Monitoring & Rehab of Soleus Injuries in Rugby

Mike Lancaster

Mike Lancaster is an incredibly experienced Sports Physiotherapist and currently the Senior Physiotherapist of England Rugby. Prior to this role, Mike was Head of Medical Services at Harlequins Rugby, Performance Physiotherapist at GWS and Head of Sports Medicine at Worcester Warriors.

Quick Takeaways

- Always allow for a minimum of 1 day recovery between running sessions in the earlier phases of rehab.
- Soleus makes up 60-70% of the total cross-sectional area of the calf
- 80% of the soleus is slow twitch, type I muscle fibres
- Soleus can reduce hamstring related tibial shear forces by 30% on foot impact
- Try to limit any Sickle signs with calf raise technique. This is a progressive inversion and adduction on a heel raise.
- The goal for seated single leg calf raise strength is >2.0x bodyweight

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Key Learnings

1 Take your time when rehabbing an injury involving the central or intramuscular tendon as these are typically slower and have a much higher recurrence rate.

2 When performing a seated calf raise isometric test, analyse the athlete's score at 50ms, 100ms and 150ms to give the best representation of the data and the muscle's output.

3 Aim for >70% baseline on both standing and seated isometric testing before commencing running