

Mercury grabs Brighton event

Meg Mallon sunk a 10-foot birdie putt on the third playoff hole as Mercury edged Plymouth Salem for the Brighton Best Ball Invitational golf championship last week.

Mallon, a senior, mastered the short par-4, 207-yard ninth hole enroute to medalist honors in the 14-team event. She shot an 18-hole score of 82, reaching the ninth hole on her tee shot in regulation action.

Mercury and Salem finished with identical team scores of 79 to force the playoff.

Birmingham Marian, placing two golfers in the top 10 individual spots, was third with 80. The Mustangs' LuAnne Cherney finished second, behind Mallon, with an 82. Teammate Lynn Crace was 10th with 88. Mercury's Danielle Corrivau shot 100.

Earlier in the week, Mercury nipped Bloomfield Hills Andover 225-226 at Wakefield, and edged Marian 191-198 at Edgewood.

golf

Edgewood the Marlins' home course. Mallon was the medalist in both dual matches.

ROCHESTER 190 KINGSWOOD 205

Rochester's girls' golf team is undefeated with a perfect 6-0 record. Coach John Bailey's squad notched win No. 6 Tuesday afternoon with an easy 190-209 victory over Bloomfield Hills Kingswood at Pontiac Country Club.

Falcon senior Sheryl Walden was the match medalist with a 44. Teammate Andrea Murray shot 44. Kingswood was led by Jeanne Gibbons' 48.

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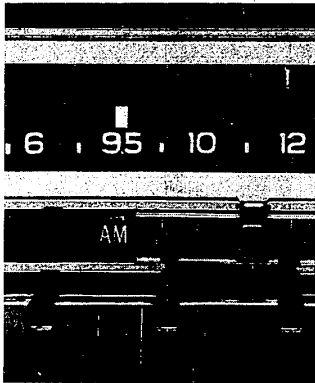
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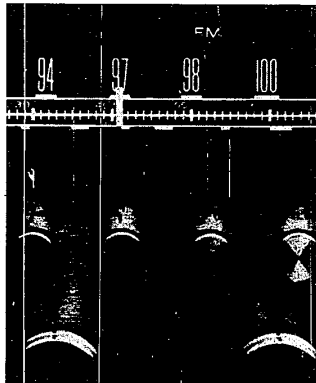
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jogging

Dr. Charles R. Young

Knee pain — a common problem with joggers

Knee pain owns the dubious distinction of being the most frequent clinical condition experienced by runners.

The source, clinical character and level of feelableness of knee pain vary from runner to runner. It's the responsibility of the sports-minded physician to focus on these factors, examine and explore the problem's history.

Years ago, a runner with knee pain was advised either to stop running, receive injections or oral anti-inflammatory medication, or to have surgery.

Today, both examination and treatment procedures have improved. Our understanding of the knee and appreciation for the needs of the runner as an athlete have changed immensely.

AS A FOOT specialist, the primary goal during initial examination of a running-knee problem is to ascertain whether the condition is intrinsic or extrinsic. In other words, is there a previous history of injury to the knee, is there localized swelling, was the condition a result of running or is it a pre-existing ailment merely aggravated by the external influences of the activity?

Our evaluation involves factors like discoloration, pin-point pain in and around the joint, painful limitation of motion, inability to bear weight comfortably and existing ailment with knee involvement.

This line of questioning and clinical exam distinguishes the problem as an inherent knee condition, probably aggravated by running.

Such a patient immediately is referred to as a sports-oriented orthopedic surgeon.

ONCE WE'VE DETERMINED the patient's pain is secondary, or a result of factors outside the knee, our next approach is to categorize its origin.

We evaluate limb-length differences, back or shoulder curvatures, lower limb deviations, particular muscle strength and flexibility ranges and examine foot and ankle position.

By the conclusion of our examination and review of the findings, we're able to categorize the problem into one of four types.

The first type deals with ligaments and/or tendons in and around the knee joint. There may be restrictions in the flexibility and range of certain muscle groups as well as abnormalities in strength. Proper exercise patterns and specific physical therapy often prove beneficial in these cases.

A second category is the shock-impact group. Here, we deal with a seemingly normal limb, which, for some reason, is unable to adequately absorb and dissipate shock on contact with the ground.

Upon heel contact when running, we know that tremendous pressure and force are transmitted into the limb by way of the foot.

Normally, this force is handled without problems due to joint functioning and ranges of motion.

In a number of cases, this shock-absorbing mechanism somehow misfunctions and pain — usually at the knee level — results.

