Why Your Knee Hurts After Golf (And What To Do) Transcript

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Introduction to Golferu2019s Knee

Maybe it started small. A little stiffness getting out of the cart, some soreness after a round that wasn't there last season, and you didn't twist anything and didn' t fall.

You just played golf. But now, something feels different. You've started negotiating with your knee during your rounds. Your taking fewer practice swings, your parking your cart closer to the tee box.

Maybe now you're only playing 9 holes instead of 18. Not because you don't have the time, but because there's this annoyance there. If you've been quietly wondering, why does my knee hurt or bother me after golf?

You're in the right place. Because what you're feeling has a name, it has cause, and most importantly, It has options. Now, you've probably heard of something called golfer's elbow before.

But have you ever heard something like golfers knee? Because today, that's what we're talking about. and it's something that ends far more rounds early than golfer's elbow.

What we're gonna talk about today is what's causing the pain, why it keeps coming back, and how you can keep playing without rushing into surgery. There's also one mistake that I see golfers make over and over again, And it is probably why your knee isn't getting any better.

But I'm gonna get to that in just a minute. I'm Dr. Gayan Puvendran. I am an orthopedic physician. And for the last 15 years, I've helped thousands of active adults, especially golfers over the age of 40, keep playing the game they love without rushing to surgery.

Now, if you've been here before, we've talked about the medial meniscus, the MCL, and we also talked knee arthritis. But today I want to zoom out a little bit because sometimes It's not just one structure.

What Golferu2019s Knee Means

Now, golfer's knee, it's a not a formal diagnosis, but it is a term the doctors use to describe the strain of the muscles in the joints or a structural injury that's caused by all that twisting and compressive force that is generated during the golf swing.

Sometimes, the problem is how your entire swing loads your knees. And that what quietly builds the pain over time. So, if you love this game but your knee is starting to limit you, this video is for you.

Let's talk about my patient, Mike. He is fit, active guy. He played football when he was in high school. Now he is 52 years old, he's the CEO of his company.

He still enjoys the game, He likes to walk the course for exercise and for decompression. he still swings the club really hard. But man does that knee start to get sore.

By whole 12, I'm starting to think about it with every step that I take. Did you catch what he said? That sentence that he's said is really important.

I'm not injured. Most golfers think that pain only counts if you tore something. But on the golf course, knees don't usually explode. They whisper first.

And Mike's knee had been whispering to him for years. So let's talk about what's really happening. One golf swing takes just over a second. But in that time, your lead knee absorbs four times your body weight.

Think about that. I'm 200 pounds. That's 800 pounds of force. Your trail knee or right leg in the right handed golfer takes up to three times her bodyweight.

Multiply that by 100 swings over 18 holes. You can see exactly how these overuse injuries start to develop.

How Golf Loads the Knees

The lead is your anchor. It takes the brunt during your down swing and your follow through. There are forces during your swing that try to make it buckle inwards or rotate in wards and that's how your MCL and your medial meniscus start taking a hit.

There's a simple fix for this and it's just to turn your lead foot out by 20 to 30 degrees at your address. This will immediately reduce the inward force that your knee experiences.

The trail knee is your accelerator. It initiates your downswing. If you are locking it out during back swing, What you've done is that you just killed all of your power and you sent all that rotational load into your lower back and to your lead knee.

If you have a locked trail knee, that's your POWER leaving on the tee. So keep a soft flex in the trail, always. IF you end up forcing extension or you ended up rotating your knee in that fixed or locked position, THAT is when we start to see ligament strains and meniscus tears develop.

now i can hear some of you out there thinking okay doc but which one of them do i have it's a great question so let me simplify it your meniscus this guy right here you see him when he hurts it is sharp twisting hurts sometimes you'll feel a clicking if you want more details on this please go see my meniskus video the mcl This guy right here, it often feels tender to touch when you press on the middle part of your knee.

It'll sometimes feel unstraight or unstable when try to straighten your leg or when your moving on it. If you need more details on that one, please go see my MCL video.

And Uncle Arthritis, this guy here. Uncle Arthritis, this guy right here. Dull, deep ache, builds over your round. You'll sometimes feel like you're more stiff in the morning or when you try to get up initially.

