



# Impact of cycling insoles on body statics and performance



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# Oliver Elsenbach

Certified Sport Scientist (Diploma)

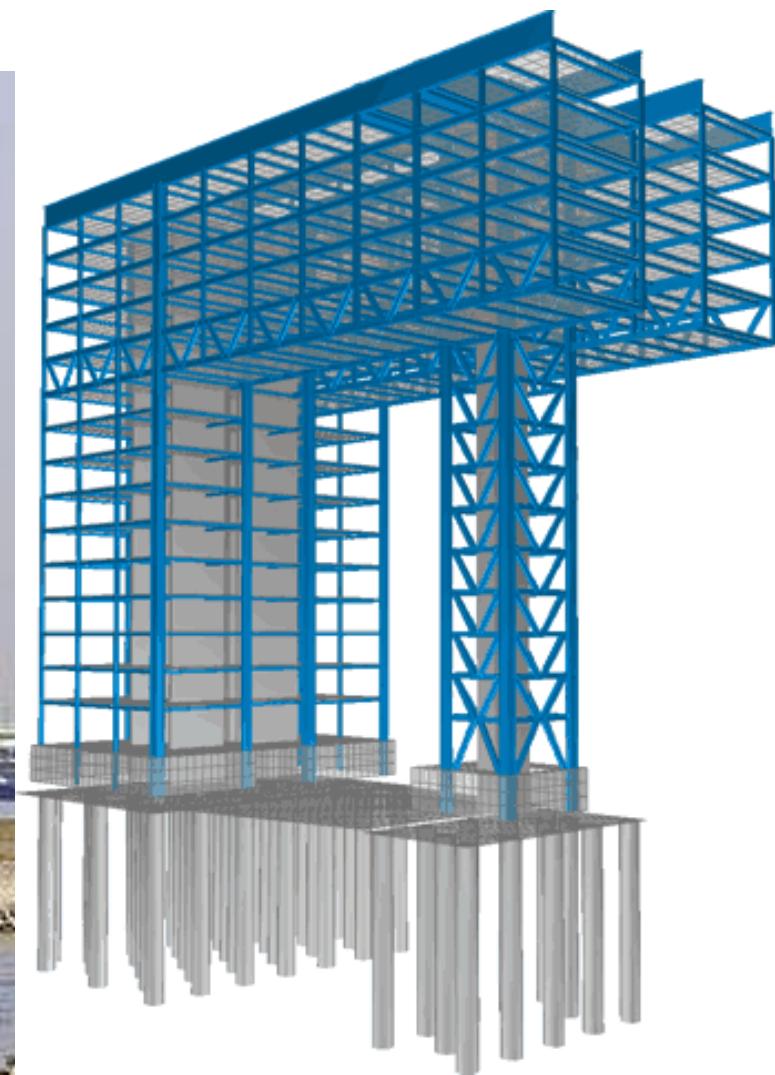
Since 1998 sports diagnostics and training

2003 Orthotics for cyclists

2008 Founding of KOM\*SPORT sports diagnostics

2010 Founding of SOLESTAR cycling insoles

# Fundament



# Fundament Cycling



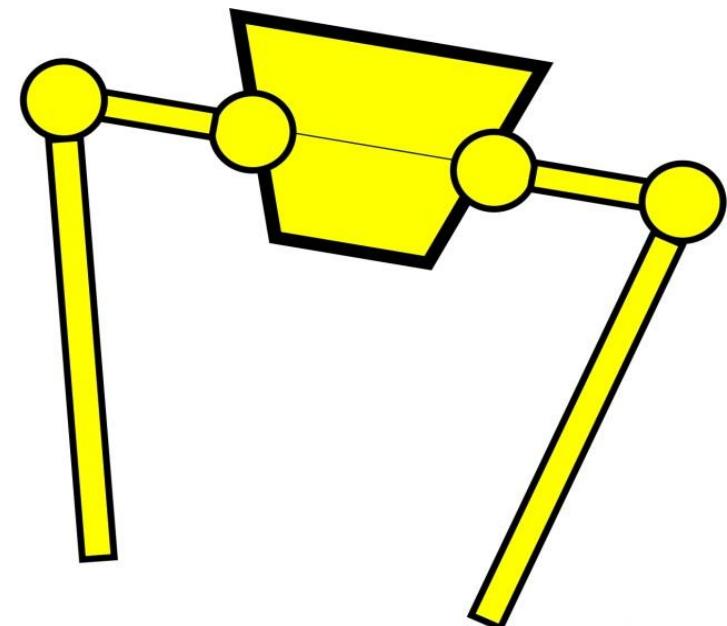
Closed system  
100% foot contact  
Whole body  
Static / Dynamic  
4 - 20 cm<sup>2</sup> pedalplatform  
Foot : instable structure  
=> 33 joints / 26 bones  
Long time endurance sport  
=> Muscle fatigue

The foot is designed for standing, walking and running



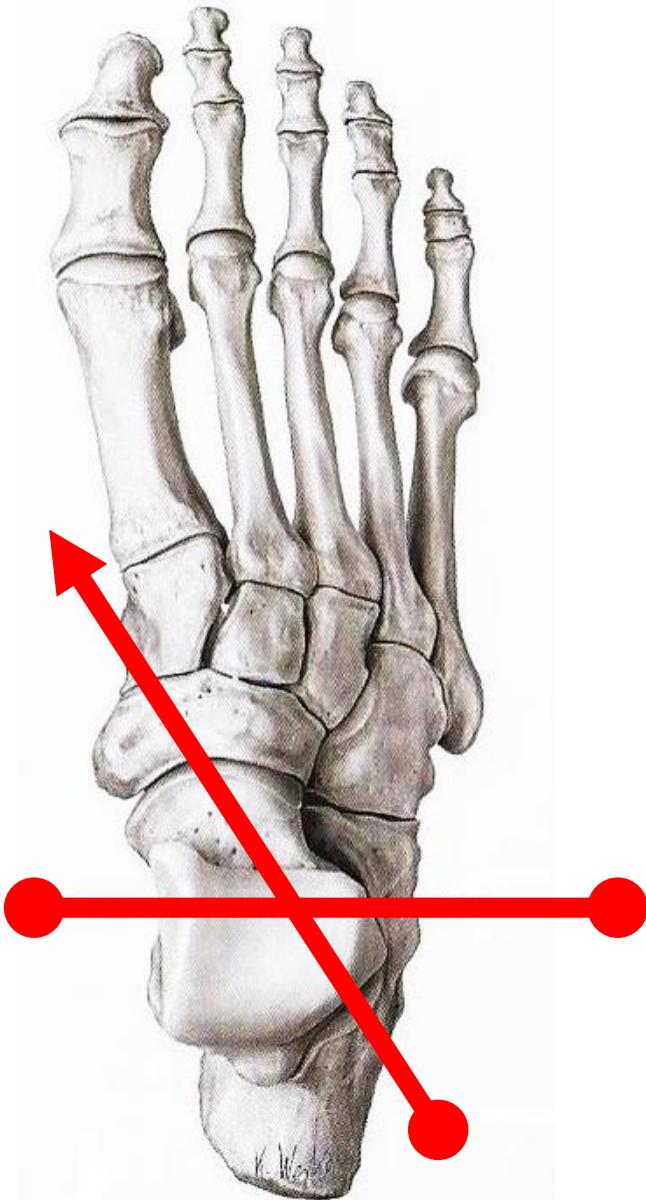
- Evolution -

Differences of the length of legs (<20mm) are within the norm  
(Knutson,2005)



- Asymmetries -

# The Foot



33 joints

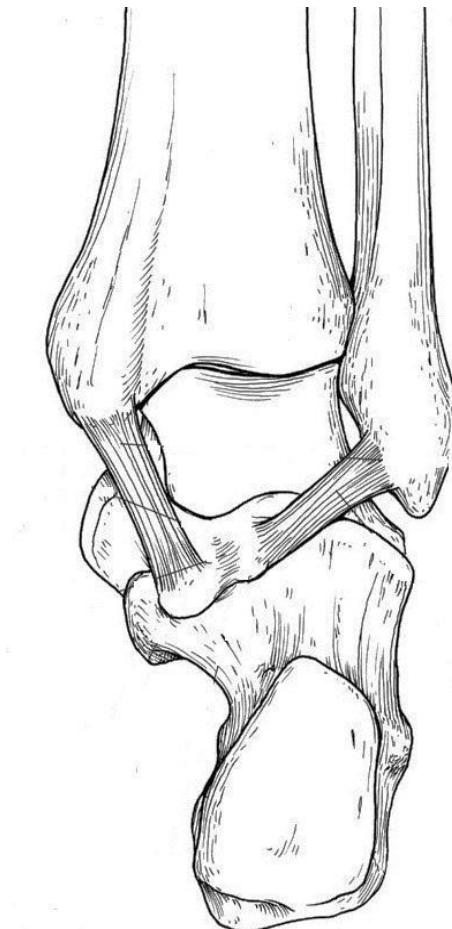
Ankle joint

Malleolus

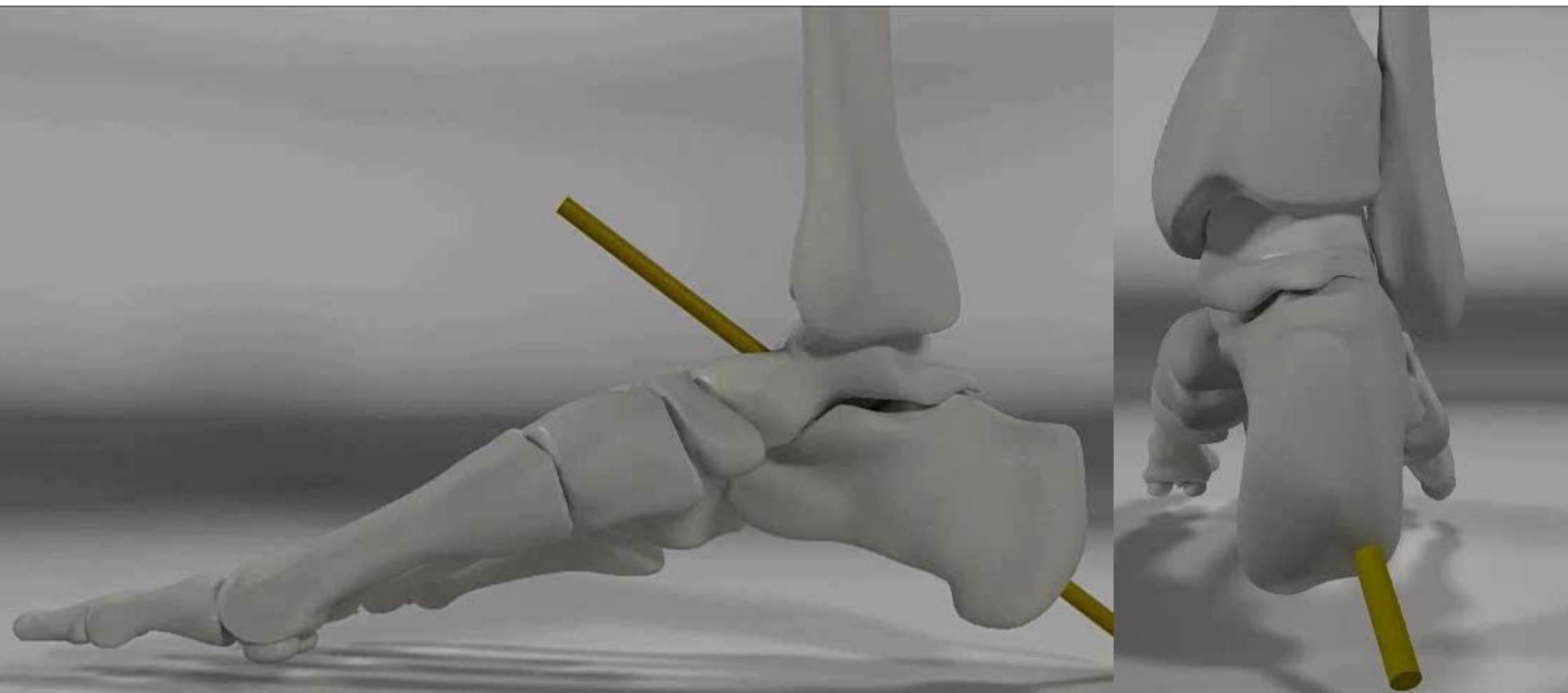
Subtalar joint

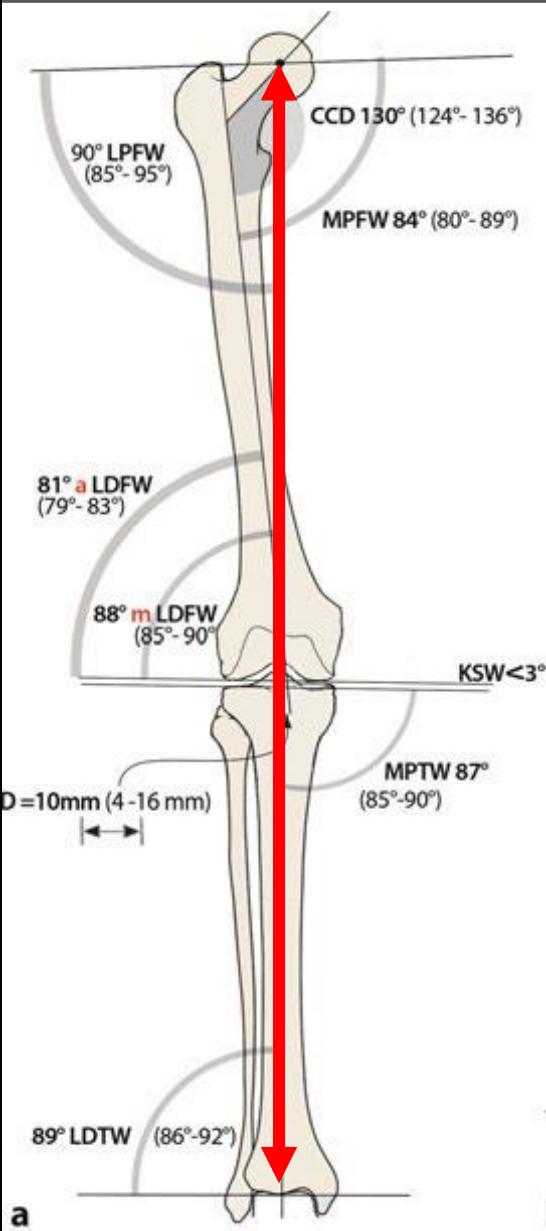
“2” axes

Center of rotation ?

