

2017

Lower leg and foot contributions to turnout in university-level female ballet dancers: A preliminary investigation

Sarah Carter

Edith Cowan University, University of Western Australia

Alan R. Bryant

University of Western Australia

Luke Hopper

Edith Cowan University

Follow this and additional works at: <https://ro.ecu.edu.au/ecuposters>



Part of the [Dance Commons](#), and the [Podiatry Commons](#)

Originally published as Sarah L. Carter, Alan R. Bryant, and Luke S. Hopper (2017) Lower-Leg and Foot Contributions to Turnout in University-Level Female Ballet Dancers. *Poster presented at the realise 2017. Austrasian Podiatry Conference, May 24-25, Melbourne.*

Recommended Citation

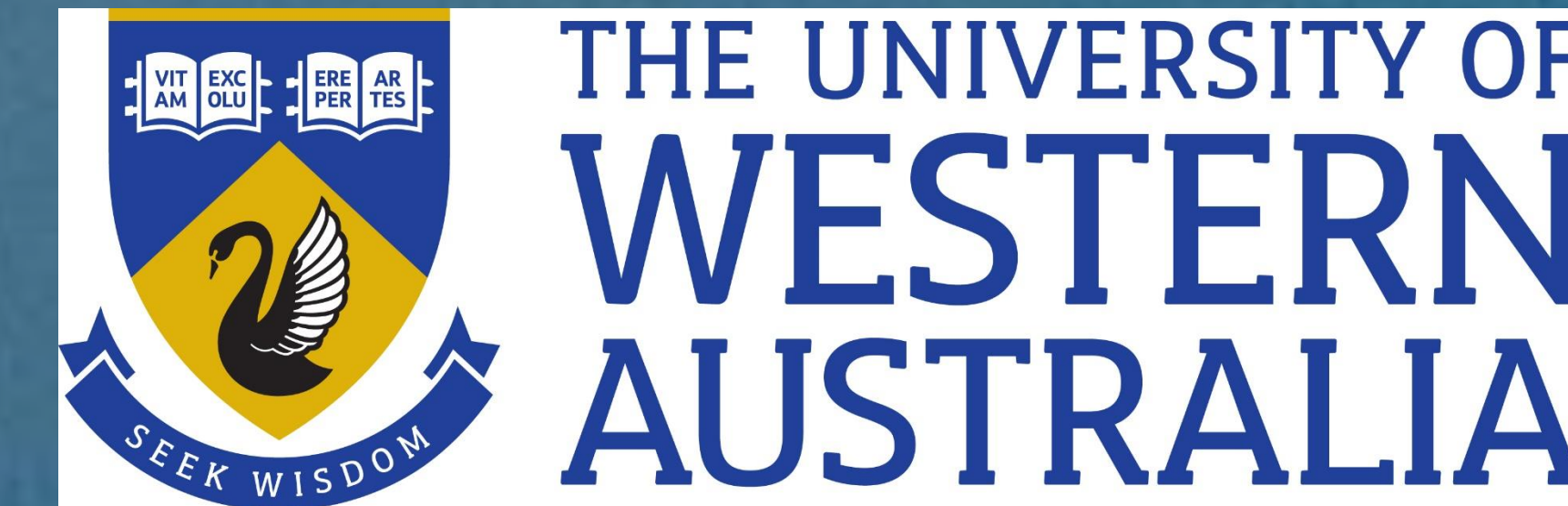
Carter, Sarah; Bryant, Alan R.; and Hopper, Luke, "Lower leg and foot contributions to turnout in university-level female ballet dancers: A preliminary investigation" (2017). *ECU Posters*.
<https://ro.ecu.edu.au/ecuposters/25>

Lower leg and foot contributions to turnout in university-level female ballet dancers: A preliminary investigation

Sarah L. Carter, MSc ^{1, 2}, Alan R. Bryant, PhD ¹, Luke Hopper, PhD ²

¹ Podiatric Medicine and Surgery, School of Allied Health, The University of Western Australia (UWA), Australia