Now, let's be clear. Golf doesn't cause arthritis, but it can absolutely aggravate it.

Meniscus, MCL, and Arthritis

And one more thing. If your MRI says that you have a meniscus tear, remember this guys here, Don't panic. There are many tears of the meniscus that are really degenerative and they are not the cause of pain that you're having right now.

A clinical exam matters way more than the report in isolation. But now here's the part that most golfers miss and you probably did too when you were asking that question.

You can have more than one. Mike did. He had a little cartilage work, a bit of arthritis. A small degenerative meniscus tear. Weak hips. None of these was dramatic on their own, but add them together and it was enough to ruin his back nine.

So let's talk about the real driver here. It's movement. I tested Mike when he came into the office. Had him do a one-legged stand. When we did, he wobbled a litte bit.

We tested the range of motion of his hip and it was limited. I asked him to do a squat in the office, just with his body weight. And what happened was his knees started to collapse inwards towards his bottom like he was going knock knee.

That showed me that his knee were compensating for what his hips wasn't doing. And when the hip won't rotate, the knees take the weight. Knees aren't built for that heavy rotation in their load.

Not from one swing, let alone from 10,000 swings. Now, here is the big mistake that I see everyone making. Why rest didn't fix Mike? Mike tried rest. He took two whole weeks off the golf course, two weeks of not being with his friends, not out there, and guess what?

He started to feel better. Then he went and played again. And big surprise, the pain came back. Because rest lowers inflammation, but it does not improve your mechanics.

Hip Mechanics and the Real Cause

It does strengthen the support that your knee needs. it also does improve how your joint tolerates load. He was taking ibuprofen, which helped quiet the alarm, But that wasn't repairing the wiring inside.

That's the difference. So you may be asking, well what did I do? How did i make him feel better? Well first, I referred Mike to a qualified physical therapist that focused on golf.

That's not a consolation prize, that was the right first step. The physical therapists focused what my assessment told us, Now my job was to monitor his progress and make sure that we weren't moving on prematurely.

Because here's the thing. If physical therapy alone calms the tissue down and restores your function, we're done. It's a win. But sometimes the joint environment is too irritated to respond to exercise alone.

And when that happens, there are ways that we can support the body's natural repair process, not just silence the pain with a cortisone shot, but to improve the conditions inside the joints so healing can actually happen.

That's when a more targeted medical intervention becomes worth the conversation. It is a subtle difference, but it makes a huge impact. So, how did I test Mike?

I want you to do this quick test for me. I wanna you stand on your left leg and have a slight bend to it, kinda like you're getting ready to sit in a chair.

Now, I wanted you take your backswing. Did your hip feel blocked? Did you knee start to feel a little strain or feel little bit weird? If your hips won't give it the knee will take it.

That your answer. Alright. This is the section that you've all been waiting for.

Why Rest Alone Doesnu2019t Fix It

This my three specific drills to help improve your knee mechanics, this will reduce your injury risk, and as a nice bonus, it's actually going to improve power and consistency.

Take your normal golf stance. Now, without your club, I want you to perform your backswing rotation, but hold it at the top. Are you doing it? Okay, check your trail knee.

Is that knee still flexed or has it straightened out and locked? If it is locked, you have lost your power coil and you've just transmitted all of that rotational stress directly into your joint.

What I want you to do is practice holding that slight flex in your trail knee at the top of your backswing for a count of three. Repeat this 10 times.

What this is going to do is this going train what we call neuromuscular awareness or how your nerves and your muscles connect and it's also going teach your brain to learn to feel the proper positioning.

Drill number two is the lead foot turnout. Now this one is super simple, but it's immediately effective for anybody that has pain on the inside of their knee or history of MCL issues.

At your address, turn your leadfoot outwards 20 to 30 degrees. That way it is pointing towards your target instead of right in front of you. What this does is this helps externally rotate your hip, but it also dramatically reduces that adduction movement of the lead knee through impact.

That's the force that makes it want to cave inwards. Take 20 practice swings with this adjustment. Notice how the knee feels. It should feel more stable and your follow through should be more fluid.

Drill number three. the hip hinge wall drill. This works on your core stability and your course strength.

Physical Therapy and Medical Options

Now this one is done off the course but it directly translates to the movement pattern that your swing depends on. What you're going to do here is you are going stand with your back against the wall but your feet are gonna be about 12 inches forward.

