FEATURE ARTICLE

FOAM ROLLING FOR PERFORMANCE AND RECOVERY

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oam rollers and massage sticks have increased in popularity in the fitness industry and are often recommended by strength and conditioning professionals (5,6,10). There is evidence that shows positive effects of foam rolling on range of motion (ROM), recovery, and performance (8,9,10,14). Despite its effectiveness, the mechanisms as to how foam rolling works are not fully understood. However, it is likely that acute responses in foam rolling are similar to those elicited by manual therapy, which are thought to be neurophysiological in origin (24).

Many different health professionals including physical therapists, athletic trainers, and massage therapists use foam rolling clinically. However, foam rollers and massage sticks allow individuals to apply manual therapy on themselves, making them portable and affordable forms of therapy.

SELF-MYOFASCIAL RELEASE (SMR) FOR WARM-UP

It is well documented that pre-exercise static stretching can have a negative effect on strength and power but foam rolling has been shown to increase ROM without decreasing muscular performance (11). SMR may be a substitute for static stretching before workouts, especially if combined with dynamic warm-up exercises (8,9,11,16). In fact, two recent systematic review papers on foam rolling have concluded that foam rolling acutely increases joint ROM and decreases muscle soreness without negatively impacting performance (2,15). However, it should be noted that dynamic stretching and foam rolling elicit similar increases in hip flexion range of motion (3).

FOAM ROLLING FOR RECOVERY

SMR through the use of foam rolling may also be beneficial for post- and between-workout recovery. Foam rolling has been shown to decrease delayed onset muscle soreness (DOMS) when performed following exercise (9,13). One study examined the effect of post-exercise foam rolling on muscle soreness and performance. The subjects completed 10 sets of 10 repetitions (German volume training protocol) of the back squat at 60% of one repetition maximum (1RM). Subjects who performed a 20-min foam rolling session immediately 24 hr and 48 hr after exercise had significantly lower quadriceps DOMS than those who did not (13). Additionally, the foam rolling recovery work caused faster recovery of muscular function as measured by sprint time, power output, and dynamic strength-endurance (13). Foam rolling has also been shown to speed heart rate and blood pressure recovery following high-intensity exercise as compared to placebo treatment (1).

FOAM ROLLER DENSITY AND OTHER TOOLS

The increased popularity of SMR and foam rolling has led to the development of many different types of foam rollers, such as softer, less dense, harder, and more rigid rollers. There are also multilevel rigid rollers, which have ridges of isolated contact area as opposed to the standard foam roller. Research suggests that the significantly higher pressure and isolated contact area of the multilevel rigid roller can have a potentially greater benefit (7). Although high-density rollers may be more therapeutic, they can

cause significant discomfort during use. Many people begin with a softer roller and progress to a firmer one as their pain tolerance increases.

However, foam rollers are not the only SMR tools available; massager sticks and massage balls, including tennis and I acrosse balls, are also used for this type of therapy. These tools are smaller and more portable than foam rollers and can be good alternatives to the standard foam roller. Massage sticks have been shown to increase range of motion while not decreasing muscle strength (17).

OPTIMAL PROTOCOL FOR FOAM ROLLING

Foam rolling has been shown to cause significant ROM increases when paired with a static stretching routine. A recent study found that this combination significantly increased passive hip-flexion ROM compared to foam rolling or static stretching alone (12).

One protocol that has shown to be effective in the literature involves rolling the length of the muscle 3 – 4 times over the course of 1 min, followed by 30 s of rest, followed by another bout of foam rolling for 1 min (10). Tables 1 and 2 provide a sample program for SMR through the use of a foam roller and massage stick.

CONCLUSION

SMR through the use of foam rolling or other implements is a time and cost-efficient method of increasing performance and recovery. One of the most common mistakes when using foam rollers or other SMR tools is going too fast. Some discomfort or slight pain is normal when working on sensitive areas, and moving too quickly over them can take away the full benefit of the therapy. Although SMR may be effective, it is always advisable to consult a physician or other healthcare professional before beginning any type of self-treatment.