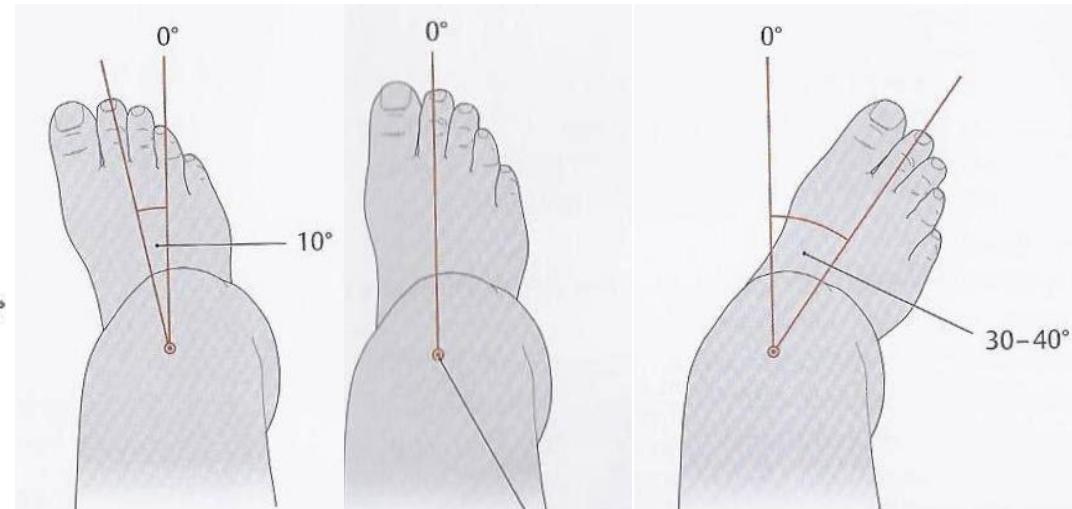


# Pronation



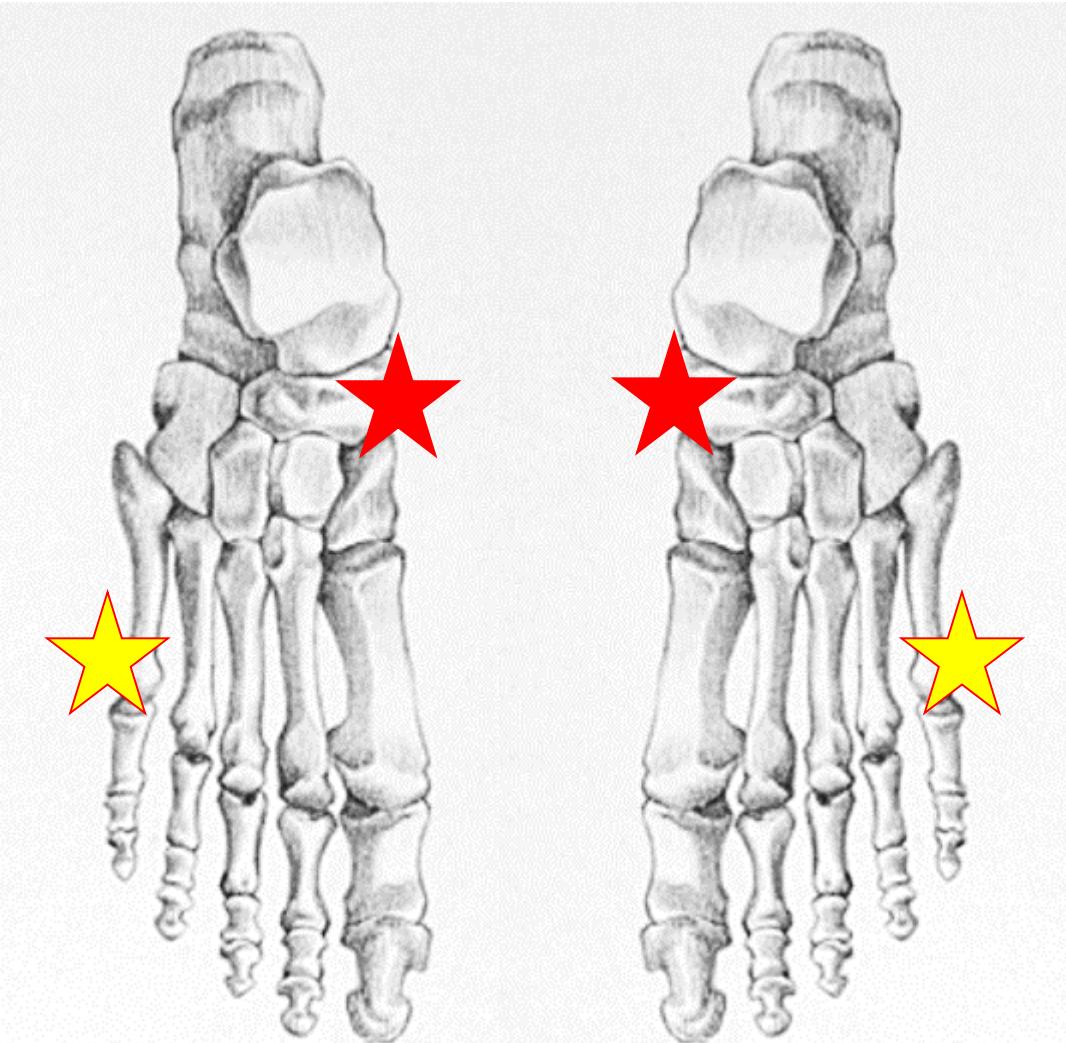
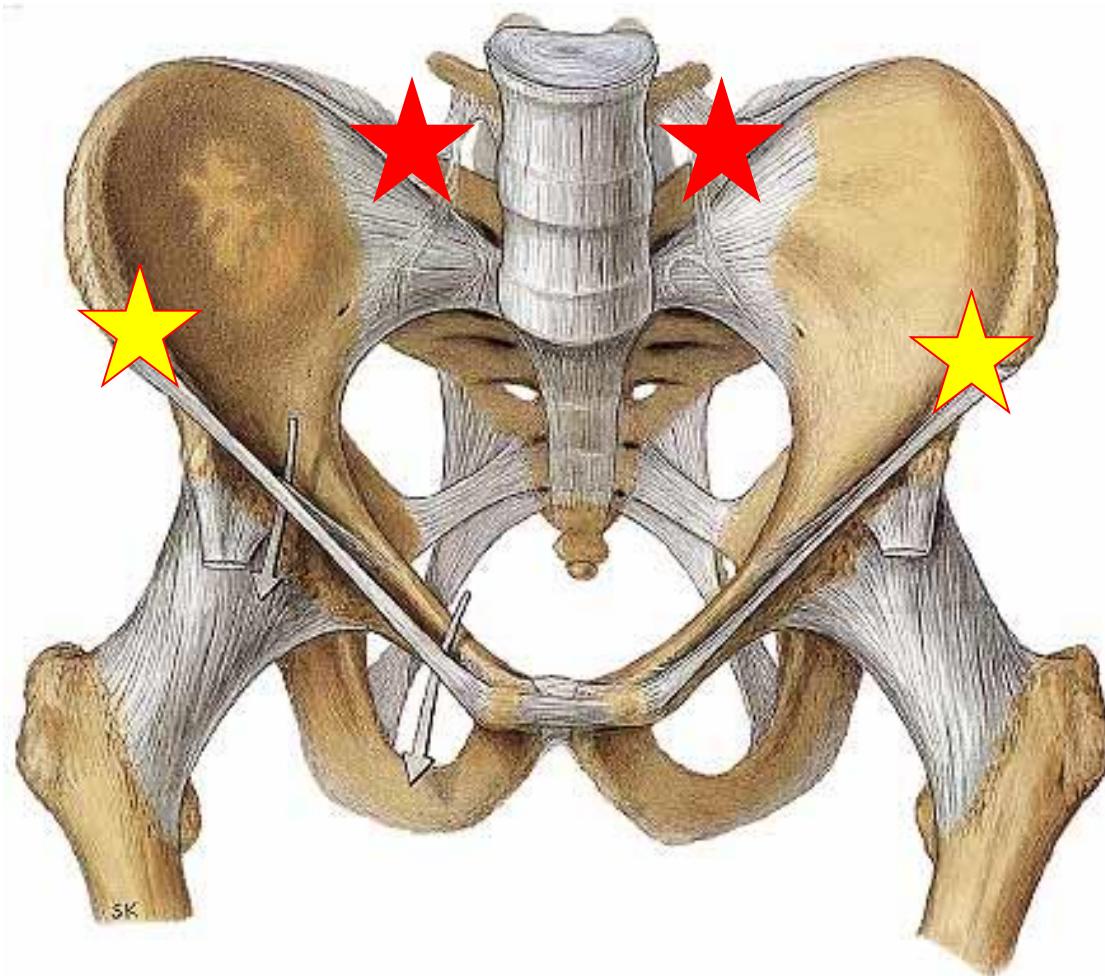


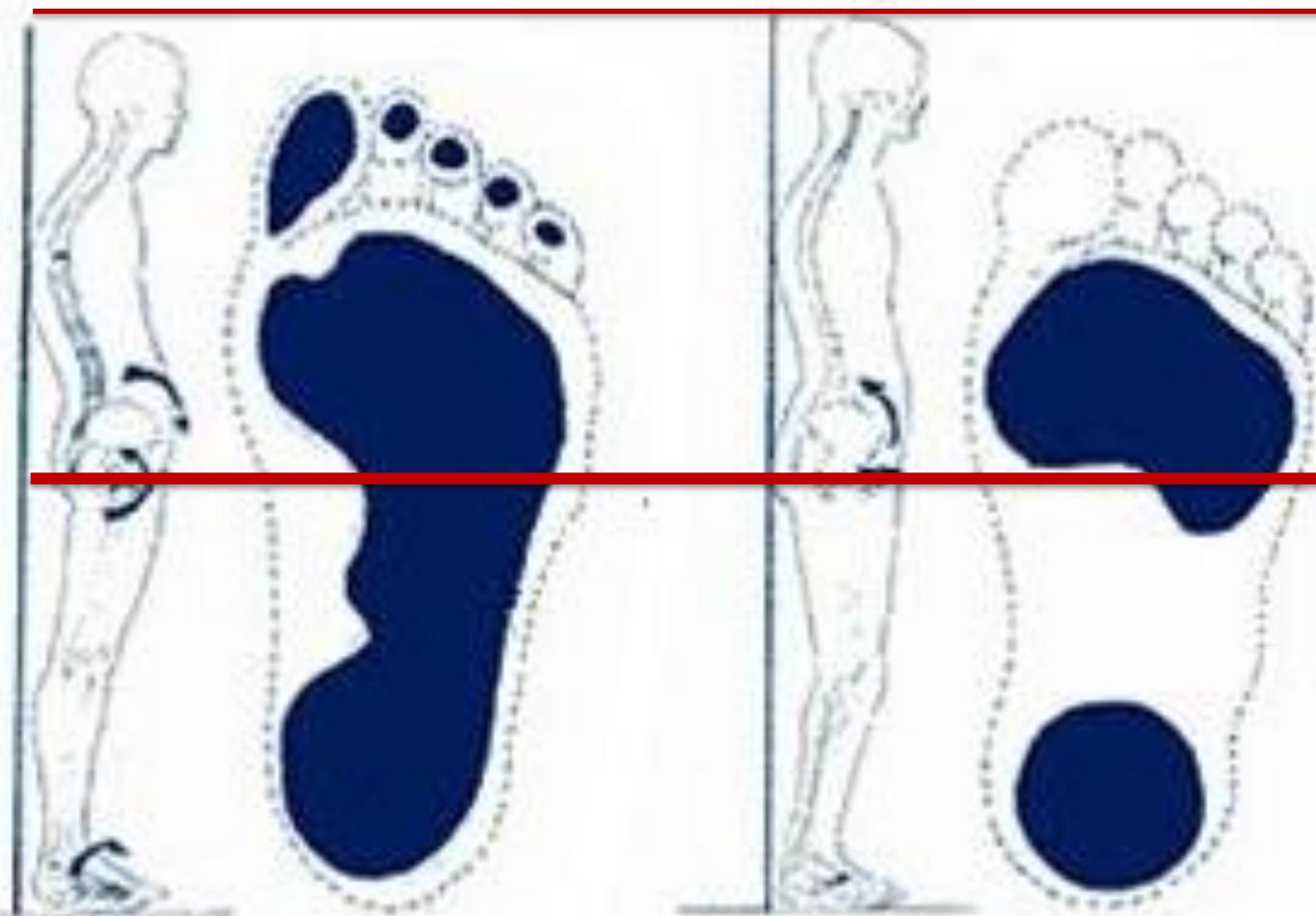
Mikulicz-Line (knee 3° varus)  
lateral open angle (174° average)



In cycling:  
up to 15° knee rotation  
40 ° knee extension – flexion

# Connection





Flatfoot

Highfoot

**Pelvis rotation**

Flatfoot -> anterior

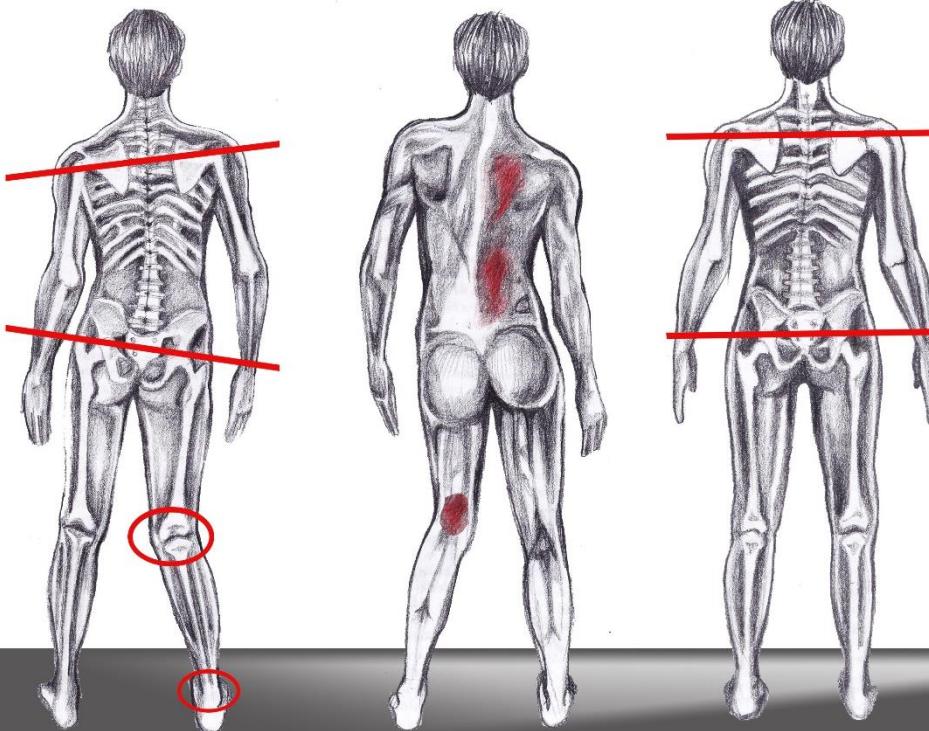
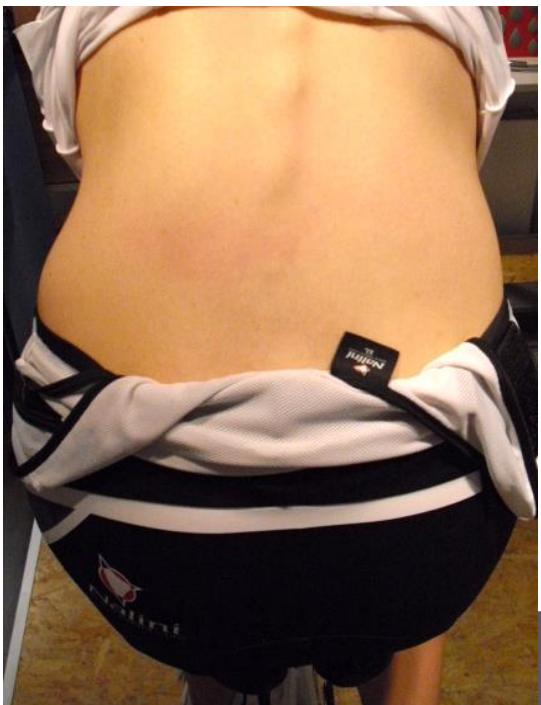
Highfoot -> posterior

