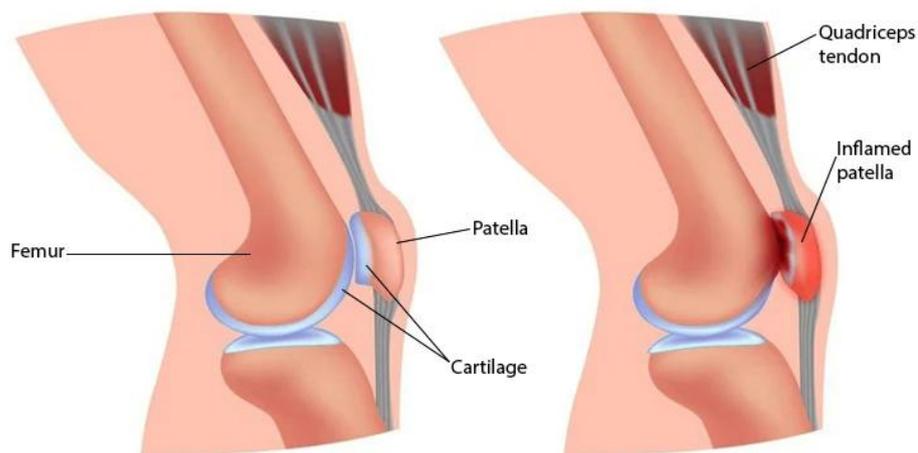


## Patellofemoral Pain Syndrome (PFPS)

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### PATELLOFEMORAL PAIN SYNDROME



**Healthy knee**

**Knee with Patellofemoral  
pain syndrome**

#### What is Patellofemoral Pain Syndrome?

Patellofemoral Pain Syndrome, also known as “**runner’s knee**”, is pain around or behind the **kneecap (patella)**.

It occurs when the **kneecap does not move smoothly** in its groove at the end of the thigh bone, causing irritation of the surrounding tissues.

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#### Causes

- Overuse or repetitive stress (running, jumping, squatting)
  - Muscle weakness or imbalance around the **thigh and hip**
  - Poor alignment of the kneecap or lower limb
  - Sudden increase in **activity or intensity**
  - Flat feet or improper footwear
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## Symptoms

- Pain around or behind the kneecap
  - Pain that worsens with:
    - Running or jumping
    - Squatting or climbing stairs
    - Sitting for long periods (“movie-goer’s knee”)
  - Swelling around the knee (mild)
  - Clicking or grinding sensation when bending the knee
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## Diagnosis

- **Medical history** and physical examination
  - Observation of **movement patterns and muscle strength**
  - Imaging (X-ray or MRI) if needed to rule out other knee problems
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## Treatment

Most cases improve with **conservative management**:

### 1. Activity Modification

- Avoid activities that aggravate pain
- Gradually return to exercise rather than sudden increases

