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قسم التربیة الریاضیة

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**فۆڕمی زانیاریەکانی پلانی توێژینەوەی زانستی مامۆستایان**

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ناوی توێژینەوەی پێشنیازکراو:

Effects of ankle- weight (lead) device on pain perception in chronic patellofemoral pain Syndrome in athletes

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کورتەیەک لە پلانەکە

**Abstracts:**

**Background**: Pain in prepatellar/retropatellar regions is clinically referred to as patellofemoral pain (PFP). Yet, there is not a pure definition. The term patellofemoral pain syndrome (PFPS) is still a “wastepaper basket”, which includes separate legal entities (Witvrouw et al., 2005). It is a commonly complaint the entire population, particularly in athletes who participate in jumping, cutting and pivoting sport activities (Loudon et al., 2004; Kannus et al., 1987).Physical examination is a key role in PFP diagnosis.

Additionally, commonly risk factors should be studied, such as poor core muscle endurance, hip muscle dysfunction, muscular tightness, patellar malalignment and excessive foot pronation. Imaging is infrequently required in special cases.

It is informed that nearly 25%–30% of all injuries observed in a sports medicine clinic (Devereaux & Lachmann, 1984; Witvrouw et al., 2014) and up to 40% of a consultation with a healthcare provider for knee problems (Baquie & Brukner, 1997;  Natri, Kannus & Järvinen, 1998) and running (Taunton et al., 2002; Nejati et al., 2011). It is also reported a prevalence rate of between 13% and 26% in females participating in running, volleyball, soccer, fencing and rock climbing (Nejati et al., 2011).

In most cases, activity modification and rehabilitation should be attempted to prior to any surgical interventions. However, there is not a much studies of effects of ankle- weight (lead) device rehabilitation method to decrease pain perception for all athletes with chronic patellofemoral pain.

**Purpose:** The aim of this study is to investigate whether ankle- weight (lead) device mitigate pain perception in chronic PFP Syndrome in athletes.

**Methods:** Clinical Prospective trial, The study will measure pain perception, range of motion, stiffness erythema & effusion of knee before and after exercises by using ankle- weight device. Athletes will take drug prescriptions during study based on their weight by supervising orthopedic doctor. In this study, athletes will divide into two group. First group will be under 50 Kg weight and second group will be in between 50-70 Kg weight. The first group will use ankle-weight (lead), 700g for each side (700 g for right & 700 g for left ankle). In second group will use 1400g for each side of ankle. Ankle-weight device is a commonly used training device as a way to improve muscles activities. This program will use for 21 days. All athletes will used this device for 18 hours each day, During this time athletes will used ankle-weight (lead) device in walking ,working activities, exercises. This study will use SPSS software for analysis of data for pain “pain scale”.(american society of anaesthesia).

بەرواری ئەنجام دانی سیمینار

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سەرۆکی بەشی پەروەدەی وەرزش