

Back In the Swing



WITH THE NEW GOLF SEASON UPON US, IT'S NOT JUST THE TOUR PLAYERS WHO SHOULD BE GETTING THEIR BODIES "FIT FOR GOLF". MANY CLUB PLAYERS ARE HITTING THE FAIRWAYS WITH THE VAST MAJORITY BEING INHIBITED IN PLAYING EITHER AS A RESULT OF INJURY OR JUST LACKING THE PHYSICAL ABILITY.

This article outlines the new approach club golfers are taking by using "golf specific" physiotherapists, doctors and strength conditioners to analyse and diagnose their physical weaknesses. Specialists are prescribing golf-specific exercises to improve golfer's—of all ages—body bio-mechanics for their golf swing and improve consistency over 18 holes. Even more importantly work currently being done will almost certainly prolong your playing career, well into retirement.

To outline these important factors Australian GOLF Magazine resident physio **Ramsay McMaster** has interviewed five different types of golfers who we hope you may be able to relate. With their permission, each has been candid in outlining their physical weaknesses, past injuries and how they are alleviating these problems through physiotherapy and golf-specific exercises.

And now that we've got your body covered, we thought we'd spend some time with your mind. On the bottom third of each page you'll find our latest tips to help you survive the stressful nature of the game.

BARRY KURRLE

Golfer Says:

Handicap: 14

How often do you take a lesson:

About once a month

Past Injuries: Back and shoulder problems

Swing Problems: Restriction in my swing

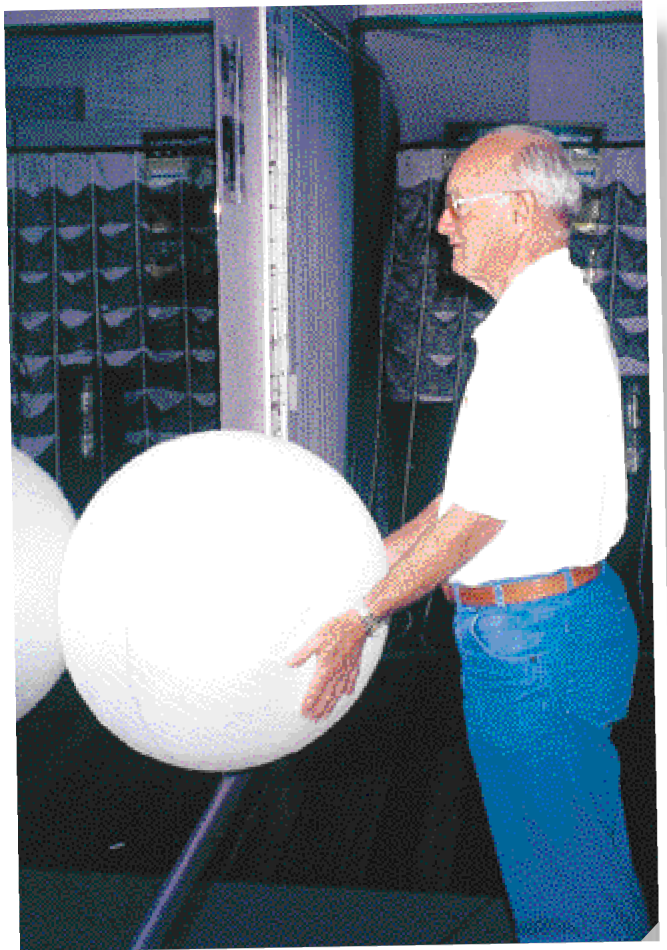
Physio Says:

Barry really represents the middle-aged male sub group of golfers. Their common physical injuries/weaknesses are:

- Weak rotator cuff/shoulder injury as a result of their work station, such as computing, desk work, driving. The muscles around the shoulder are important for smooth shoulder turn and positioning the shoulders on a good plane in the golf swing. If the middle aged male golfer has weaknesses in this area, they can tear or get impingement of the rotator cuff.

- Poor postural positions. Usually this subgroup has poor abdominal tone and rounded shoulders and back (kyphosis).

- Deep massage to over tight muscles at the front of the body eg: pectorals/biceps/hip flexors should be prescribed to relax the pressure on the shoulders and pelvis in conjunction with postural and abdominal exercises. Stretching is also an essential factor in their program.



RITCHIE SMITH

Golfer Says:

Age: 27

Handicap: Trainee professional

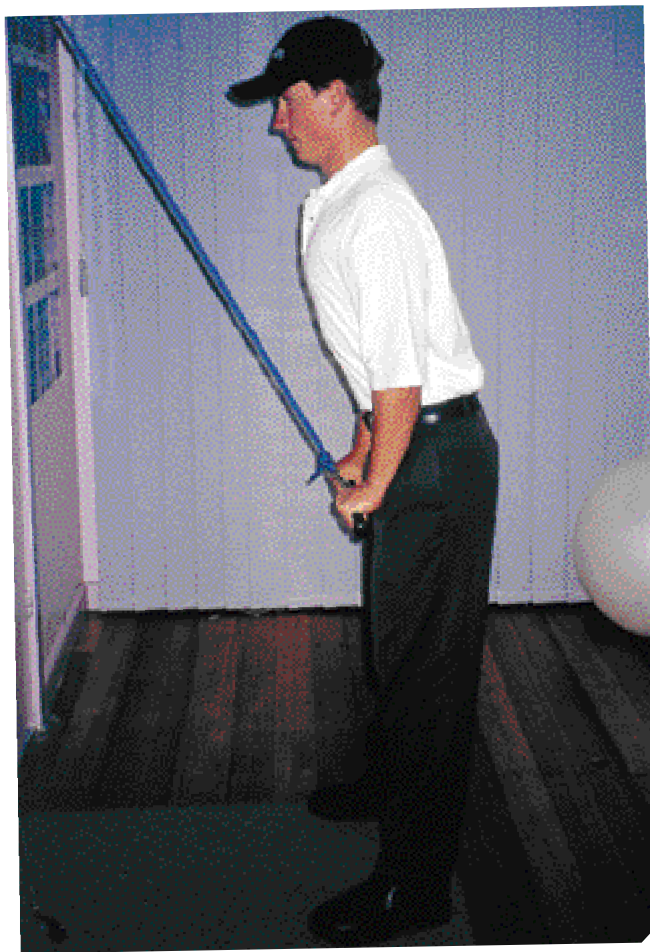
How often do you take a lesson: Weekly

Past Injuries: Nil

Swing problems: Poor rotation

Physio Says:

Ritchie represents the young up-and-coming player, who comes out of the golf club pennant team, state team or trainee program. Their exercise program has to be very functional in relation to their golf swing. They have to have coordination throughout their three body segments: lower body, trunk and upper torso and arms. They also have to have strong posture in order to maintain good posture throughout the golf swing, especially during practice sessions and throughout competitive rounds. We have designed a golf specific posture bar to allow them to assist in maintaining this golf specific function, especially when travelling.



MAVIS NORTON

Golfer Says:

Age: 79

Handicap: 28

How often to you take a lesson: When it's necessary

Past Injuries: Hamstring, back and biceps

Swing problems: Poor rotation

Physio Says:

Mavis represents the senior golfer subgroup. This group love their golf and their ability to enjoy their club members' company as well as continue to play 18 holes for as long as and as competitively as they can within their life. The physical limitations of senior golfers are:

- Poor posture
- Poor balance
- Wastage of muscle groups
- Underling pathology, eg: arthritis and osteoporosis.

The emphasis is on improving the underlying physical limitations by a lot of balance, strengthening and rotation work as well as postural re-education.



SUZIE MATHEWS

Golfer Says:

Age: 19

Handicap: 0

How often do you take a lesson: Once a week

Past Injuries: Wrist/shoulders

Swing problems: Lack of distance

Physio Says:

Suzie represents the young female elite golfer coming out of the elite amateur field, club champion and institute of sport female golfer. Their big limitation is getting the distance that they want, sometimes by forcing this to happen. This can end up causing wrist and/or elbow injuries. These are relatively small muscle groups doing a lot of over loading and overactive work in the golf swing. We therefore once again try to build up the functional strength of the golf-specific large muscle groups. We have also given Suzie the posture bar, but made sure she was well aware of the use of the postural muscle groups before loading her up on the bar: Latissimus Dorsi, lower abdominals/gluteals etc.

N.B. Since this article has been written, Ritchie Smith has scored 59 for 18 holes at a PGA trainee event, and Suzie has increased her distance.



NEVILLE WEIR

Golfer Says

Age: 50

Occupation: Publican

Handicap: 8

How often do you take a lesson?

Occasionally, but will from now on

Past injuries: Back! Back ! And Back! for 3 years

Swing Problem: Reverse pivot coming inside on takeaway

Best tip: Posture Grip Stance

Physio says:

Neville is very typical of someone in his age group and lifestyle. These golfers typically work hard in their own businesses and sacrifice their health to a degree. Coming up to an early retirement age, golfers like Neville tend to have significant stiffness in their spine. This is due to a lot of sitting at a desk, driving or standing for long periods of time. The hips also tend to get very tight. The exercise which we prescribed was the Karate Kid: keeping your left foot on floor pointing forwards, slowly lift your right leg onto the wall at 90 degrees keeping your arms and shoulders back with hands splayed with your neck tucked in and kept at shoulder level. Start with a chair as it is very difficult to keep your balance in this position. This exercise is good for golf as it allows for good weight transference and good balance in the body. It produces extension and stretches the front of the legs which tend to get over tight with sitting, driving etc. It stabilises the pelvis when walking, standing and playing golf and works the gluteii muscles (buttock muscles). It also works on the superficial muscle in the back called latissimus producing good rotation in the golf swing. Finally, whilst stabilising the pelvis, it works antagonistically to prevent overactive and tight hips that will restrict rotation. Weak buttock muscles will result in excessive hip sway in the golf swing and will usually cause the hip flexes at the front to get over tight Once again it will affect lower trunk rotation in the golfer. Weak buttock muscles can put more pressure on the front of the hip joints and causing injury.



For more information, contact the Melbourne Golf Injury Clinic on 03 9569-9448. The Melbourne Golf Injury Clinic is a provider for Institute of Sport golf programs and the PGA of Australia.