**Body height**

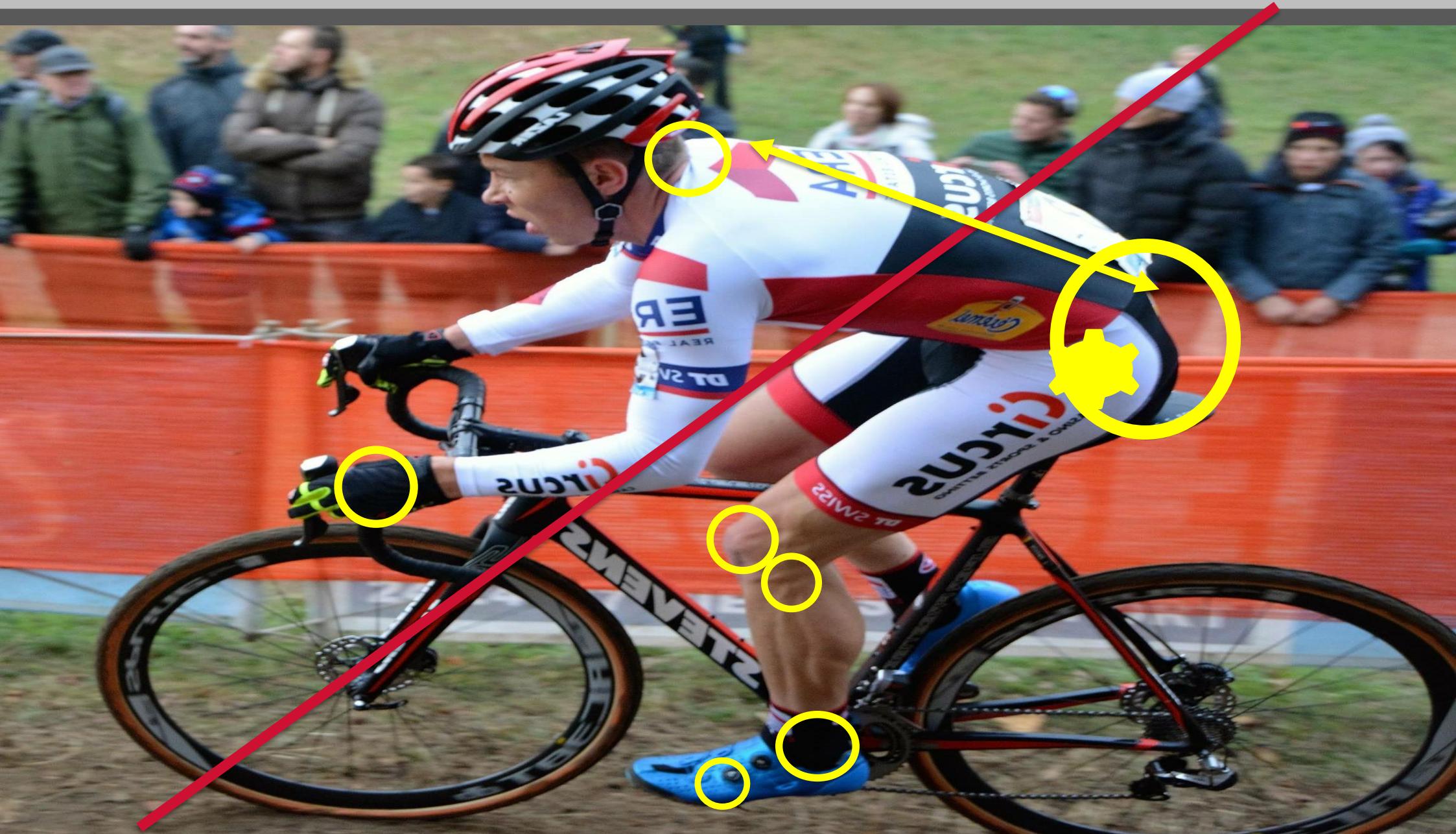
**Leg length**

**Range: up to 30mm**

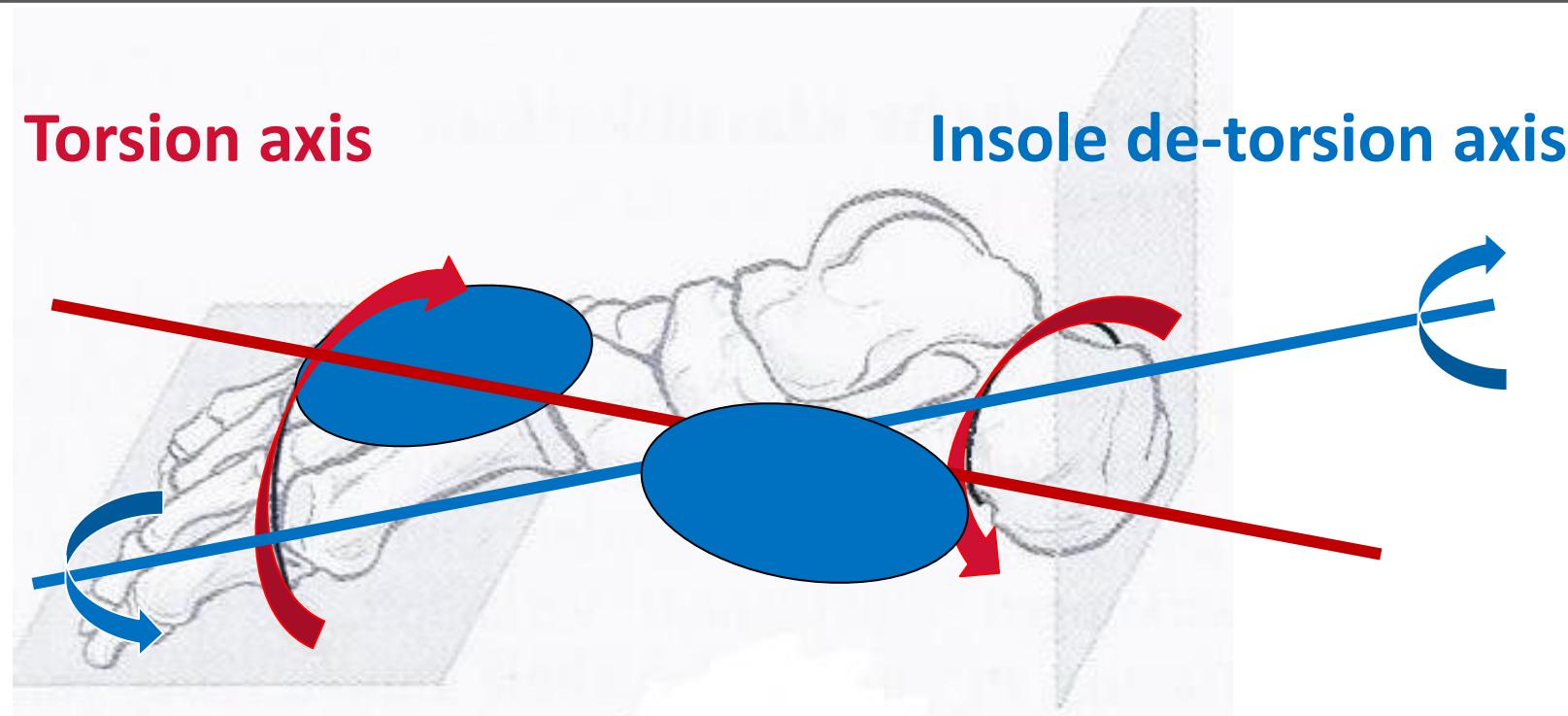
# Dysbalance



# Bottom up System



# Foot Torsion



**Forefootsupination**

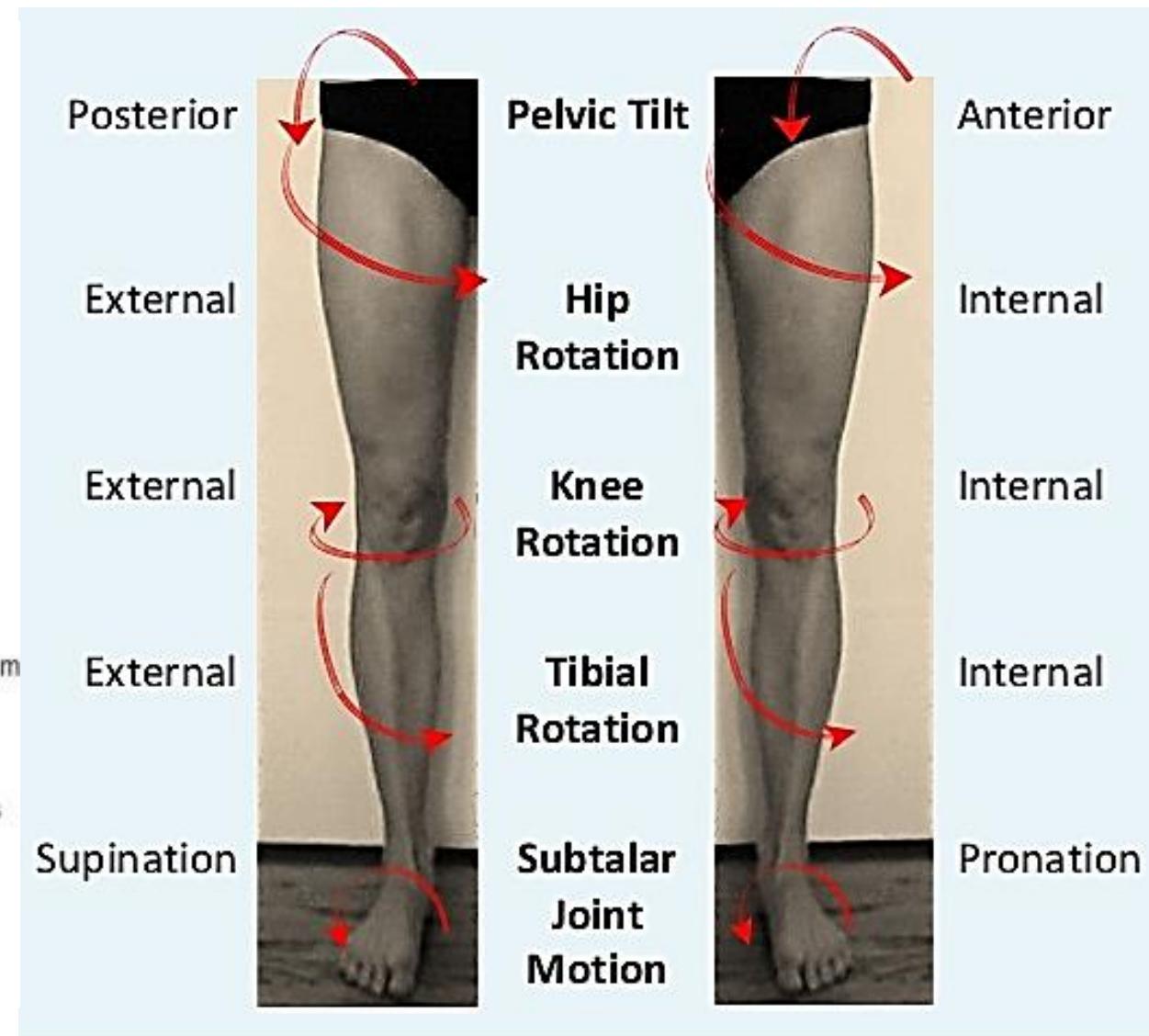
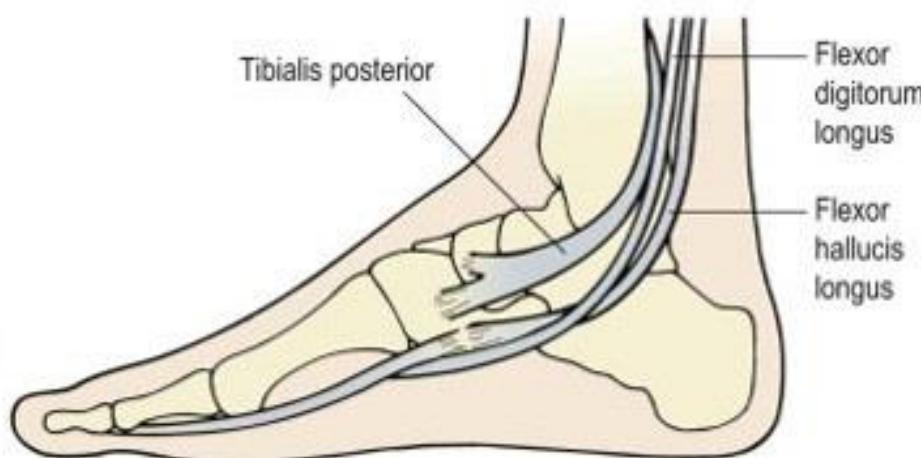
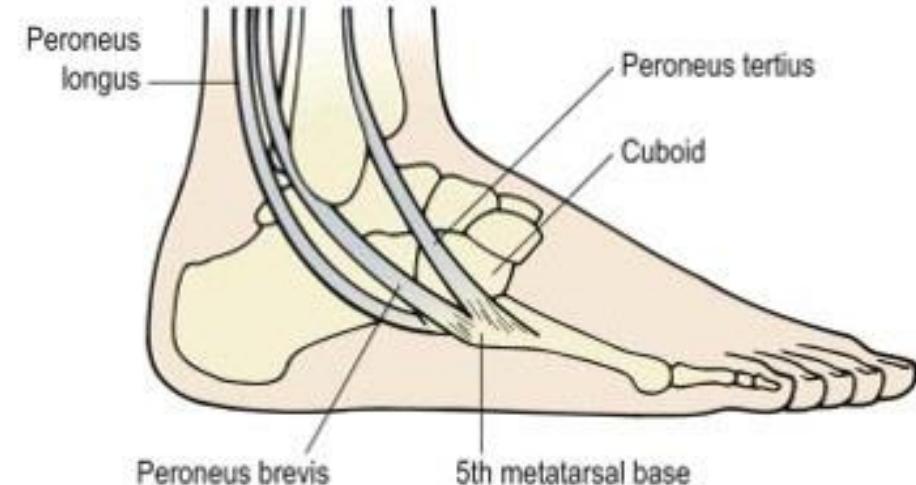
**Pronation support**