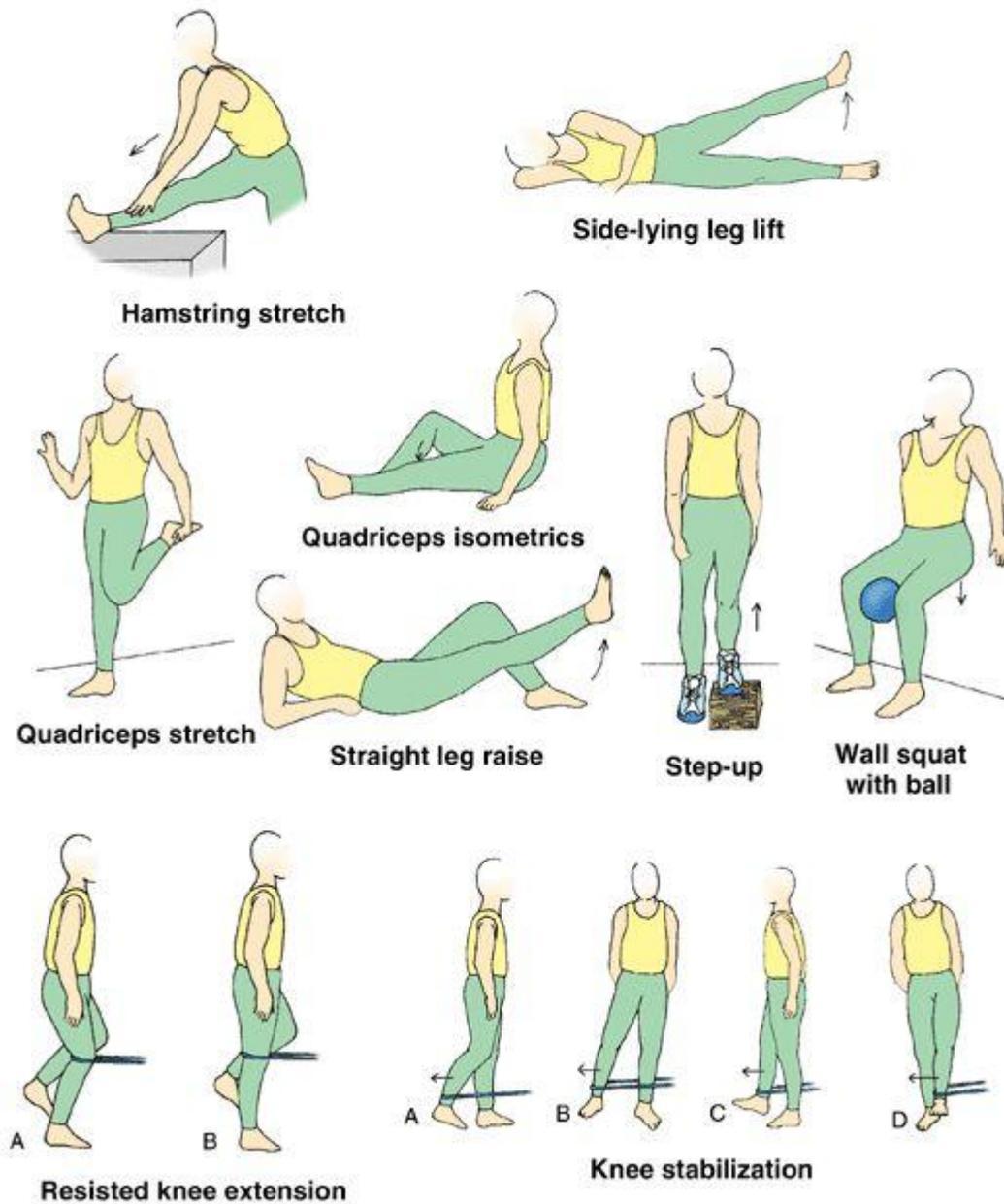
### 2. Pain Relief

- Ice packs: 10–15 minutes after activity
- Painkillers or anti-inflammatory medications if advised by your GP

### 3. Physiotherapy

- Strengthening exercises for **quadriceps, glutes, and hip stabilizers**
- Stretching tight muscles (hamstrings, calves, hip flexors)
- Improving knee and hip alignment during activity
- Taping or bracing may help in some cases

### Patellofemoral Pain Syndrome Exercises



#### 4. Footwear and Orthotics

- Supportive shoes or insoles may reduce stress on the knee

#### 5. Surgery

- Rarely needed; considered only if symptoms persist despite conservative care
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#### Self-Management Tips

- Avoid prolonged **kneeling or squatting**
  - Maintain a **gradual and consistent exercise program**
  - Use **supportive footwear**
  - Apply **ice after activity** if sore
  - Focus on **strengthening and stretching exercises** recommended by your physiotherapist
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#### When to See Your Doctor

Seek advice if:

- Pain persists despite physiotherapy and activity modification
  - Swelling, redness, or locking of the knee occurs
  - Weakness affects daily activities
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#### Prognosis

- Most people improve within **weeks to months** with physiotherapy and activity modification
  - Early intervention improves recovery and prevents chronic pain
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#### References:

- NHS: Patellofemoral pain syndrome
- British Journal of Sports Medicine: *Patellofemoral Pain Guidelines*