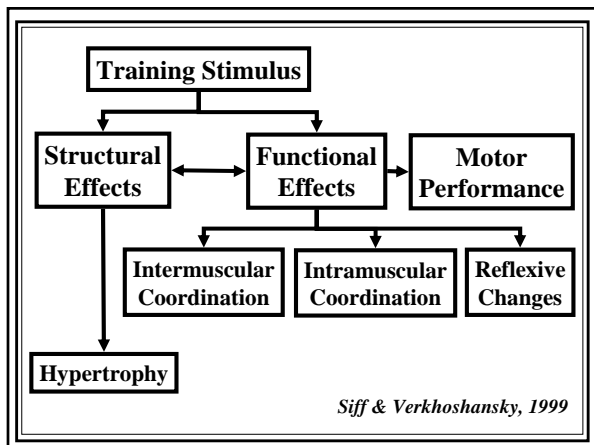
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**ANATOMY**

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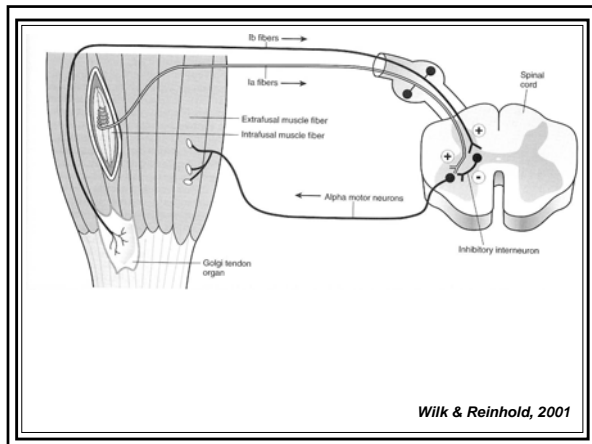
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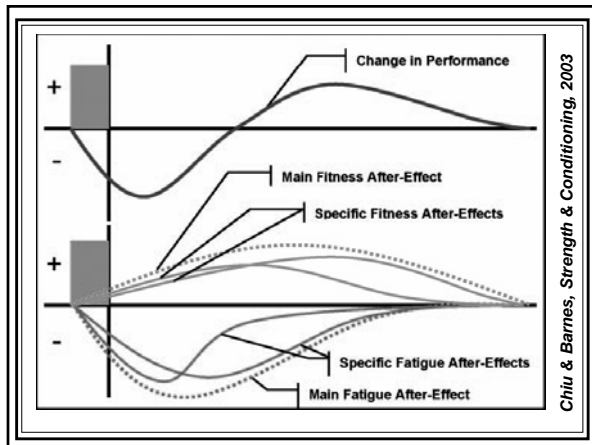
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**MECHANICS**

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## Key Points

- Difference between strength, power, endurance
- Different types of endurance
- Torque vs. force
- Increasing muscle force
- Fitness-Fatigue Model
- Impulse - Momentum

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## PART II: TECHNIQUES

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## PART III: PROGRAM DESIGN

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## Indications

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## Contraindications

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- Pain
- Increased edema
- Surgical / physician constraints

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## Acute Program Variables

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- Choice of exercise
- Intensity
- Tempo
- Number of Repetitions
- Number of Sets
- Volume
- Rest Intervals
- Number of Sessions
- Frequency

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## Choice of Exercise

- Isometric vs. Dynamic
- Open vs. Closed Chain
- Machine vs. Free Weight
- Type of Resistance
  - Manual
  - Elastic
  - Isotonic – Body weight & Free weight
  - Isokinetic

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## “Advantages” of Closed Chain Activities

- Stimulation of proprioceptors
- Increased joint congruency & stability
- Decreased shear forces
- Enhanced dynamic stability
- More “functional”