² Western Australian Academy of Performing Arts (WAAPA), Edith Cowan University (ECU), Australia



INTRODUCTION

- Functional turnout in ballet involves maximal external rotation through the lower limb kinetic chain.
- Dancers will tend to increase their functional turnout angle through additional tibiofemoral external rotation and pronation of the foot/ankle complex.¹ (Figure 1 - 3)
- Hip external rotation measures in functional turnout has received extensive examination in dance science. ²⁻⁵
- The relationship between the 'below the hip' assessments with functional turnout is poorly understood.



Figure 1. A dancer performing forced turnout in sagittal view.



Figure 2 Dancer demonstrating hindfoot eversion, medial bulging of the talar-navicular joint, forefoot abduction, toes gripping the floor and lateral deviation of the hallux.

AIM

- To explore the non-hip components of turnout to dancers' functional turnout in first position by assessing passive external tibiofemoral rotation (pTFR) and active measures of foot pronation; navicular drop and Foot Posture Index (FPI © Version 6).

METHODS

- Nineteen female university-level classical ballet and modern dance students (mean age 17.9 ± 0.9 years) volunteered in this descriptive correlational study.
- Navicular drop, FPI, pTFR (Figure 4) and functional turnout were measured for the participants' right and left lower limbs. Measures of pronation were conducted with the dancer standing in parallel and turnout. All clinical measures demonstrated excellent reliability, ICC 0.90-0.93.
- A multiple linear regression model was used to estimate the amount of variance in functional turnout which can be explained by the measured variables.