**Insole de-torsion axis**

**Rearfootpronation**

**Supination support**

# Chain Reaction



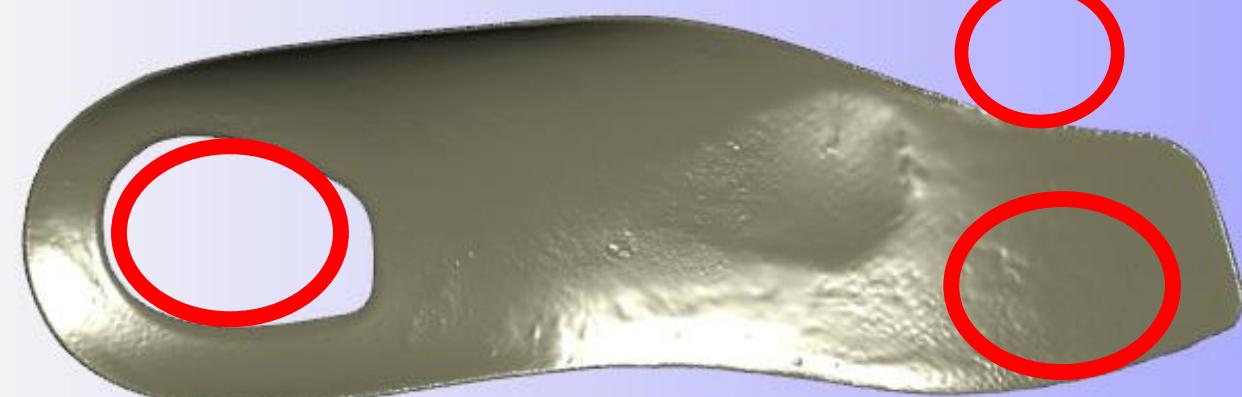
# Solestar Element `s



Support subtalar joint

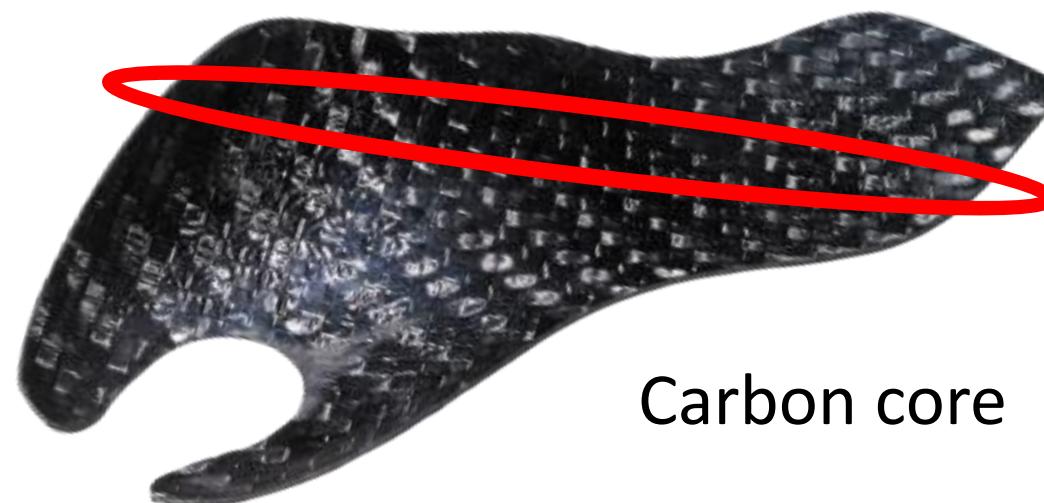


Recess for the 1<sup>st</sup> met



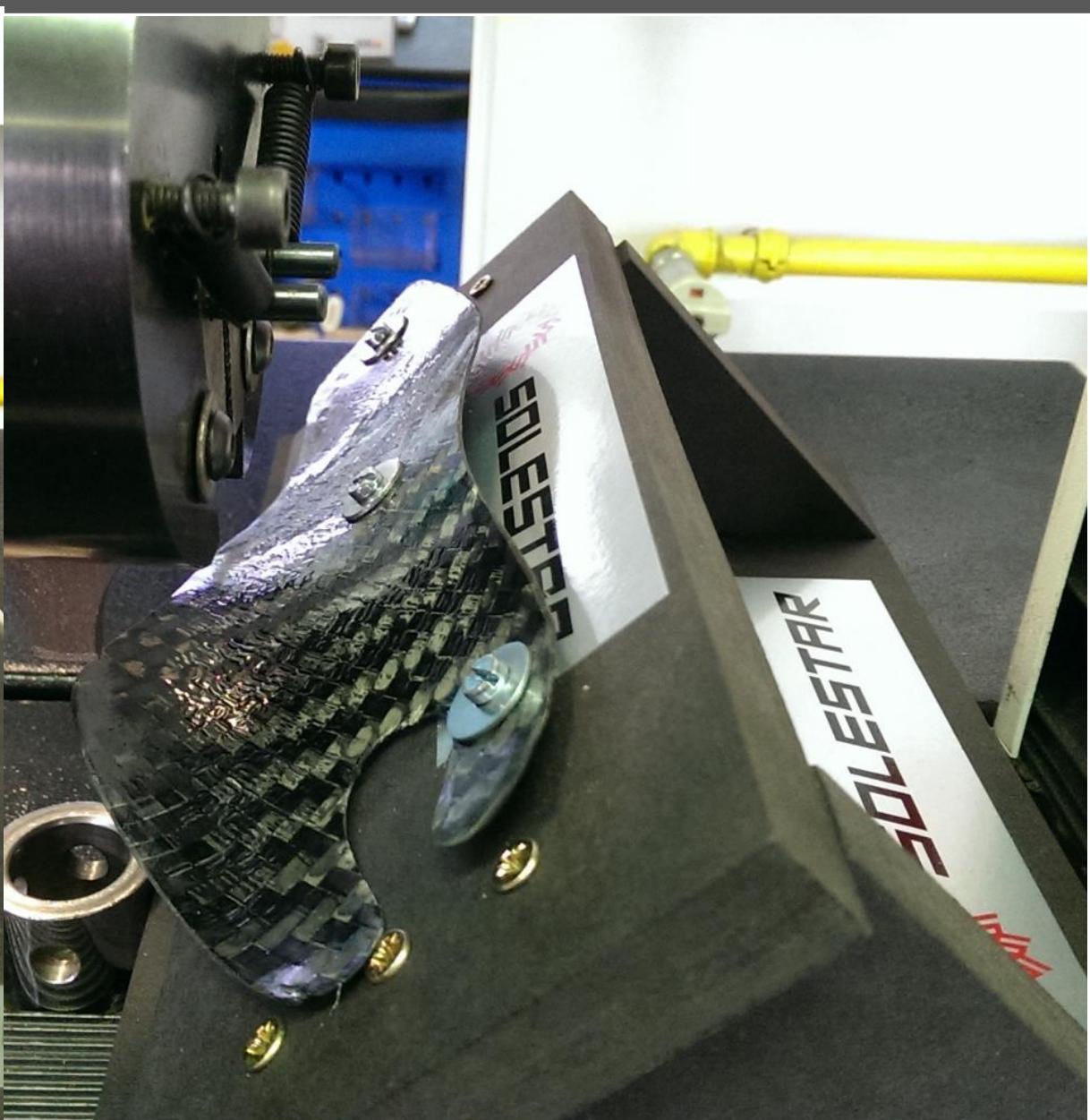
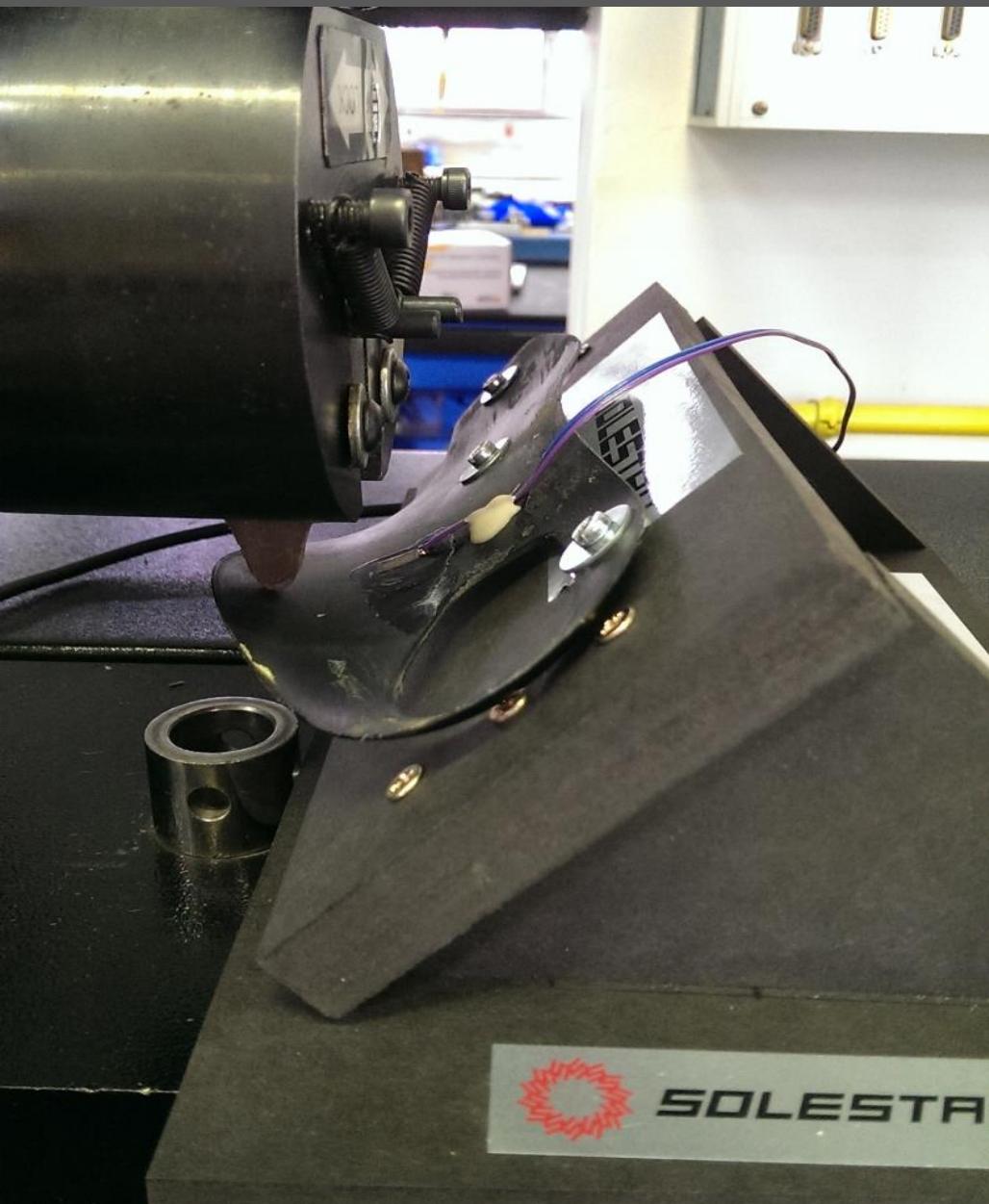
Heel clasp

Lateral raise

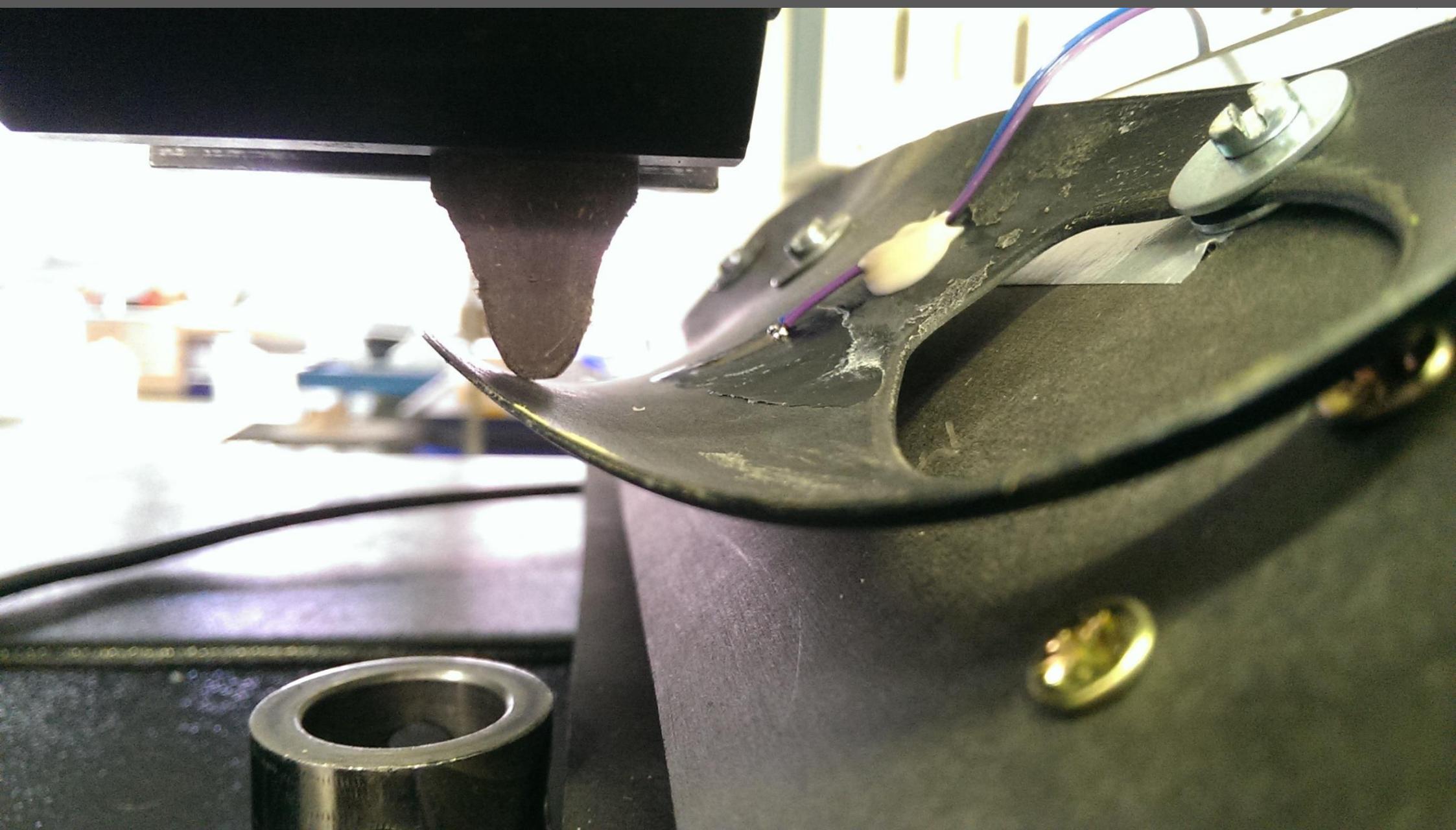


Carbon core

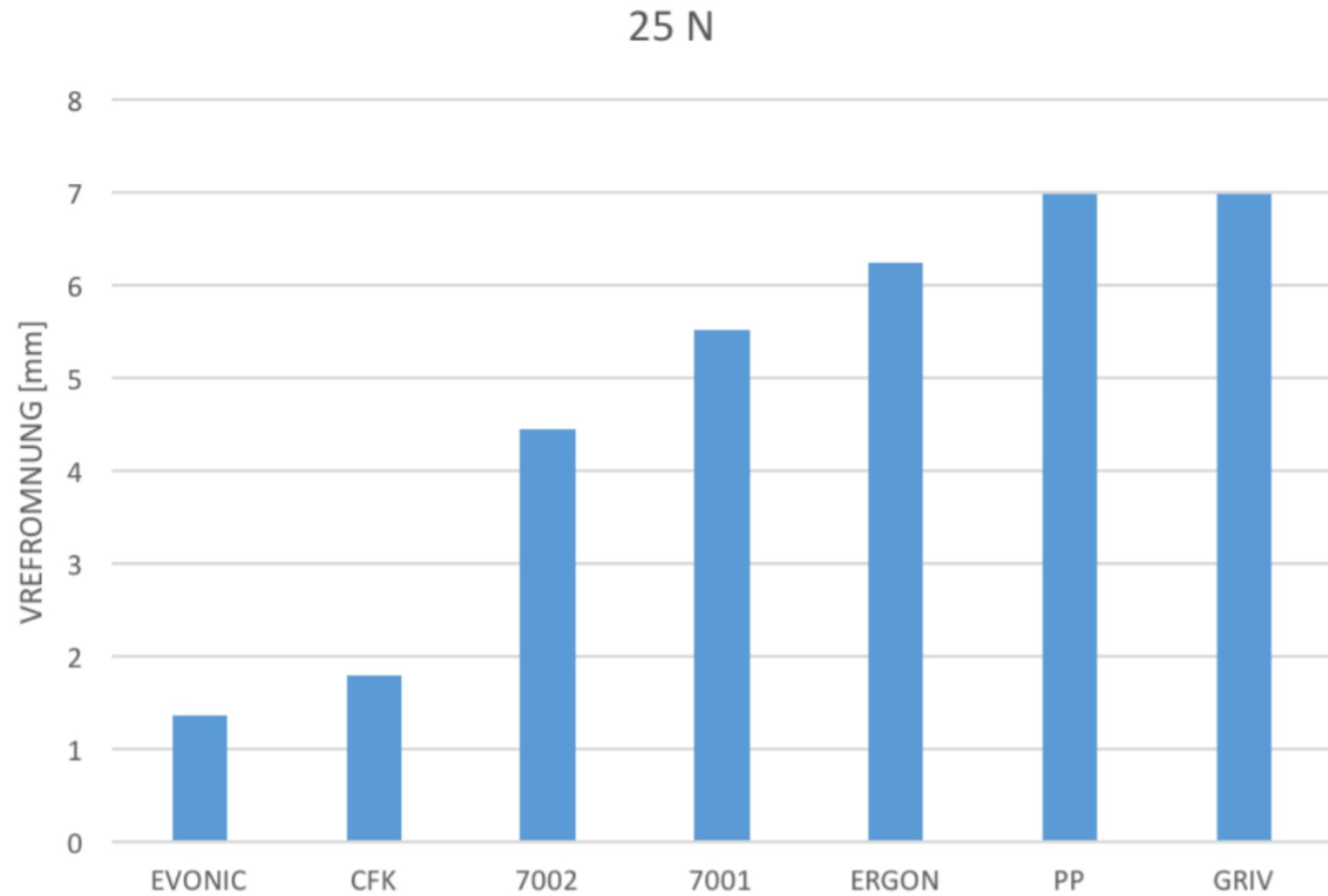
# Core Stiffness



# Core Stiffness



# Core Stiffness



# Solestar Function



- Fixing the ankle joint
  - Fore foot counter support
  - Deeper placement 1<sup>st</sup> met
- => STABILIZATION DELTA!**



