



## HEALTH TIPS FOR PERFORMING ARTISTS SHEET 2: WHAT TO DO WHEN IT HURTS – PART 1

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### ACUTE INJURY MANAGEMENT

#### Who gets injured?

The answer is “nearly everyone”. While performers can be injured as a part of everyday life, Playing Related Musculoskeletal Disorders (PRMDs) are extremely common in this group. For instance, it is estimated that at least 70% of musicians will experience a PRMD that affects their performance. Good injury management minimizes the impact of any injury on performance and maximizes the chances of speedy resolution of the complaint.

#### It hurts - What now?

So, despite your best efforts an injury has occurred! **Now** is the time to aid and abet your body’s recovery by putting the **RICE** and **HARM** principles to work (see below). For new (or “acute”) injuries, these methods have been shown to speed recovery and prevent further damage from occurring to the damaged part over the first 48 hours.

#### What does RICE stand for?

**Rest** – prevents worsening of the injury. May need sling, brace, crutches etc.

**Ice** – apply in moist towel 15 minutes every 2 hours to relieve pain/inflammation

**Compression** – prevents swelling, limits movement and supports

**Elevation** – elevation above the heart prevents swelling



## What does HARM stand for?

Avoiding the things indicated in the HARM acronym in the first 48 hrs will reduce the risk of worsening an acute injury.

**Heat** – increases swelling. Includes heating liniments/hot packs

**Alcohol** – dilates blood vessels and aggravates swelling/inflammation

**Running** – (or performing) rest the injured part to encourage recovery

**Massage** – can increase inflammation and worsen tissue bleeding

**NB: For persisting or severe pain, diagnosis should be obtained as soon as possible**

## What about after 48 hours?

**If things are improving**, at this point some gentle pain free movement of the part and the joints above and below it should be commenced and increased as tolerated. Some light cardiovascular exercise (e.g. swimming) not involving the injured part can also facilitate recovery. As pain settles it is helpful to start some performance-related activities (short, painless practice sessions) progressing duration and difficulty only as tolerated. Acute injury can also produce shock and stress. Try some relaxation and healing imagery to reduce the negative effects of stress and focus on healing and return to performance.

**If things are not improving**, make sure you seek professional medical advice as soon as you can, and hold off from practicing or performing until you know more about your condition.



## What next?

Hopefully your injury will settle rapidly and you can make a speedy and safe return to performance using the approach above. Some injuries are slower to heal than others and may keep you from performing for a long time. If you suspect your injury is severe or may take a long time to recover you can seek help from a health professional to guide you through the stages of your rehabilitation back to performance. Remember that there are professionals too who can help you cope with the other effects of injury, such as the emotional or psychological. Ask for help.

## Who should I ask for help?

If your pain is severe or you aren't sure contact your GP for advice or refer to ASPAH Health Tip Sheet 4 for other contacts for advice

## Where to find more information

Horvath, Janet (2010). *Playing (less) Hurt: An Injury prevention guide for musicians*

St Johns Ambulance First Aid

[http://www.stjohn.org.au/images/stjohn/information/FS\\_sprains\\_aug2011.pdf](http://www.stjohn.org.au/images/stjohn/information/FS_sprains_aug2011.pdf)

## Reference

Dommerholt, J. (2009). Performing arts medicine - Instrumentalist musicians Part I : General considerations. *Journal of Bodywork and Movement Therapies*, 13, 311-319.