THE THIRD CATEGORY is biomechanical dysfunction of the foot and ankle which leads to knee stress. This title is not truly accurate. In actuality, the motions occurring within the foot may not be dysfunctional at all, but stress-producing because of normal function.

Due to various positions of the foot and leg at heel contact, the foot goes through certain motions which encourage stability and allow proper weight-bearing and ambulation.

Along with these foot motions, however, goes limb motion which often creates stress and strain on the knee. The obvious approach in therapy is to control these excessive motions to reduce the excessive stress levels. Although rather simplistic in nature, the actual management is often much more complex.

The fourth category is perhaps the most frequent and certainly the most troublesome.

FOR LACK of a better title, we refer to it as "combined." It entails combinations of the above-mentioned problems.

Our success in treating the knee problem in the jogger seems to depend on how well we isolate the probable cause. Types of devices utilized in shock-absorptive versus biomechanical problems are as different as are their respective results. The combined problems necessitate a thorough and complete examination followed by a specific therapeutic approach.

An evaluation of the knee pain's source and character must be made to insure its proper management.

For the afflicted jogger, the condition should not be left unattended, because its course is usually progressive with the possibility of irreversible harm.

Dr. Charles Young, a Livonia podiatrist, writes a jogging column for the Observer & Eccentric newspapers.

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WOODLAND MEDICAL CENTERS
announces additional scheduling for their continuing
Community Health Information Program

Woodland Medical Centers' Community Health Information Program is a series of free admission seminars designed to provide information about various common health problems and their proper care.

ARTHRITIS AND ITS TREATMENT—Monday, May 11, 10:00 a.m.
Presented by James Lesser, M.D., Rheumatology (Arthritis Specialist), Internal Medicine Specialist
Arthritis is among the most widespread ailments in the United States. Dr. Lesser will talk about the common causes of joint, muscle and back pain, including rheumatoid arthritis, osteoarthritis and gout. The most effective treatment measures now available will also be discussed.

DIABETES MELLITUS—BASICS—Monday, May 11, 7:30 p.m.
Presented by Jack Litwin, M.D., Internal Medicine
Diabetes Mellitus is among the most common chronic diseases. There is much excitement over new research being done in this area. Dr. Litwin will discuss the definition, possible causes and modern treatment.

NATURAL CHILD BIRTH AND OTHER MODERN TRENDS IN OBSTETRICS—Thursday, May 14, 7:30 p.m.
Presented by Bernard Greenberg, M.D., Obstetrics/Gynecology
The birth of a new child is among the most exciting events in one's lifetime. Much has been written about modern trends in childbirth and Dr. Greenberg will discuss the traditional versus newer approaches along with videotapes of actual deliveries.

ARTHRITIS AND ITS TREATMENT—Monday, May 18, 7:30 p.m.
Presented by Samuel Indenbaum, M.D., Rheumatologist
Arthritis is among the most widespread ailments in the United States. Dr. Indenbaum will talk about the common causes of joint, muscle and back pain, including rheumatoid arthritis, osteoarthritis and gout. The most effective treatment measures now available will also be discussed.

Residents of the metropolitan area are invited to attend any or all of the medical topics being presented at the Novi location by specialists on the Woodland Medical Center staff. The topics and dates for the month of May are:

METHODS OF DIAGNOSIS AND MANAGEMENT OF MALIGNANT DISEASES—Thursday, May 21, 7:30 p.m.
Presented by Paul Aronson, M.D., Hematology, Internal Medicine
Malignant diseases, such as cancer and other tumors which spread to surrounding body tissues, are the topics of widespread discussion and research. Dr. Aronson will discuss topics including the use of radiation therapy, facts and myths about chemotherapy, and the future of cancer treatment.

BACK PAIN—Wednesday, May 27, 7:30 p.m.
Presented by Thomas Dilkoff, M.D., Orthopedic Surgeon
Back pain is among the most common cause of work disability. Dr. Dilkoff will discuss the numerous causes, including bone, muscle, tendon, joint and psychologic causes. Treatment modalities will also be discussed.

DISEASES OF THE BREAST—Thursday, May 28, 7:30 p.m.
Presented by Richard Smol, M.D., Radiologist, Maurice Frankel, M.D., General Surgeon, Leopoldo Eisenberg, M.D., Hematology, Oncology
The early detection of breast cancer can have tremendous impact on cure rates. There are also many breast diseases which can mimic breast cancer. Our panel of experts will discuss early detection and modern trends in treatment.

For registration and information on the complete summer schedule of the Woodland Community Health Information Program, call Woodland Medical Center at 348-8000 or 855-3222.

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