## **Optimal power transmission and reduction of the shear forces**

⇒ The SOLESTAR insole fixes the foot in a neutral position during the whole pedaling action (reduction of backfootpronation and forefootsupination)

**Asymmetries and disbalances are regulated  
in their functional system**

⇒ The operating mode of the SOLESTAR insoles and individual adjustments reduce loss of power and overburdening

# Solution

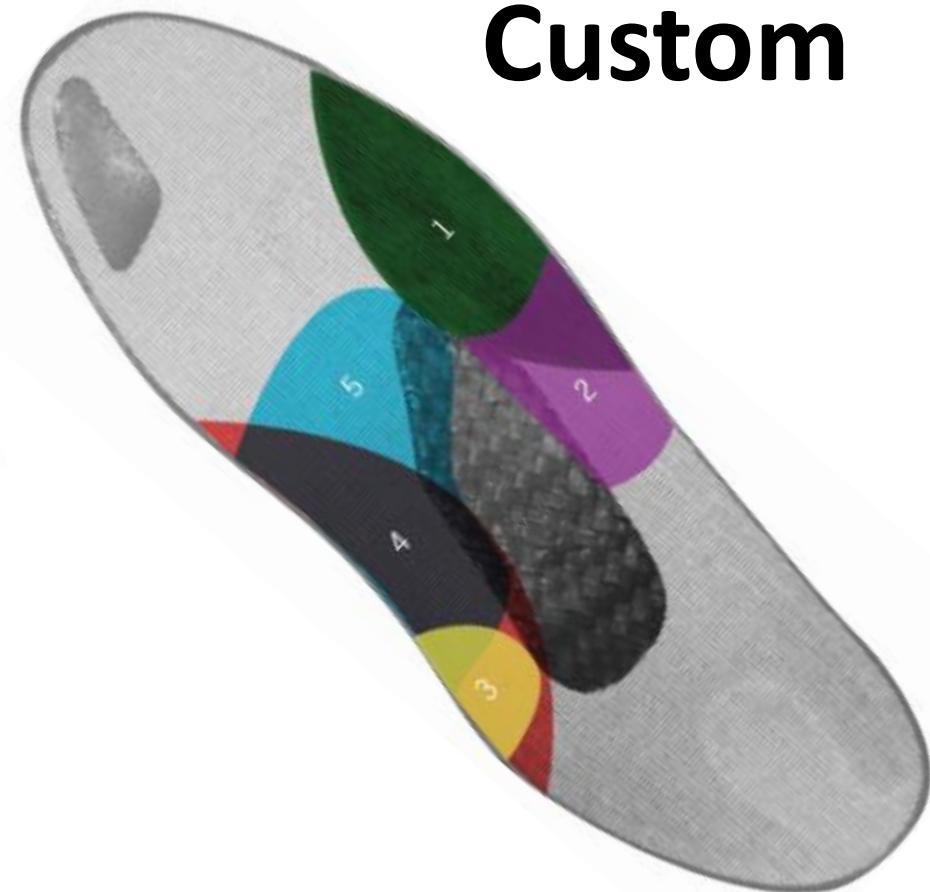


**Standard**



**90 %**

**Custom**



**100 %**

# Performance



**Power [Watt] =**

**Cadence [1/min] x Pedalforce [Newton]**

**Example:**

**Power 300 Watt**

**90 [1/m] x 180[N]**

**- 110 [1/m] x 150 [N]**

# Functional Problem



SOLESTAR



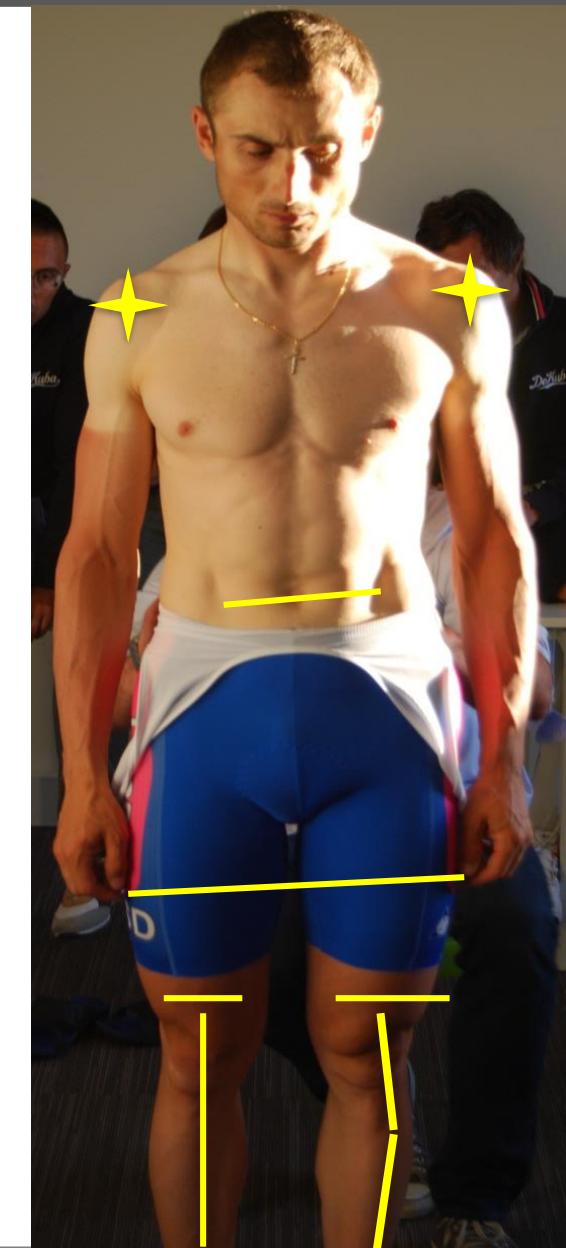
Shoulder

Pelvis

Hand

Muscle structure

Legs



# Functional Problem



# Vorlauf Test – standing flexion test



# Vorlauf Position on the Bike



# On the Bike



# Squadtesting

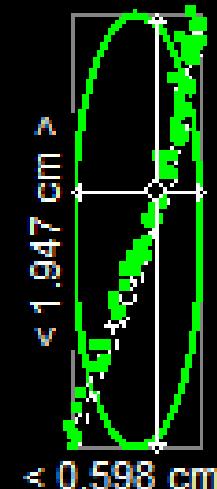


Pelvis  
Hip  
Femur  
Knee  
Tibia  
Fibula  
Malleolus  
Subtalar joint  
Toe

**Left Foot Center Of Force**  
Oberfläche= 0.211cm<sup>2</sup> - Ausgewählte Punkte : 90%



**Right Foot Center Of Force**  
Oberfläche= 0.914cm<sup>2</sup> - Ausgewählte Punkte : 90%



# Procedure



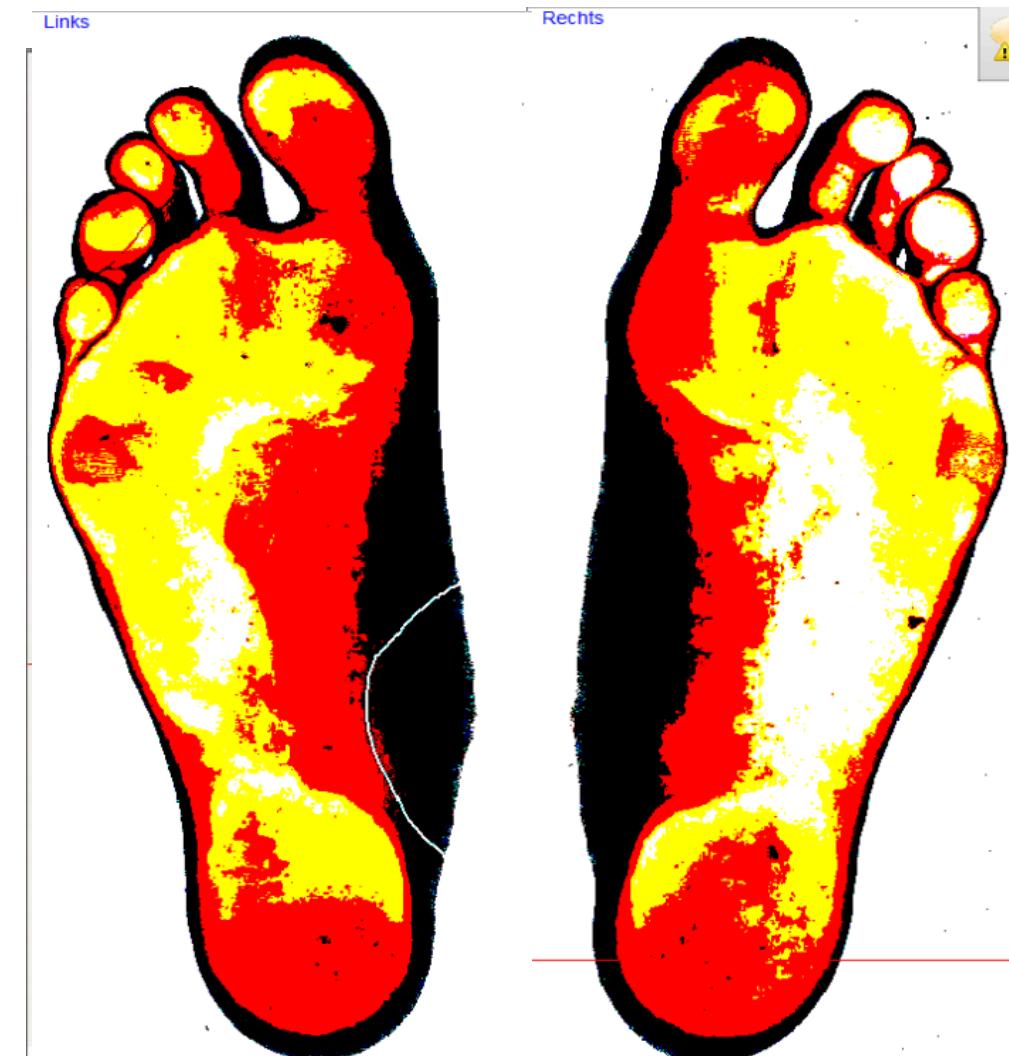
# Off the Bike



# Knee Overload



“Wout Van Aert is suffering from friction between the tendons in his knee and his kneecap” (jan 2017)



# The End - THANK YOU



Tom Wirtgen  
Luxembourg U23 - ITT



Jean-Pierre Drucker  
Luxembourg - ITT



Stefan Künig  
Switzerland - ITT



Tobias Ludvigsson  
Sweden - ITT



Marcus Burghardt  
Germany - Road



Patrick Haller  
Germany U23 - ITT



Oliver Naesen  
Belgium - Road



Luka Mezgec  
Slovenia - Road



Steve Cummings  
Great Britain - Road & ITT



Trixi Worrack  
Germany - ITT



Sara Penton  
Sweden - Road



Gregor Mühlberger  
Austria - Road

Congratulations to these 2017 National Champions riding with SOLESTAR!

Bis hier ENDE



# The Foot

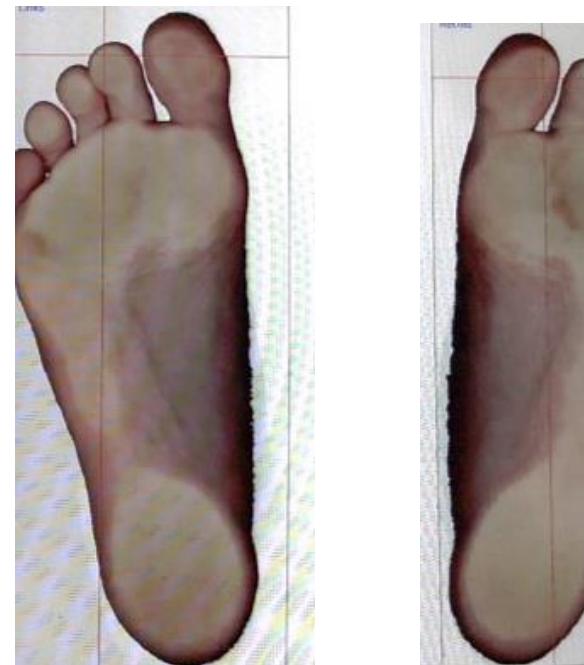


## Soft problems

- blisters
- hard skin
- warts
- corns and callus
- metartarsal problems
- sinew inflammation

## Clinical problems

- flat foot
- high arch foot
- club foot
- pigeon toes
- hallux valgus
- metatarsalgia



