An athlete or sports enthusiast seeking health care today is forced to make choices among many types of specialists. With so much diversity within each profession, many patients are unknowingly choosing their own therapies.

A tennis player who develops chronic shoulder pain, for example, might decide to visit a professional. That professional will most often render his or her specialty for the shoulder problem. If the professional is an acupuncturist, the patient receives acupuncture; a chiropractor will provide spinal manipulation; and a medical doctor might prescribe anti-inflammatory drugs. The best care, however, might be a combination of therapies. Today, many professionals are incorporating techniques from other fields. Some orthopedic doctors are using nutritional therapies, chiropractors are providing dietary guidelines, and many medical doctors are considering how mental/emotional stress affects their particular type of therapy.

Complementary sports medicine uses a hands-on approach to examine all aspects of a patient’s lifestyle in order to find the source of his or her problems and determine a course of action for correcting them. Practitioners of complementary sports medicine play an active role in patient care and instruct patients to take an active role in their own recovery and treatment. Ideally, these practitioners are themselves athletes on some level, enabling them to better understand their patients and appreciate the healing process and the joy of getting better.

Sometimes a specialist is needed, in which case the complementary practitioner works simultaneously with the specialist. Thus, in contrast to alternative medicine, complementary sports medicine is linked with, rather than segregated from, traditional modern medicine.

**Everyone Is an Athlete**

Central to the concept of complementary sports medicine is the fact that we are all athletes. We tend to categorize the patient population as either athletes or nonathletes. But “couch potatoes” are in actuality just out-of-shape, inactive athletes. Because of the potential health benefits, such a patient is perhaps in most need of our help. Many patients are reluctant to start exercising because they perceive this activity as a situation of “no pain, no gain.” They see runners along the road who appear to be struggling, aerobic dance classes that look too advanced, and weight rooms that are full of sculpted bodies. If these patients understood that gradually working up to an easy 30-min walk, four or five times a week, would dramatically improve their health, many would happily comply.

Likewise, we should not separate athletic injuries from nonathletic ones. The patient
who complains about shoulder pain from spring cleaning might have developed an imbalance not unlike that of the baseball pitcher who overworks the shoulder in spring training. We should not treat a “sports injury” but rather the person attached to it, regardless of the activity or situation that created the imbalance or dysfunction.

Worse yet is the fact that too often a name is assigned to an injury so that a predetermined therapy can be given. The fact is, every rotator problem in the shoulder is unique, every case of fasciitis is different, and no two Achilles tendinitis problems are exactly the same. It follows that each patient is different and individual.

Whether it is walking, for the beginner, or training for an Ironman triathlon, the patient’s program can be made more therapeutic with a variety of assessment workouts that give both practitioner and patient a clearer understanding of the program’s efficiency and direction. We should not have to wait for a symptom to occur, for performance to falter, or for another end-result indicator to appear to find out that a patient’s program does not match his or her specific needs.

The Holistic View

Although the word holistic has been overused, abused, and misunderstood for the past few decades, it remains an appropriate word to use when one is referring to the field of complementary sports medicine. The true holistic approach of complementary sports medicine is one in which all aspects of the patient are considered. The information value of signs and symptoms is important, and no sign or symptom is insignificant. Lifestyle, diet, and mental/emotional state are considered, as well as competition and training schedules. In addition, the practitioner uses a holistic approach when helping and treating a patient and considers the science of such therapy. In contrast, science and mainstream medicine too often focus on fragments of the whole by looking at signs of a disease and treating particular symptoms.

The Equilateral Triangle Paradigm

Another way of looking at the holistic approach is to view it as an equilateral triangle, as shown in Figure 1. Each side represents one important aspect of the patient’s health: structural, chemical, or mental/emotional health. Although this is a simple representation and does not convey the complex interrelationships that exist throughout the body, the concept provides a starting point for discussion.

Structural Health

One side of the triangle portrays a person’s structural health. This includes the skeleton, muscles, ligaments, and tendons. The functions of all our structural parts very much depend on each other. For example, the tibialis posterior muscle plays a major role in the bony stability of the foot. And the physical equilibrium of the bony pelvis, itself dependent on good muscle balance, has an indirect but significant impact on neck motion. Our whole body is a kinematic chain that acts as one complex functional unit. Although we study the body in separate and distinct parts, we cannot treat it successfully that way in the clinic.

The structural aspect of the body is often tended to by specific types of practitioners or specialists. Chiropractors, athletic trainers and therapists, osteopaths, physical therapists, and massage therapists are