

PRONATION VERSUS UNDER-PRONATION ARE THERE ANY SIMPLE HOME TESTS?

Over-pronation is a common malady experienced by the population, and runners in particular. Estimates have shown that 60 to 80 percent of the population over-pronate.

To describe over-pronation in technical terms is fruitless. Let's say it is a combination of inward rotation of your foot and ankle, as pronation by definition is a tri-planar motion. Under-pronation is simply a lack of this movement during the phase of gait that normally requires it to absorb shock.

A recent study, using 17 different morphological tests of the foot compared it to motion analysis. This study demonstrated that the navicular drop test is the most valid for predicting those who over-pronate versus those who under-pronate. The navicular bone is the next prominent bone below your ankle on the inner side of your foot near the arch. The way to measure the navicular drop is somewhat subjective for the average individual as actual standards require a calculations based off arch height and foot size. However, if your navicular drops toward the floor substantially from a seated position to a standing position, you are most likely going to be an over-pronator. Unfortunately, there is not a cosmetic surgery that can correct this malady such as a navicular lift to add to your tummy tuck, and breast augmentation. So those foot fettered shallow Hal's in relationships with a flat-footed partner, will just have to put a bag over it.

Under-pronation will generally see very little change in navicular height from a sitting to a standing position. For these people, well-cushioned footwear is the key as shock absorption is the primary complication at least to injury. With over-pronators, however, control of excessive motion is your key element for keeping your tootsies happy. Shoes that are generally slightly more rigid in the rear foot and have control features to the inner part of the shoe, called medial post, will help correct this dysfunction.

Another comforting thought is the fact that this is merely a dysfunctional motion of your foot, more than likely not near as dysfunctional as other parts of your life.

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