I want you to push your hips back towards the walls but you gonna hinge at your hip so you not gonna bend at the waist. Your spine needs to stay flat and you chest needs stay up.

When you hips lightly touch that wall I wanna you stop. That's your golf address position. Now from there, slowly rotate your upper body as if you're making a backswing, but keep your trail hip in contact with the wall.

If your Trail hip lifts off the Wall, you are over rotating through your lower back and your knee. You're not engaging your hips in your core. The wall is going to help give you some honest feedback.

So if that hips can stay down, the rotation ends up coming from the right place. For this one, You are going do 10 repetitions for 3 sets. if you do this daily during your warm-ups.

Once your hips and your core start generating the power, your knees are just along for the ride and they're not doing the heavy lifting. So let's talk about some preventative strategies because any good doctor will tell you that an ounce of prevention is worth a pound of cure.

Let me walk you through some evidence-based approaches to preventing golfer's knee and what you can do if your already starting to deal with the pain.

Prevention strategy number one is warm up properly.

Quick Self-Test and Swing Drills

This means don't just show up at your tee time ready to swing. 10 to 15 minutes on the range before your round starts is when you should be thinking about showing up.

Start with chipping and putting, then gradually build to your full swings. Now, this is not optional. Why is this not option? Because cold muscles and tendons are dramatically more susceptible to injury, so you need to slowly work them into your activity.

Prevention strategy number two is your footwear. Your foot wear matters. Golf shoes that have proper arch support help prevent what we call foot pronation.

When your footprint pronates or rotates inwards, what it ends up doing is it starts a chain reaction of internal rotation all the way up to your knee.

Again, promoting that caving in pattern. If you have a custom or semi-custom orthotic, it can be a game changer if

you're having flat feet. Prevention strategy number three is kind of fun.

It's get fitted for your clubs. The length of your shaft changes your stance and it also changes, your swing plane. Both of these change the load on your knee.

A club fitting is not just about performance enhancement and getting a few extra yards. it's actually also about injury prevention. Tip number four is not as sexy, but stay hydrated.

Dehydrated muscles fatigue faster and they are more prone to strain. So make sure that you're carrying water with you. And please start drinking before you are thirsty, because if you start thinking once you get thirsty you already behind.

Prevention strategy number five is don't over rely on that knee brace. This is a common mistake I see with people with knee pain. Now braces do have a role in acute injury management, but long-term dependence actually ends up weakening the muscles and the ligaments that those braces are supposed to be protecting.

So work towards strengthening the knee itself and strengthening your whole chain of kinetic motion. Now for most golfers knee injuries, surgery is not the first answer.

And often the good news is, it's not necessary at all. There are lots of conservative, non-surgical treatments that have excellent track records and outcomes for the vast majority of knee injury.

Prevention Tips for Golfers

Now what is conservative care? It's rest, activity modification, physical therapy that's focused on hip mobility and core stability. Now in appropriate cases, regenerative medicine options like platelet-rich plasma or stem cell injections which use your body's own biology to support healing may be warranted.

Before we get there though, if you're experiencing swelling or instability or locking or pain that isn't improving with rest, please go see a physician who specializes in orthopedics or sports medicine.

An MRI may be indicated if you don't already have one, but please remember, interpret that with a clinician, not in isolation. All right, let's wrap this up.

Your lead knee is the anchor of your golf swing and your trail leg is your motor. If either one is irritated or if it's overloaded or it is compensating for your weak hips or tightness in your body, it will let you know.

The ache that you feel isn't random. It has a name. It has a cause and the great news is most of the time it has options and those options aren't always surgery and they're not always injections.

Often smarter mechanics, stronger hips, better lung management all work and when needed we can have targeted support that works with your body not against it.

When to Seek Treatment and Wrap-Up

Now it's time for my standard disclaimer. Yes, I am a medical doctor, but I'm not your medical. Not yet. Anyway, this is meant to be educational. It is not personal medical advice for your particular situation.

Now, if this helped you understand your knee better, help me out. Hit like and subscribe, hit me up in the comments. Where is your need pain? What would you like me to talk about next?

I'll see you pain free on the fairway.