*Prentice, 1999*

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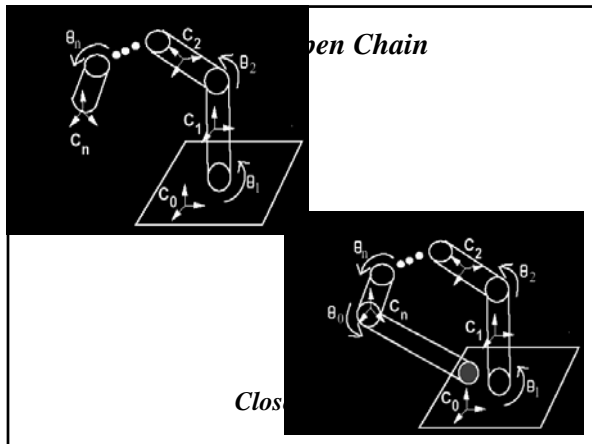
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**Definitions**

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- **Steindler , 1955**
  - Open chain - a combination in which the terminal joint is free.
  - Closed chain - one in which the terminal joint meets with some "*considerable external resistance*" which prohibits or restrains free movement.

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**More definitions**

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- Closed chain – distal end is fixed (Zatsiorsky, 1998).
- Closed chain - motion of one [segment] at one joint will produce motion at all other joints in the system in a predictable manner (Levangie & Norkin, 2001).

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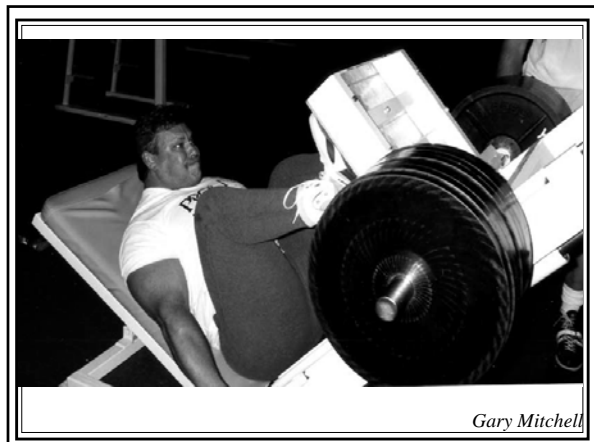
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**Alternate Classifications?**

*Dillman, Murray, & Hintermeister, J Sport Rehab, 1994*

		Boundary	
		Fixed	Movable
External Load	External Load	FEL	MEL
	No Load	<del>ENL</del>	MNL

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*What does EMG tell us about movement classification?*

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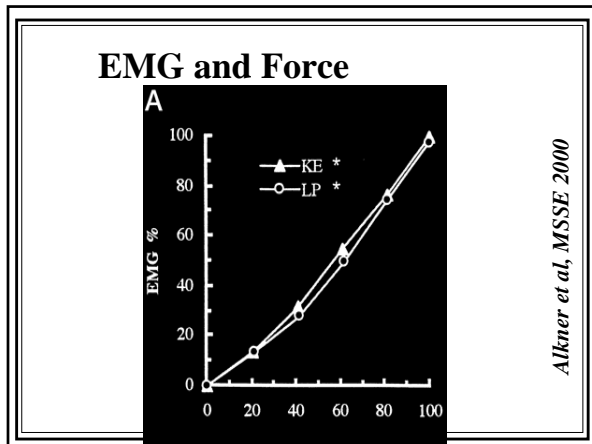
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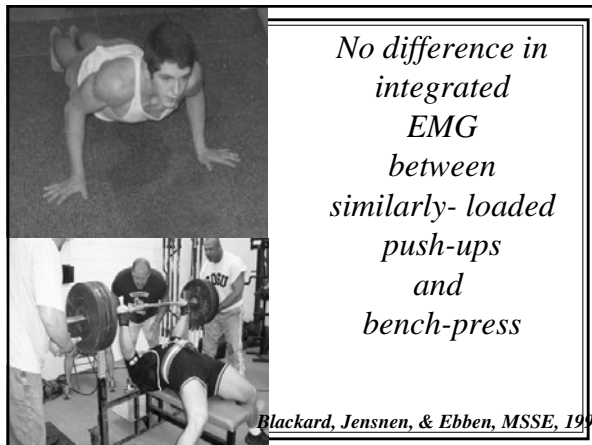
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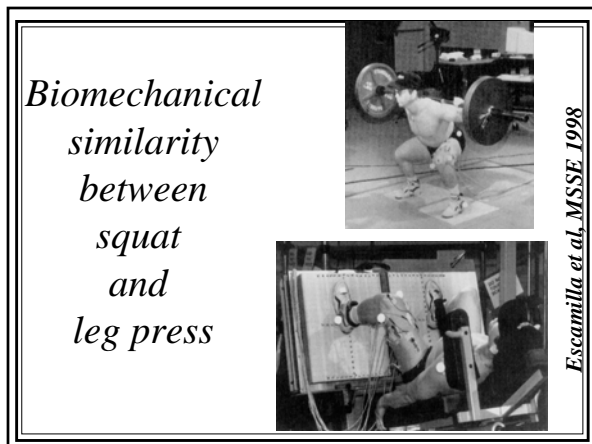
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<b>WEIGHT BEARING</b>	Multiple Joints Linear Resistance
<b>NON-WEIGHT BEARING</b>	Single Joint Angular Resistance