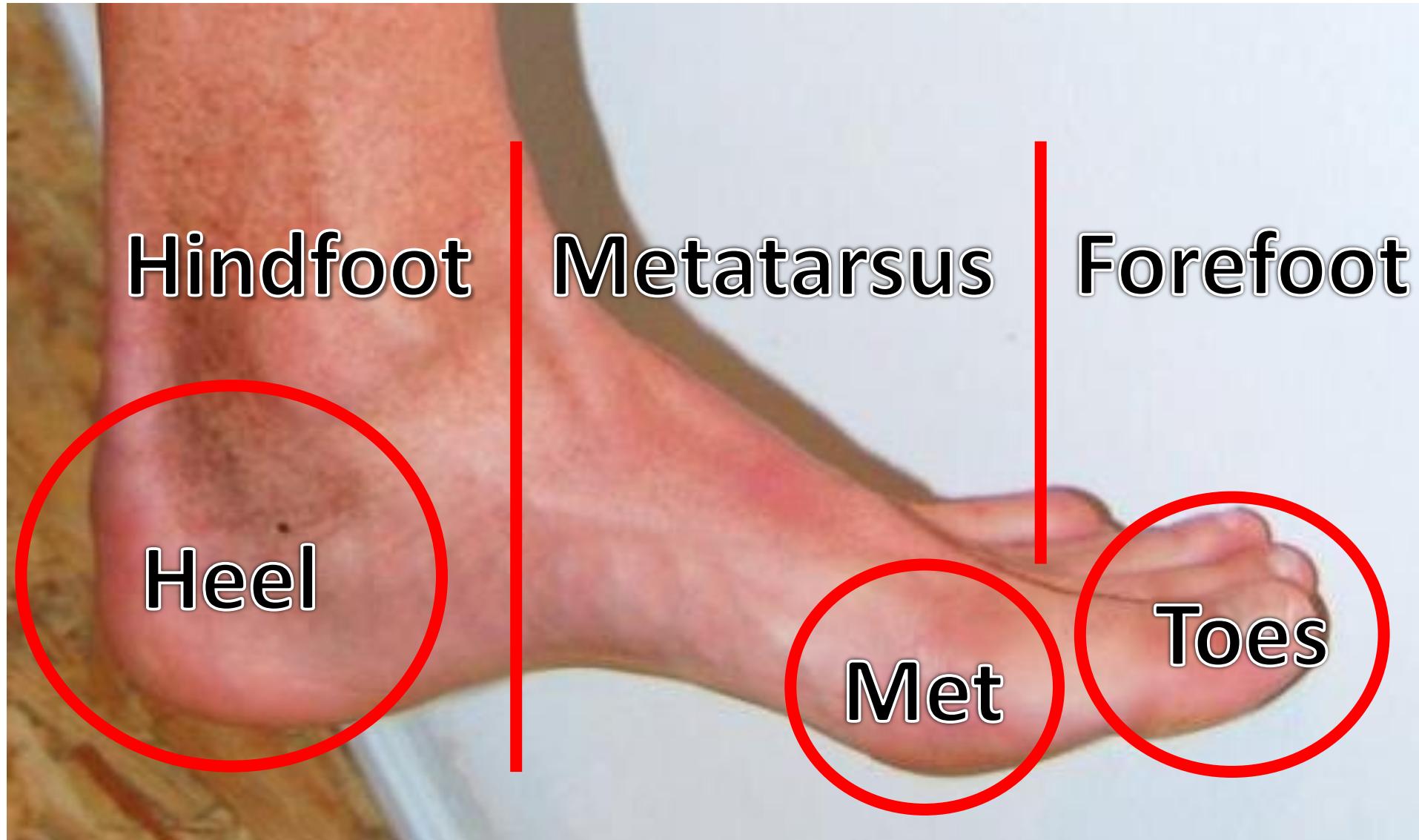


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# The Foot





# Musculare Dysbalances



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Volume

Definition

Tightness

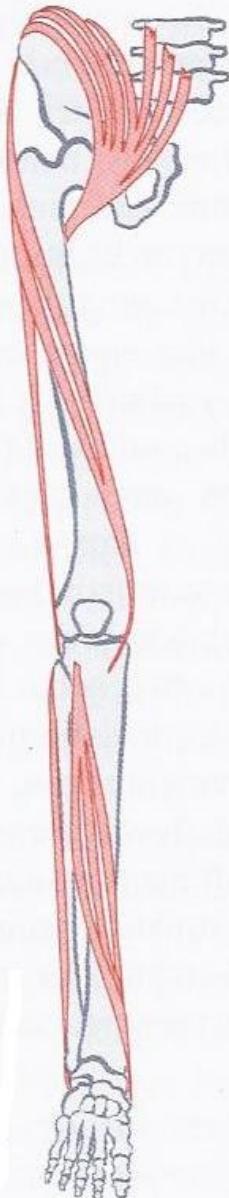
Intermuscular

Intramuscular





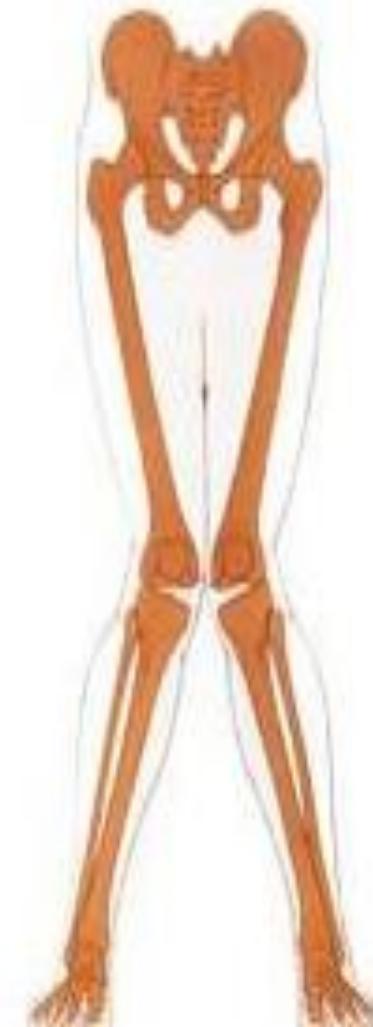




Bones  
Joints  
Muscles  
Sinews  
Ligaments  
Cartilage



Neutral

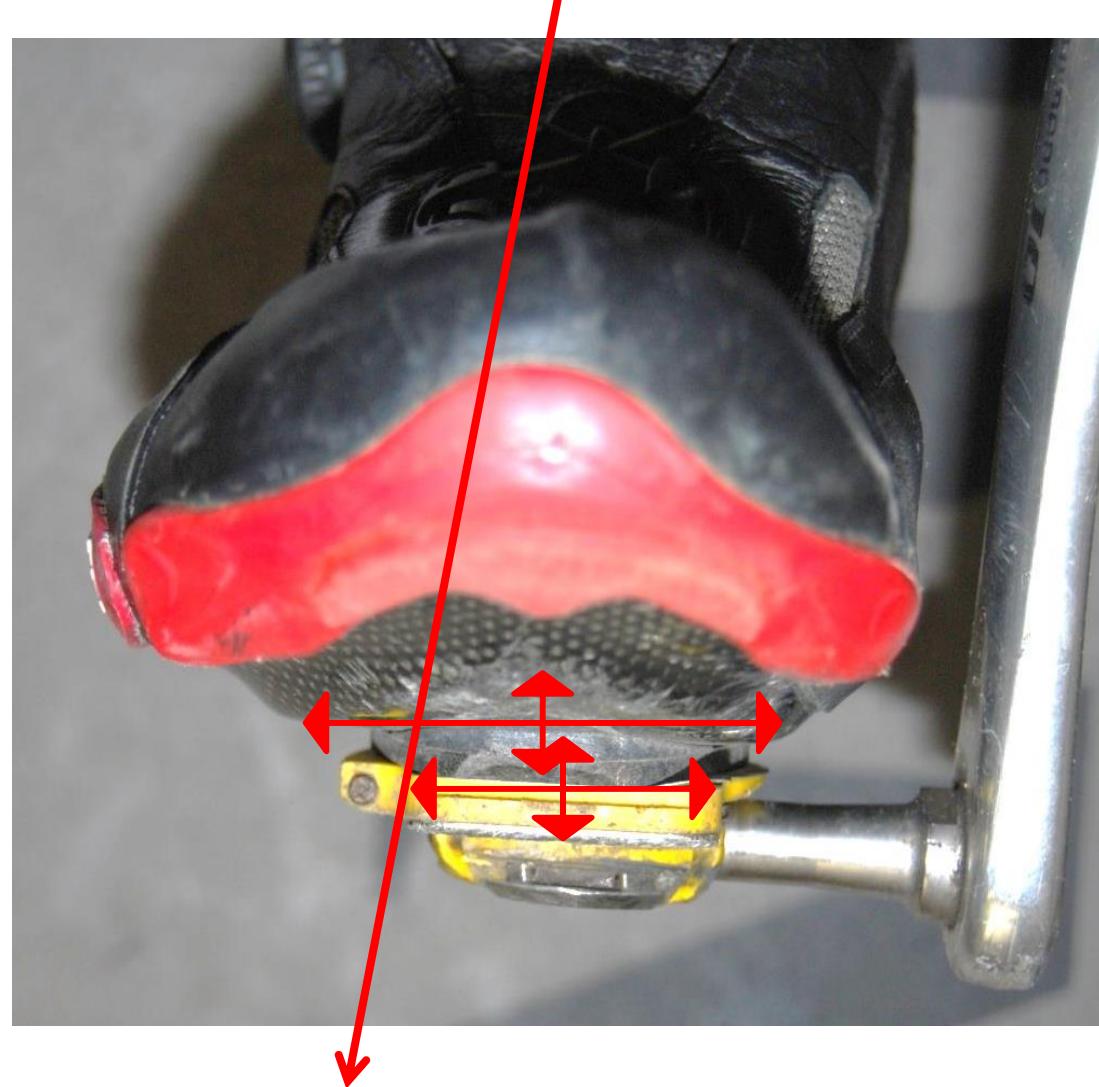


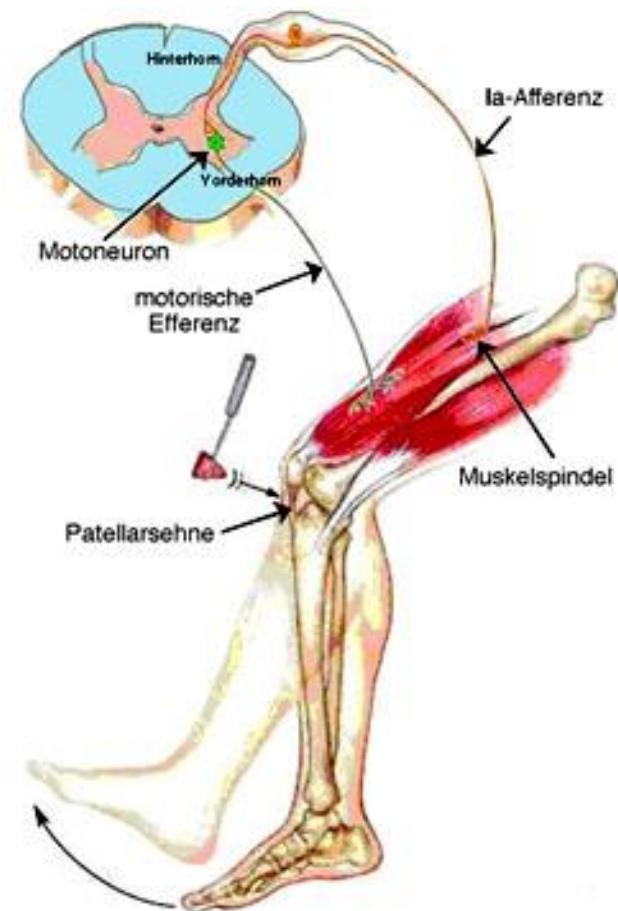
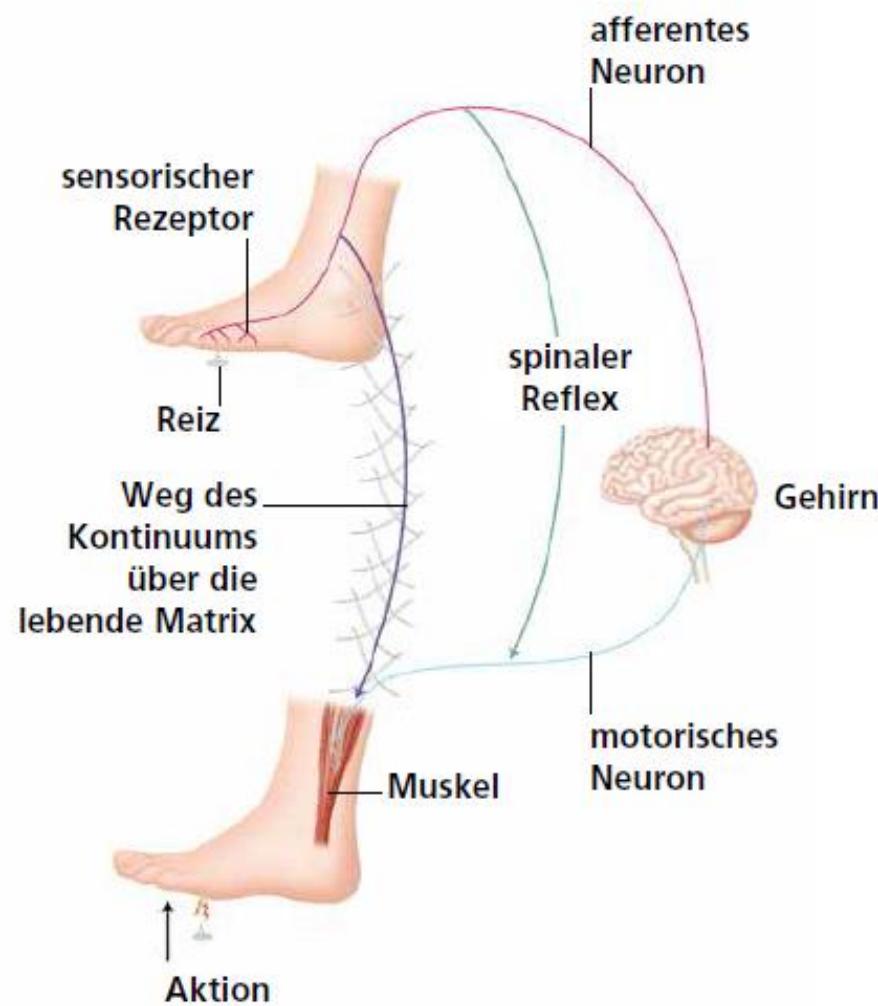
Valgus



Varus







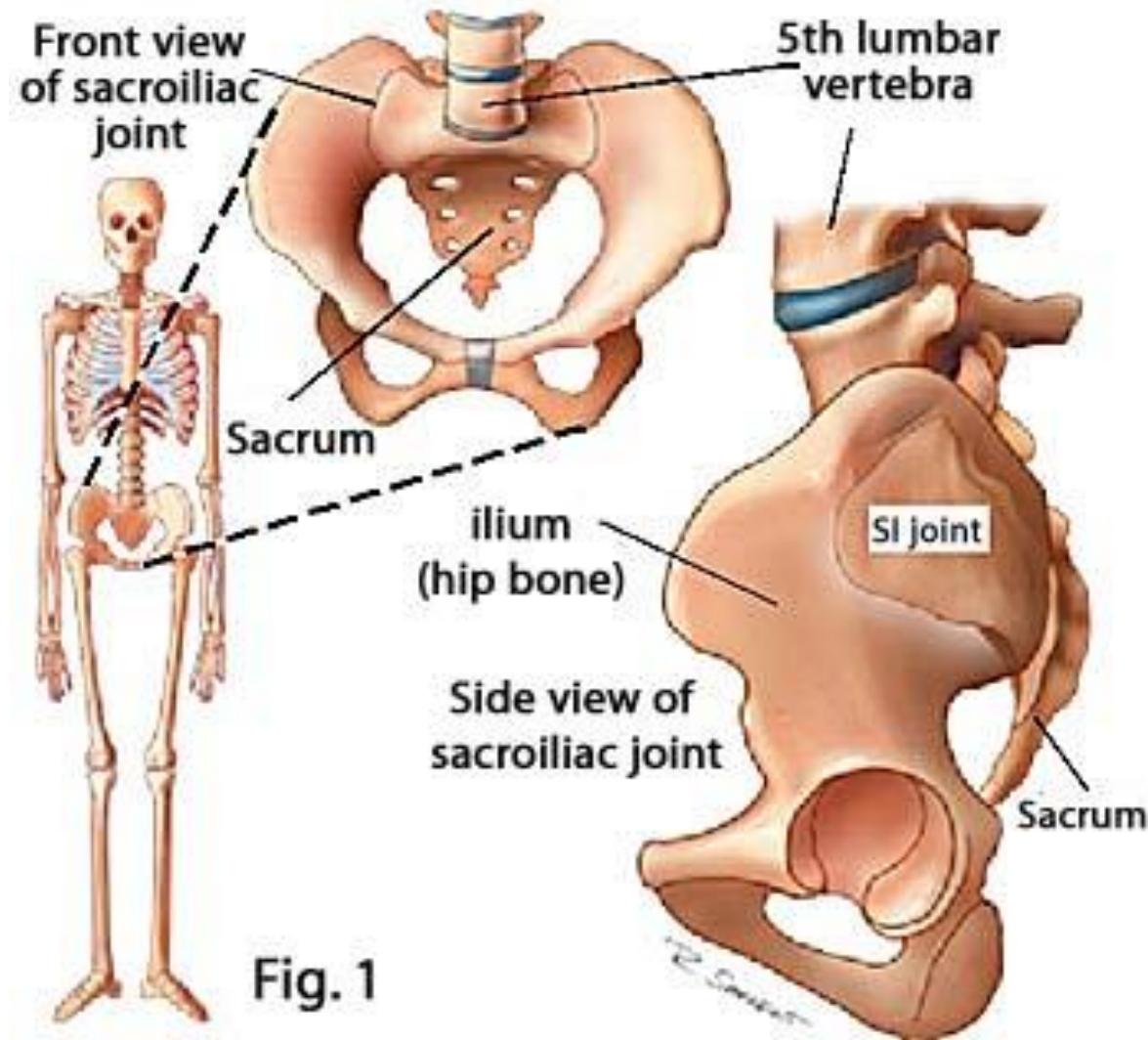
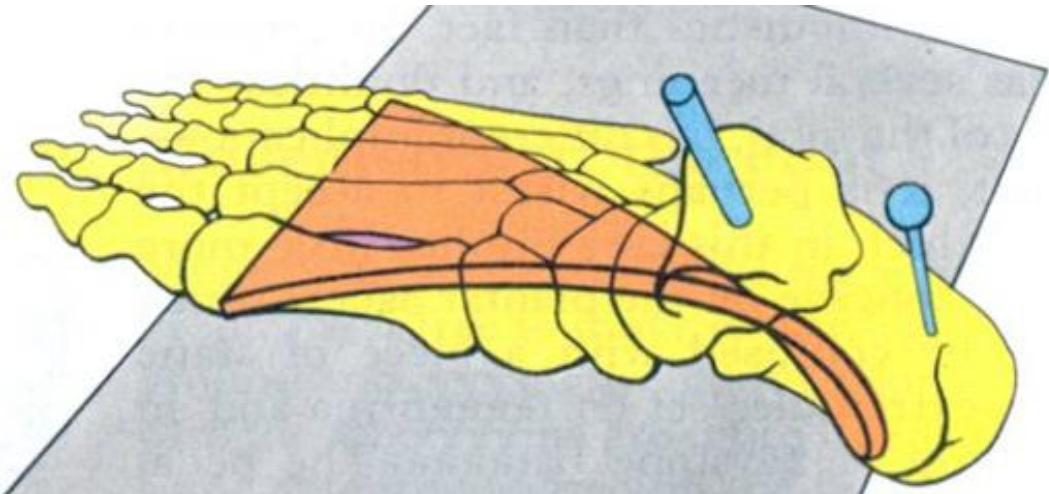
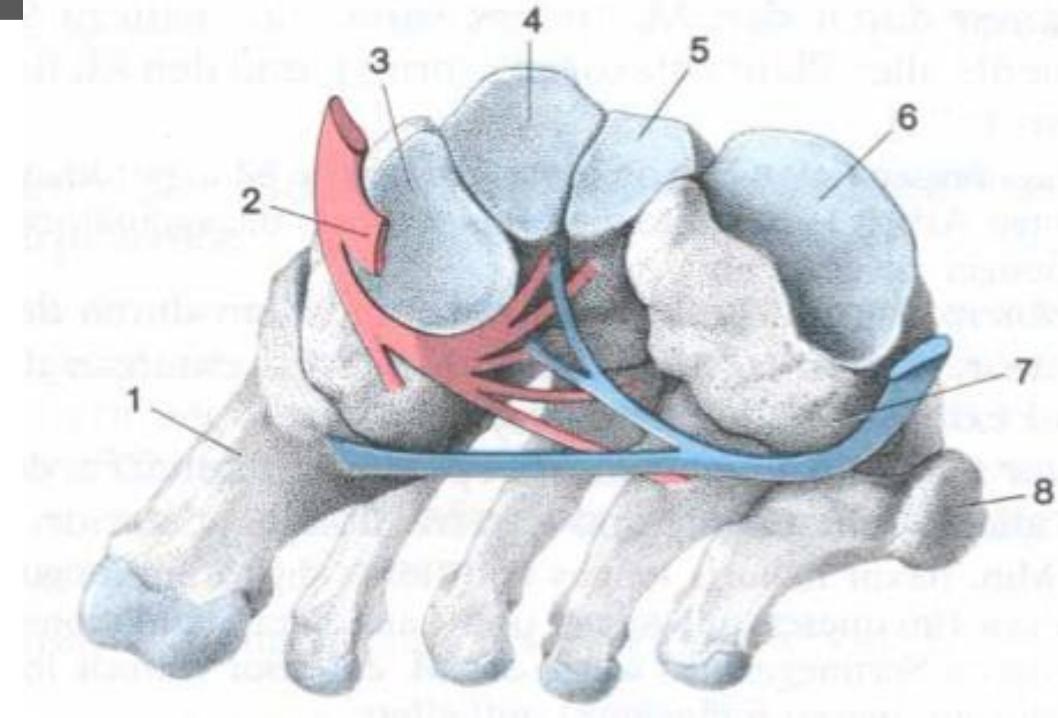
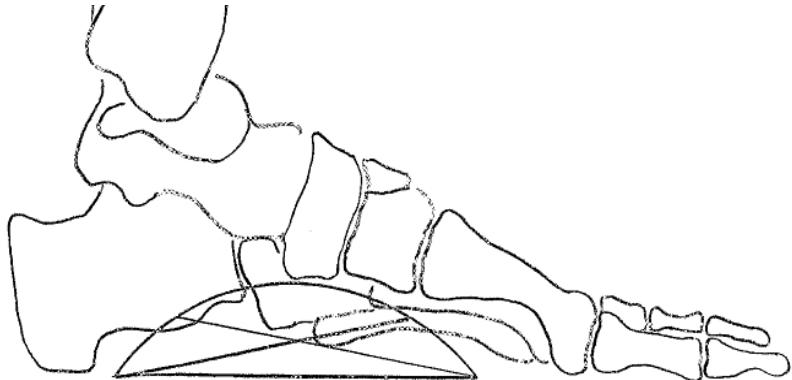