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FOAM ROLLING FOR PERFORMANCE AND RECOVERY

ABOUT THE AUTHOR

Sean Kratchman is currently in his senior year of undergraduate studies at Georgetown College, where he is pursuing an exercise science degree. He played football at Georgetown College for four years and was a 2014 National Association of Intercollegiate Athletics (NAIA) Champion of Character. Upon graduation, Kratchman plans to attend Eastern Kentucky University for his Master of Arts degree in Occupational Therapy.



FIGURE 1. FOAM ROLLER - UPPER BACK



FIGURE 3. FOAM ROLLER - HAMSTRINGS

Brian Jones is an Assistant Professor of Exercise Science in the department of Kinesiology and Health Studies at Georgetown College in Kentucky. He has worked as a strength coach for several different Division I athletic teams at the University of Kentucky and has strength coaching experience with high school and professional athletes. Jones has authored three books, two book chapters, and numerous articles on strength training, supplementation, and other exercise science topics. Jones has served as the National Strength and Conditioning Association (NSCA) State Director for Kentucky and currently sits on the Advisory Board for Kentucky and the Great Lakes Region. He has a 2nd degree black belt in Brazilian jiu-jitsu and is the owner and head coach of Valhalla Academy, a jiu-jitsu school in Frankfort, KY.



FIGURE 2. FOAM ROLLER - LOWER BACK



FIGURE 4. FOAM ROLLER - HIP ADDUCTORS



FIGURE 5. FOAM ROLLER - ILIOTIBIAL BAND



FIGURE 6. FOAM ROLLER - GLUTEALS

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FIGURE 7. FOAM ROLLER – ACHILLES TENDON

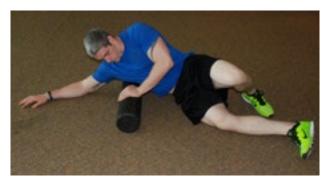


FIGURE 8. FOAM ROLLER - LATS AND TERES MINOR



FIGURE 9. FOAM ROLLER - TRICEPS



FIGURE 10. MASSAGE STICK – QUADRICEPS



FIGURE 11. MASSAGE STICK - CALF



FIGURE 12. MASSAGE STICK – HAMSTRINGS



FIGURE 13. MASSAGE STICK – LOWER BACK

FOAM ROLLING FOR PERFORMANCE AND RECOVERY

TABLE 1. SAMPLE FOAM ROLLING ROUTINE Calves: Pass along the Hamstrings: Pass Glutes: Cross one Iliotibial (IT) Band: Adductors: Pass along entire muscle pointing leg over the other Roll the length of the the entire muscle, along the entire muscle toes in and out to get pointing toes in and out knee and roll. IT band from hip to spending extra time on the upper half the entire muscle. to get the entire muscle. the lower leg. This area may need extra work. of the muscle. Lats: Roll along the **Shoulders:** Put the hands **Triceps:** Pass along the Middle Back: Pass along Upper Back: Pass along entire length of triceps, spending extra the left, middle, and the left, middle, and together as if sleeping right sides of the back right sides of the back the muscle. on one side, then pass attention near the elbow. with both hands behind with both hands behind along entire shoulder. Flex and extend the your head. Repeat elbow while rolling. the head. Repeat while hugging the body with while hugging the both arms. body with both arms. Pay special attention to the trapezius.

TABLE 2. SAMPLE MASSAGE ROLLER STICK ROUTINE

Quadriceps: Roll along all parts of the	Hamstrings: Flex the knee and roll along	Calves: Pass along the entire muscle, hitting the	Gluteals: Stand up and roll along all the	Lower Back: While standing, roll up and
quadriceps muscle.	the hamstrings.	inside and outside of the calves.	gluteal muscles.	down the lower back.