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- No easy classification**
- Distal vs. Proximal End Moving
  - Single vs. Multiple Joints
  - Angular vs. Linear Resistance
  - Machine vs. Free Weight
  - Seated vs. Standing vs. Prone

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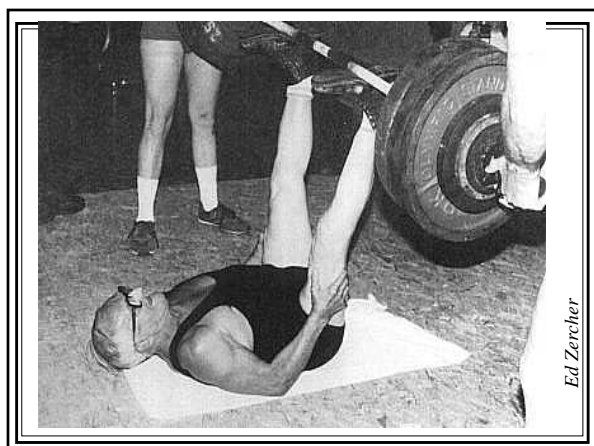
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*Rationale: CC & Safety*

- Decreased Shear Force
- Increased Co-contraction
- CC movements are harder to control

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*Shear forces a function of...*

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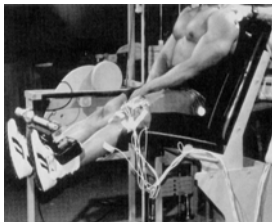
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**Type of loading**



*Lutz et al, JBJS-A, 1993  
Wilk et al, Am J Sports Med, 1996  
Escamilla et al, MSSE, 1998  
Kvist et al, Am J Sports Med, 2001*

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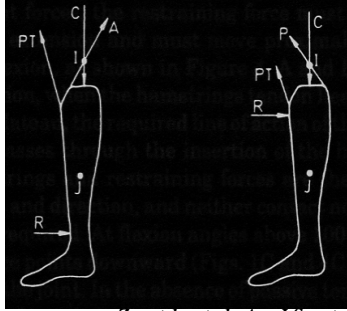
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### Placement of external resistance



Zavatsky et al., Am J Sports Med, 1994

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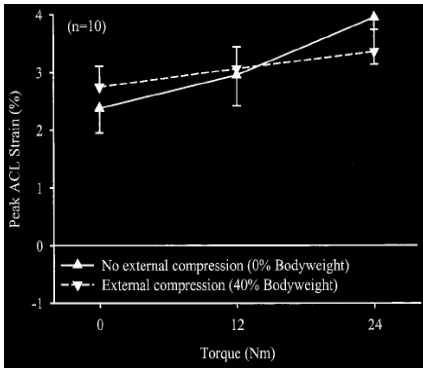
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### Amount of compressive force



Fleming et al., Am J Sports Med, 2003

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*What about co-contraction?*