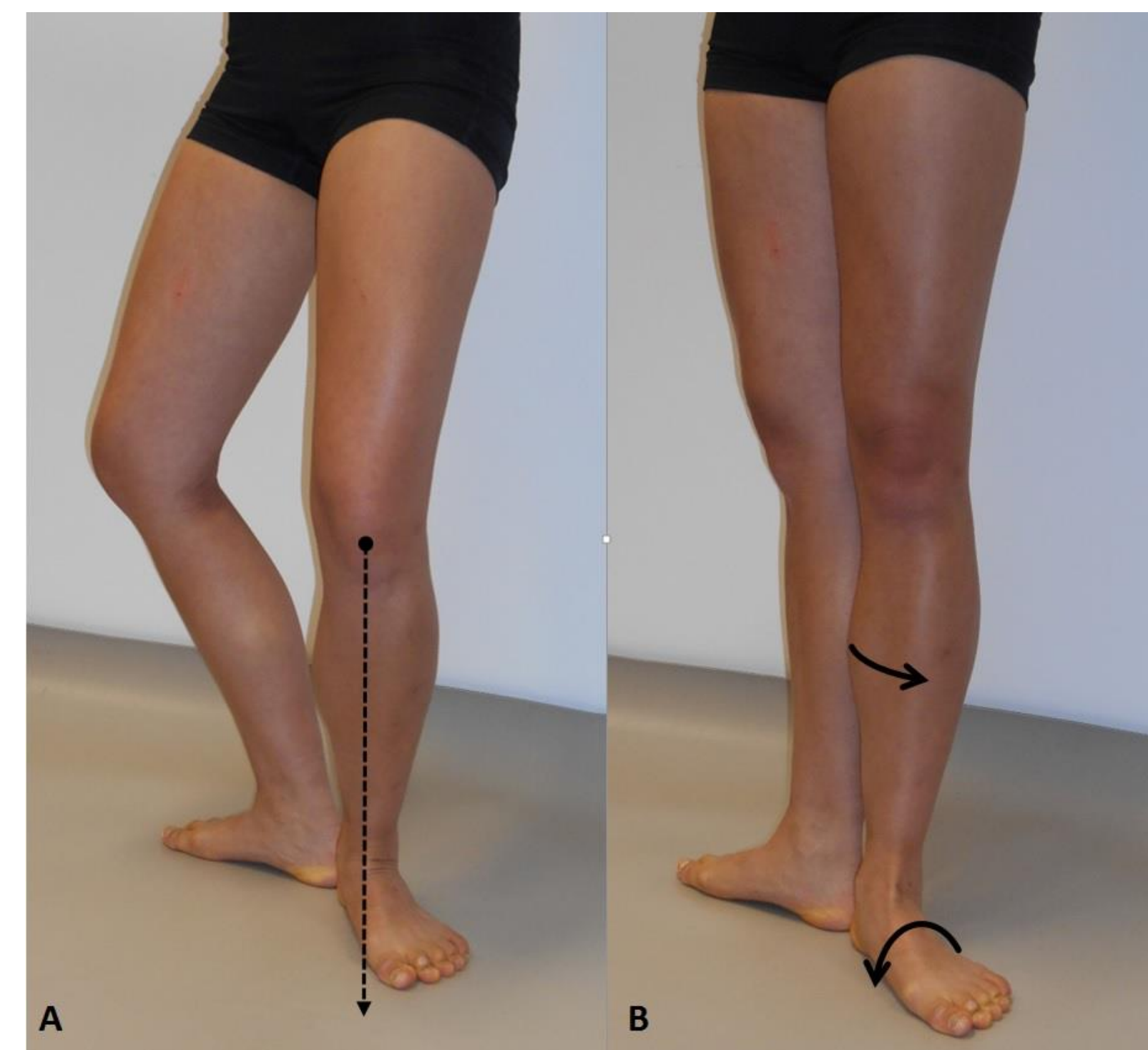


Figure 3. A: Forced turnout in demi-plie, plumb line (dotted line) demonstrating poor knee-foot alignment (knee is medial to the second metatarsal). B: Forced turnout in first position with an excessively externally rotated tibia and pronation through the foot.

