

## PATIENT INFORMATION

Osgood-Schlatter Syndrome

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### **Osgood-Schlatter Syndrome is Common Among Athletes**

Reprinted from the "Your Fitness" column from the Los Angeles Times

By Dr. David C. Bachman

**Question:** My youngest, most athletic son has been diagnosed as having Osgood-Schlatter syndrome. What is it? Can he continue athletics? Is there anything we can do to make it go away faster?

**Answer:** Lots of young athletes get Osgood-Schlatter syndrome. It isn't dangerous, but it can't be ignored. The more you and your son understand about it, the better off you'll all be.

It begins as a bump. Osgood-Schlatter syndrome is a painful bump that occurs just below the knee at the tibia tubercle. The bump is on the upper part of the front of the lower leg, at the attachment of the patellar tendon. As your young son grows, and his bones increase in length, this is an active site called an apophysis.

The blood supply is lost. It is unclear why it happens, but for some reason, the blood supply to the apophysis is lost. When that happens, the bone in the area dies. After a while, the blood supply is re-established and the dead bone is removed and replaced by living bone. It is during this replacement process that the tender bump occurs and the pain begins. Once your son's growth is complete, the apophysis is incorporated into the rest of the tibia. The pain is usually first evident during stair climbing, squatting and other bent-knee activities. The next stage is pain during running. Finally, pain may occur with almost activity. Not all young people go through all the stages, but sitting down with your son and helping him understand the process will help him cope.

Treatment long has been debated. Treatment of Osgood-Schlatter syndrome has been the subject of hot debate among physicians for a long time. Most sports medicine doctors agree, however, that by the time the symptoms appear, the bone replacement has started and the healing phase is well under way. Little can be done to intervene in that healing process: Nature must take its course. The worst thing we humans can do is to get in the way of that process.

The thinking has changed. Treatment used to be quite aggressive, probably overly so. Physicians recommended total restriction of activities, casts, cortisone injections and even surgery to try to correct or alter the process. This is no longer in vogue.

Trust your child. Now most doctors agree the best course is to allow the youngsters to self-limit their own activities. If it hurts your son too much to squat or run, he should stop. He will stop; children are smart enough to now want to hurt themselves. Allow and encourage your child to find the level of comfort and activity that feels good to him. Eventually, the problem will solve itself, the pain will go away, and your son can start to play at full-speed ahead.