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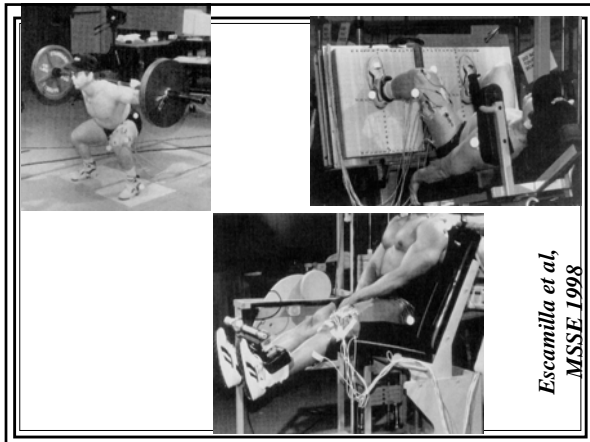
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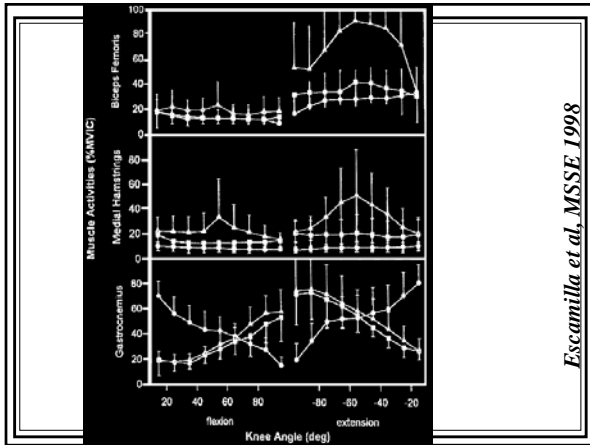
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*Escamilla et al., MSSE 1998*

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**Co-Contraction**

- Function of free-weights vs. machines?
- Does not affect anterior shear forces at knee
- Over-rated?

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**No epidemiological evidence...**

- Shear forces are pathologic
- Free weights are more injurious than machines

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**Comparisons across studies difficult...**

- Subject Population
- Intervention Duration
- Number of Exercises
- Amount and Type of Resistance
- Outcome Measures

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**Eight studies, no differences...**

- Strength
- Pain
- Functional Performance
- Proprioception
- Joint Laxity?

*Combined OC/CC appears superior to either one separately!*

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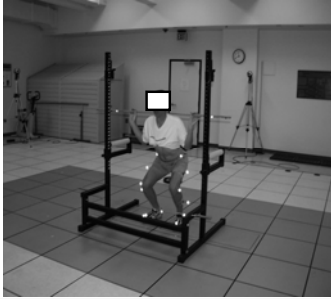
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### LE Kinetics Following ACL Surgery



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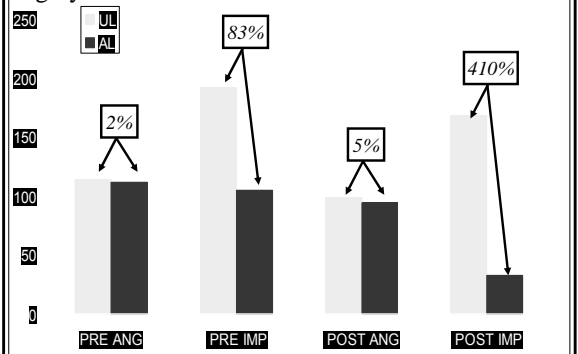
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### Case Study: Bilateral Comparisons following ACL Surgery



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### Three Variations of the Step Exercise



Flanagan, Kessans, & Salem, J Sport Rehabil, 2006

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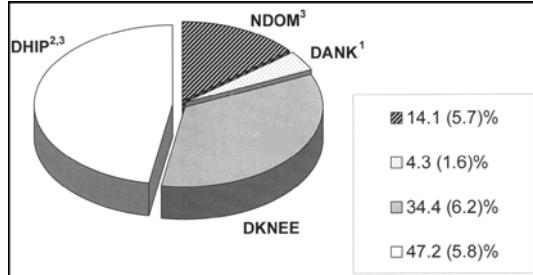
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### Forward Step Up