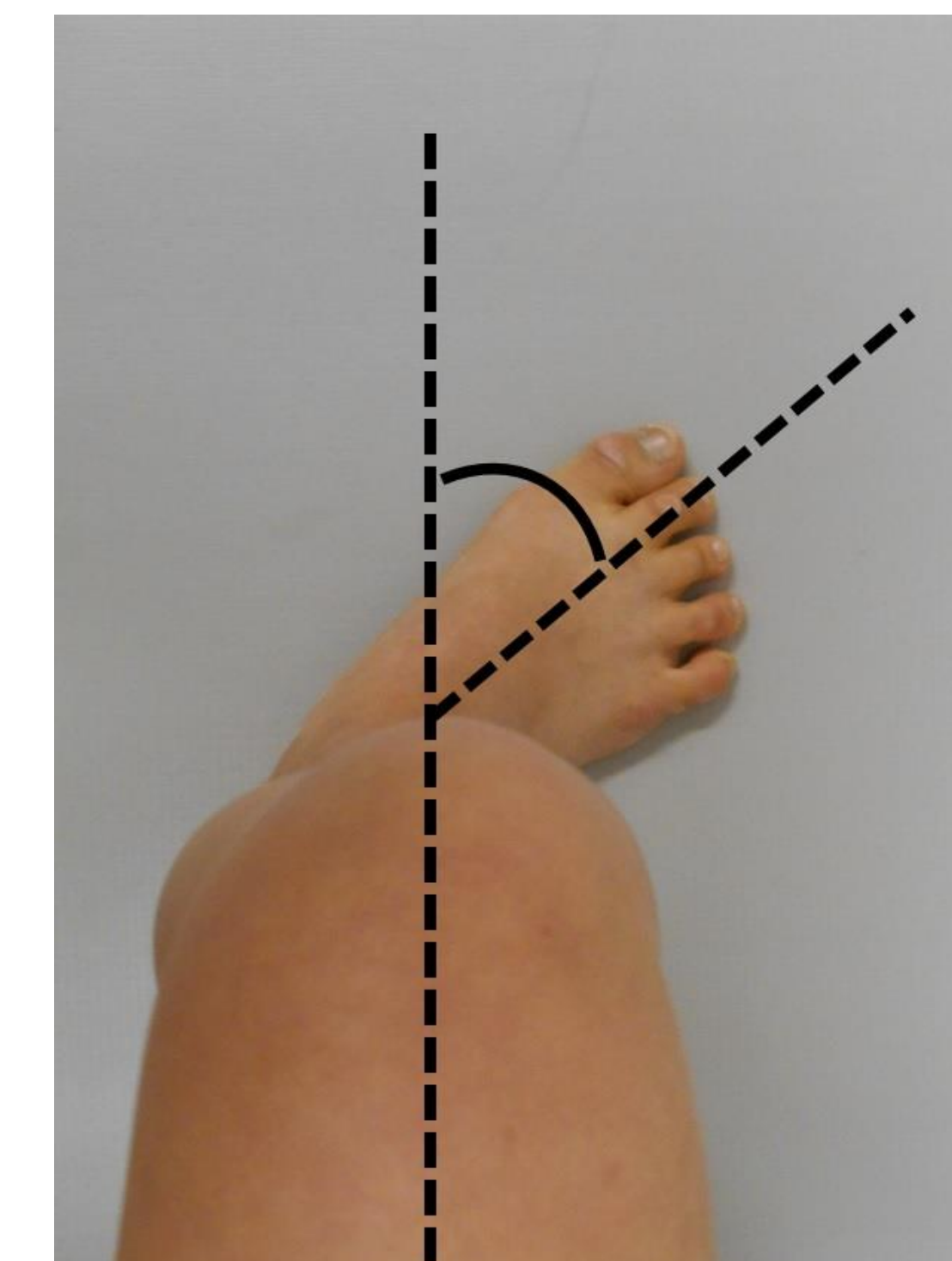


Figure 4. Measurement technique to assess passive tibiofemoral external rotation angle.

RESULTS

- Stepwise multiple linear regression model analyses revealed a weak relationship between pTFR and functional turnout, with the latter accounting for approximately 19.0 % variance of functional turnout.
- Spearman's rho correlation analysis revealed a moderate negative relationship between pTFR and FPI in functional turnout ($p = -0.47$, $P = 0.043$).
- Results suggest dancers with limited tibiofemoral rotation recruited pronation about the foot/ankle complex to further increase their functional turnout angle.

CONCLUSIONS

- Our findings suggest dancers used variable amounts of motion at the anatomical locations depending on their functional and anatomical capability.
- Ongoing research would benefit from in situ measures of dancers' lower leg contributions to functional turnout such as that provided by modern three-dimensional biomechanical evaluations

ACKNOWLEDGEMENTS

The dancers from the Advanced Diploma of Dance program at the WAAPA at ECU who participated in this study. The second and third year UWA Podiatric Medicine Students for their assistance during data collection. Rebekha Duncan for the video file. The financial support the Australian Postgraduate Award scholarship.

- Howse J, McCormack M: "Technical faults and anatomical variations : their cause, consequences and treatment", in Anatomy dance technique and injury prevention, 4th ed, p 202, Methuen Drama, London, UK, 2009.
- Champion LM, Chatfield SJ. Measurement of turnout in dance research: a critical review. J Dance Med Sci. 2008;12(4):121-35.
- Sutton-Traina K, Smith JA, Jarvis DN, Lee S-P, Kulig K. Exploring active and passive contributors to turnout in dancers and non-dancers. Med Probl Perform Art. 2015;30(2):78-83.
- Gilbert CB, Gross MT, Klug KB. Relationship between hip external rotation and turnout angle for the five classical ballet positions. J Ortho Sports Phys. 1998;27(5):339-47.
- Khoo-Summers LC, Prather H, Hunt DM, Van Dillen L. Predictors of first position turnout in collegiate dancers: the role of tibiofemoral external rotation and hip external rotation. Am J Phys Med Rehabil. 2013;92(2):136-42.