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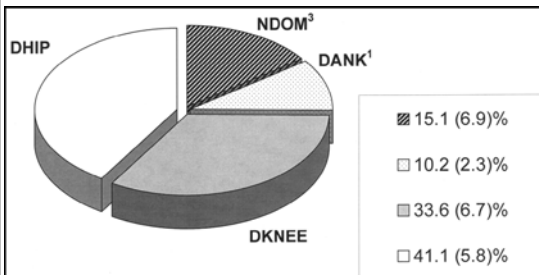
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### Lateral Step Up




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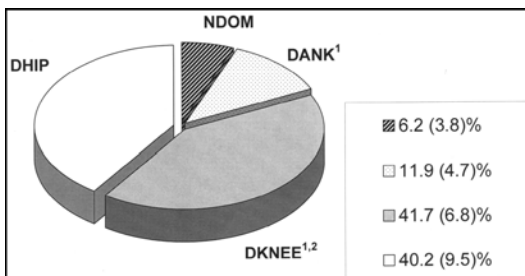
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### Step Down




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## Intensity

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- Dictates all other variables
- RM Continuum

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## Tempo

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- Important to remember your biomechanics:
  - Force – velocity
  - Impulse – momentum

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## Tempo

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Important to remember your biomechanics:  
Force – velocity  
Impulse – momentum

*Bandy et al., Phys Ther, 1997*

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## *Speed Repetitions*



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Remember, impulse must be zero...

% RM	Movement	Deceleration	Source
50%	Squat	35%	Flanagan & Salem*
45%	Bench Press	40%	Newton et al, 1996
25%	Squat	45%	Flanagan & Salem*

\* Preliminary unpublished data

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## Number of Reps / Sets

- DeLorme (DeLorme & Watkins)
- Oxford
- Aggressive Resistance Training Program
- DAPRE
- Performance-Based Periodization

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DeLorme (DeLorme & Watkins, 1945)

Set	Load	Reps
1	50% of 10 RM	10
2	75% of 10 RM	10
3	100% of 10 RM	10

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Oxford (Zinovieff, 1951)

Set	Load	Reps
1	100% of 10 RM	10
2	75% of 10 RM	10
3	50% of 10 RM	10

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Aggressive Resistance Training Program (Stone and Kroll, 1982)

Set	Load	Reps
1	50% of 4 RM	8
2	80% of 4 RM	8
3	90% of 4 RM	6
4	95% of 4 RM	4
5	100% of 4 RM	4

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### DAPRE (Knight, 1985)

Set	Load	Reps
1	50% of Working	10
2	75% of Working	6
3	100% of Working	Max
4	Adjusted Working	Max

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### DAPRE Adjustments

Number of Reps / Set	Adjustments	
	4 <sup>th</sup> Set	Next Day
0-2	↓ 5-10 lbs	↓ 5-10 lbs
3-4	↓ 0-5 lbs	Keep same
5-7	Keep same	↑ 5-10 lbs
8-12	↑ 5-10 lbs	↑ 5-15 lbs
13+	↑ 10-15 lbs	↑ 10-20 lbs

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### Performance-Based Periodization (Flanagan, 2001)

- Planned variables: load and rest periods
- Target: volume
- Performance variables: reps and sets
- Adjustments

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## Rest Intervals

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- 90 sec?

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## Frequency

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- 2 – 3 times per week?

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## LE Kinetics Following ACL Surgery



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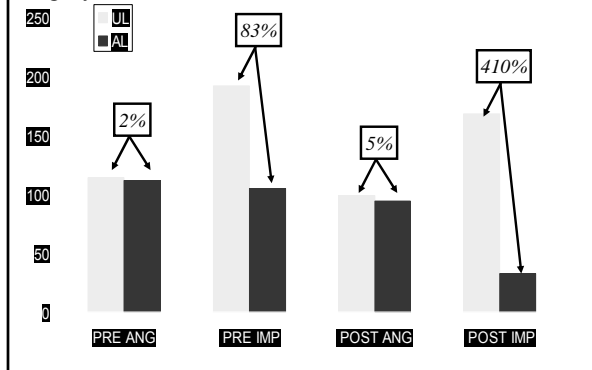
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Case Study: Bilateral Comparisons following ACL Surgery



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