Fig. 1

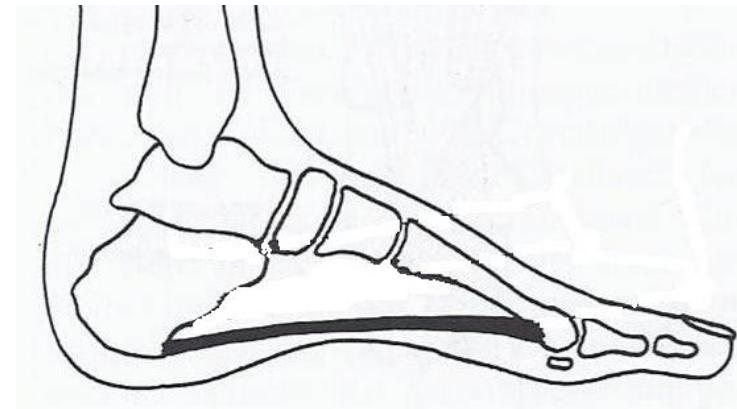
Stabilisations-“Steigbügel“ M. tibialis posterior medial : Peronäalsehnen lateral  
(verlaufen von medial und lateral unter das Fußgewölbe)



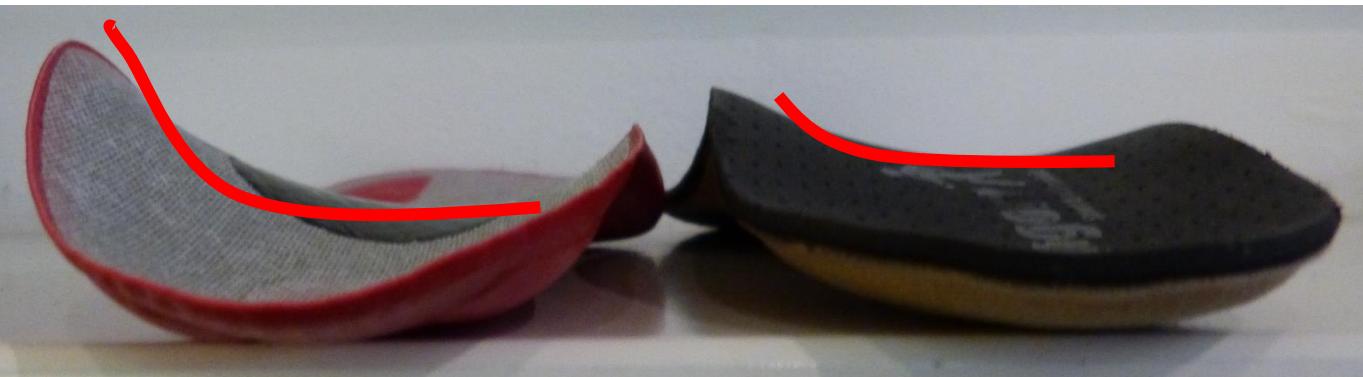
# Details



Maximum support of subtalar joint



Free movement of plantar fascia

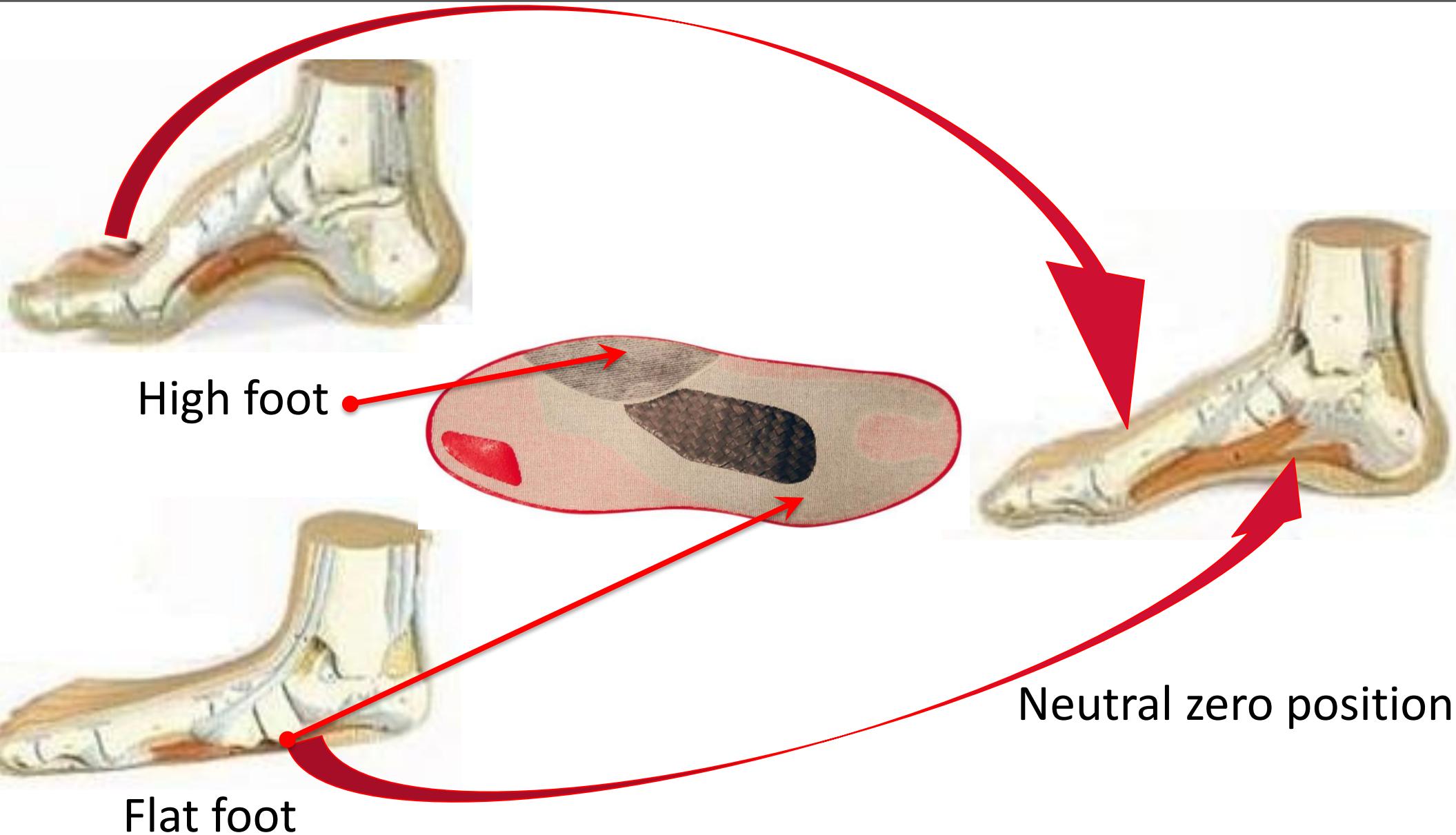


Gradation of the medial support is important

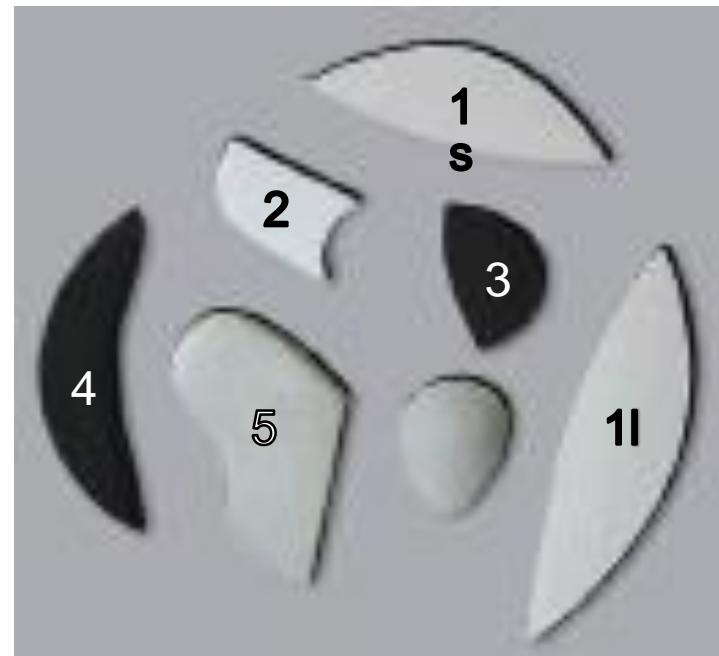
# Neutral Zero Position



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# Modifikation



Resistive force

Sensomotoric

Decompression

Covermaterial

Heat molding

# Practice I



Diagnosis:

Hip rotation – right side

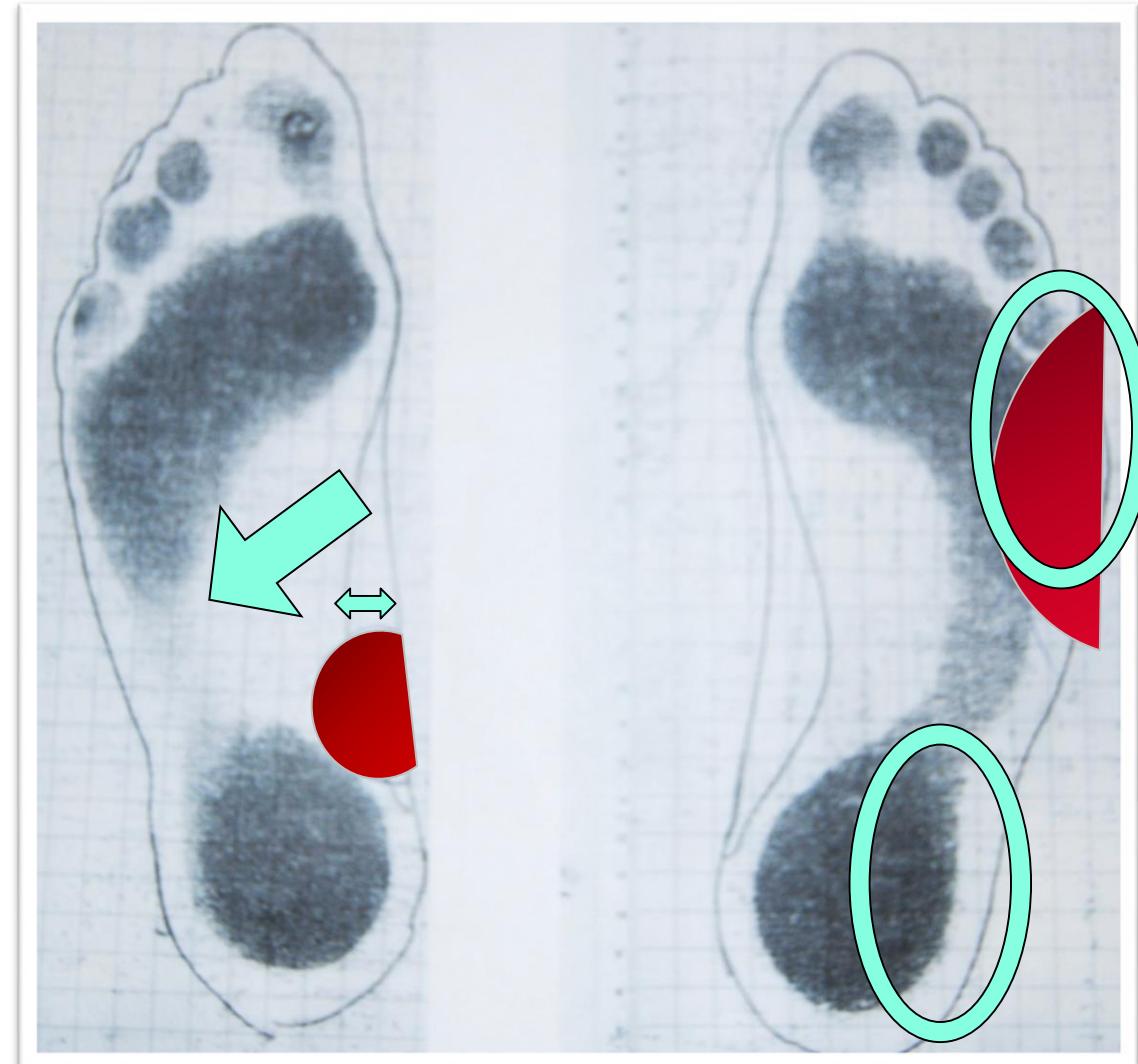
Skew foot

Varus position - right foot

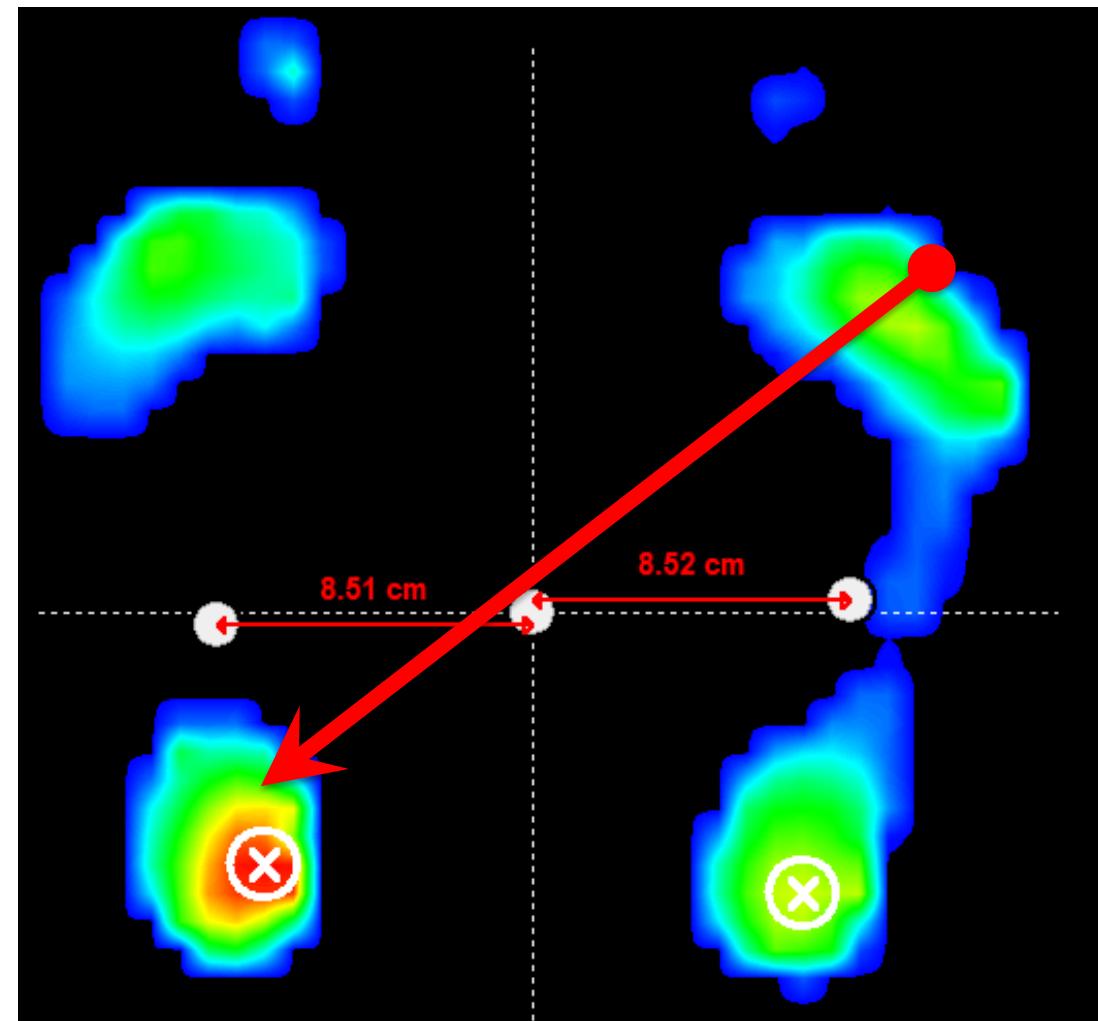
Action:

Long pronation wedge right

Short sub wedge left



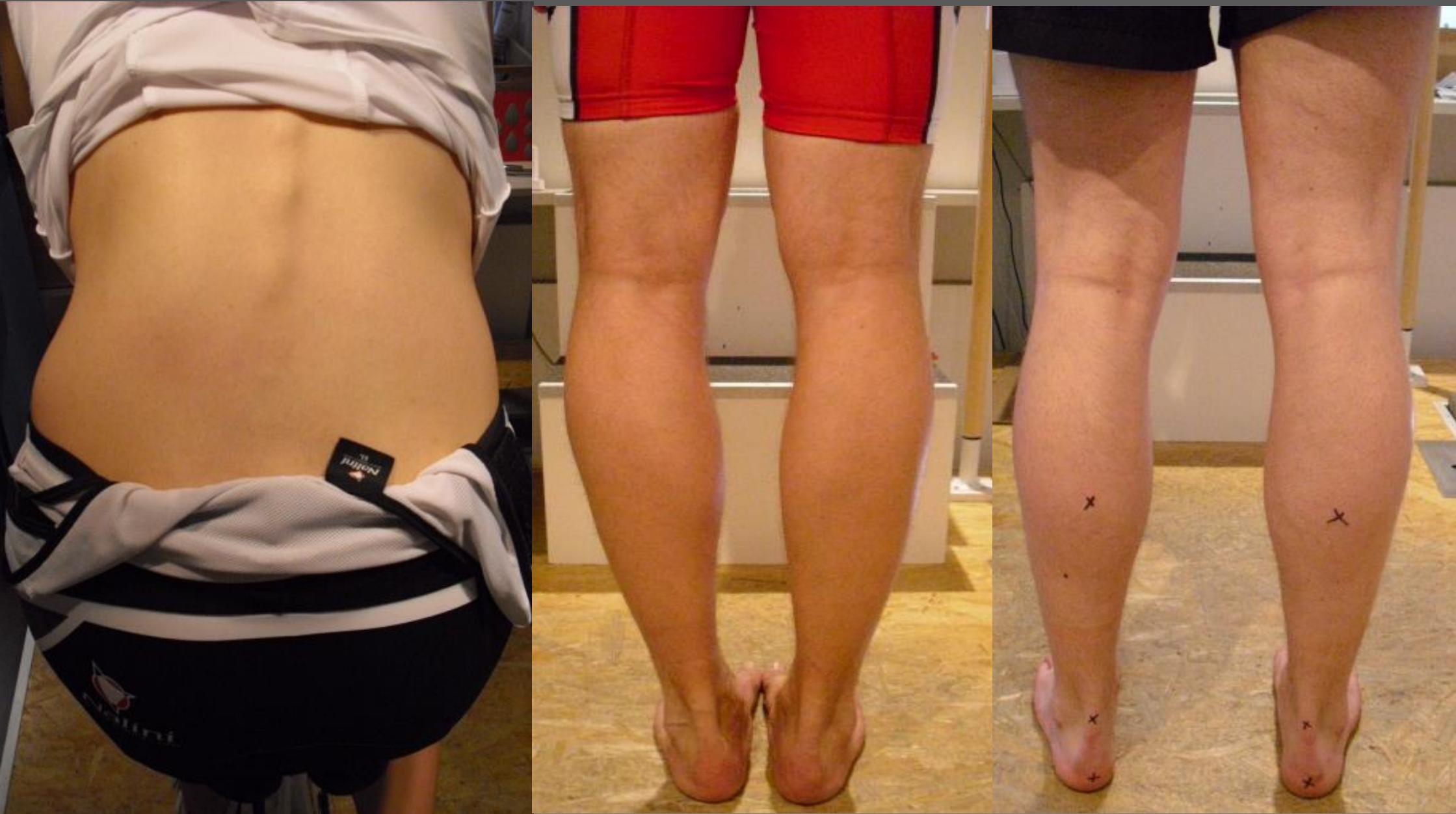
# Practice II



# Asymmetric Foot



# Malposition



## Example B II



# Study Design



Deutsche  
Sporthochschule Köln  
German Sport University Cologne

Dr. Achim Schmidt



Cyclus 2 Ergometer

**Participants:** 30 (hobby/amateur/pro)

**Pre-test:** 3 x 8 sec sprint-test  
isokinetic maximum test  
with original insoles

**Test result:**

**Treatment:**

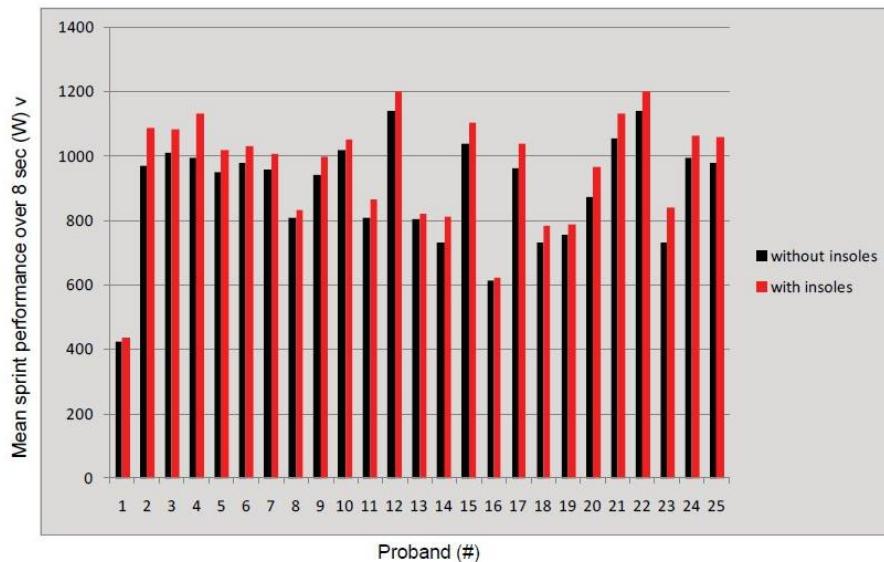
**Retest:**

Peak – Cut

2 weeks adaption without  
any sprint specific training

Same as pretest

# Study Results

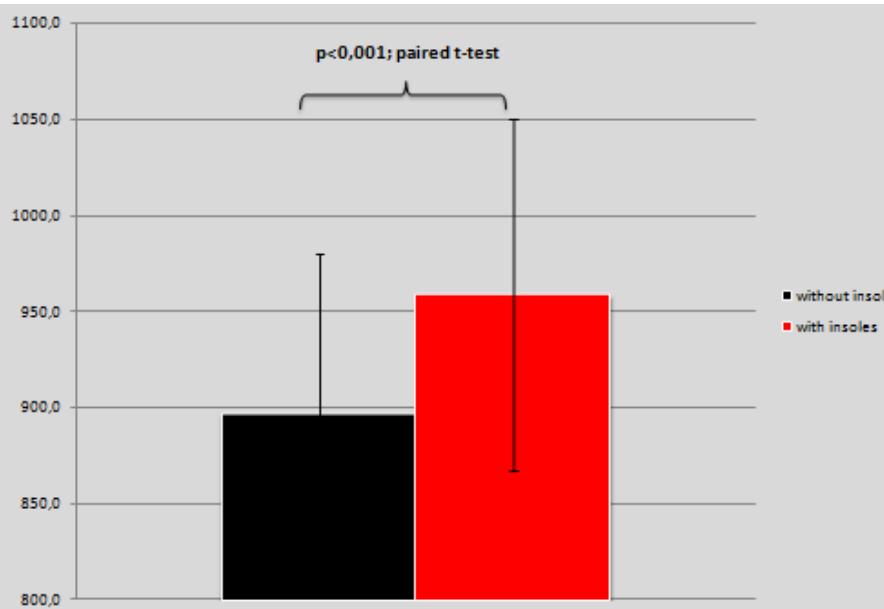


Average sprint performance 8 seconds:

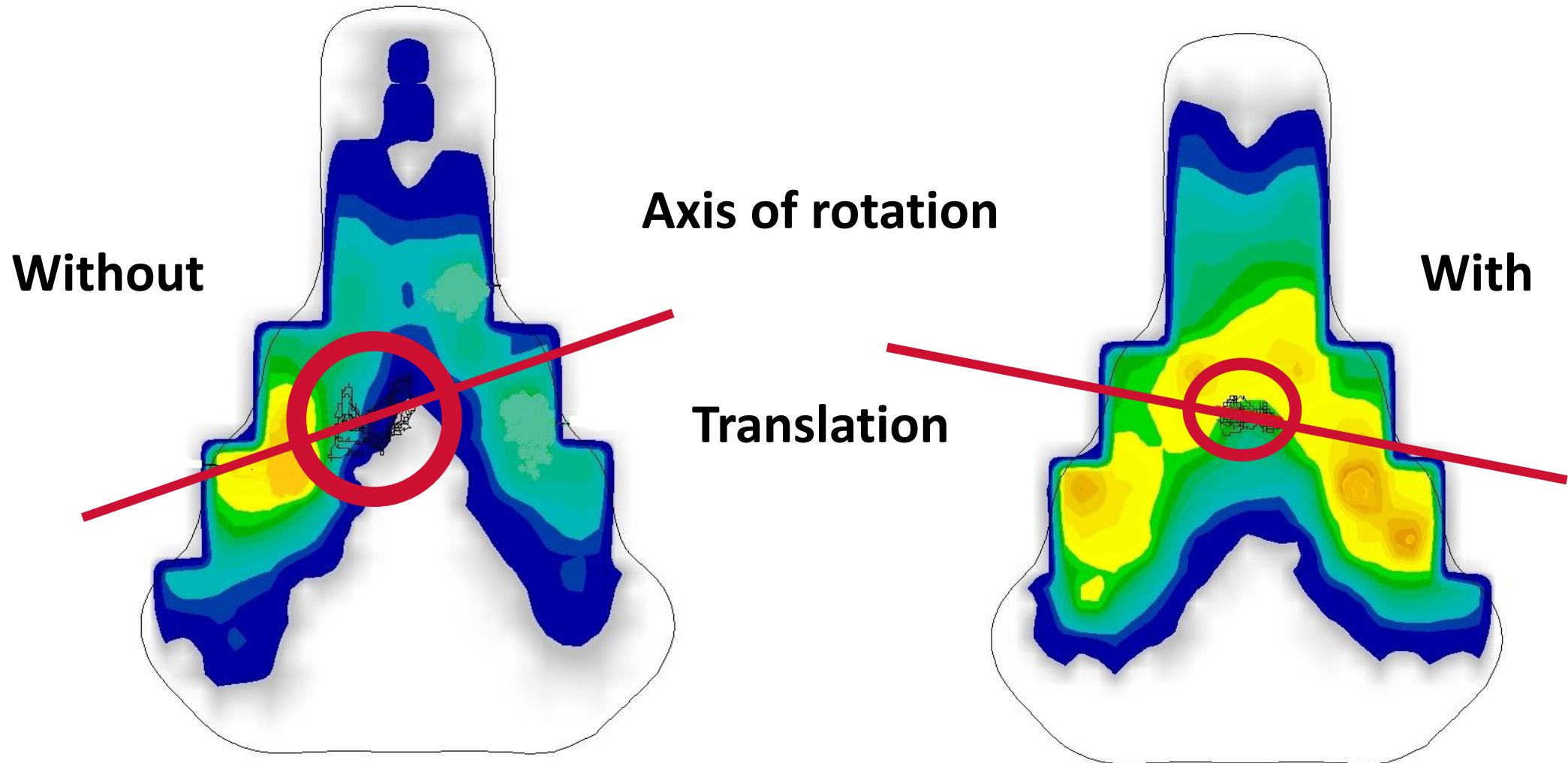
Without: 896.9 +/- 167.3 W

With: 958.7 +/- 183.0 W

+ 61.9 W = 6.9 %



Liverpool, UK, July 2011



# Comparison Bike



Without



With



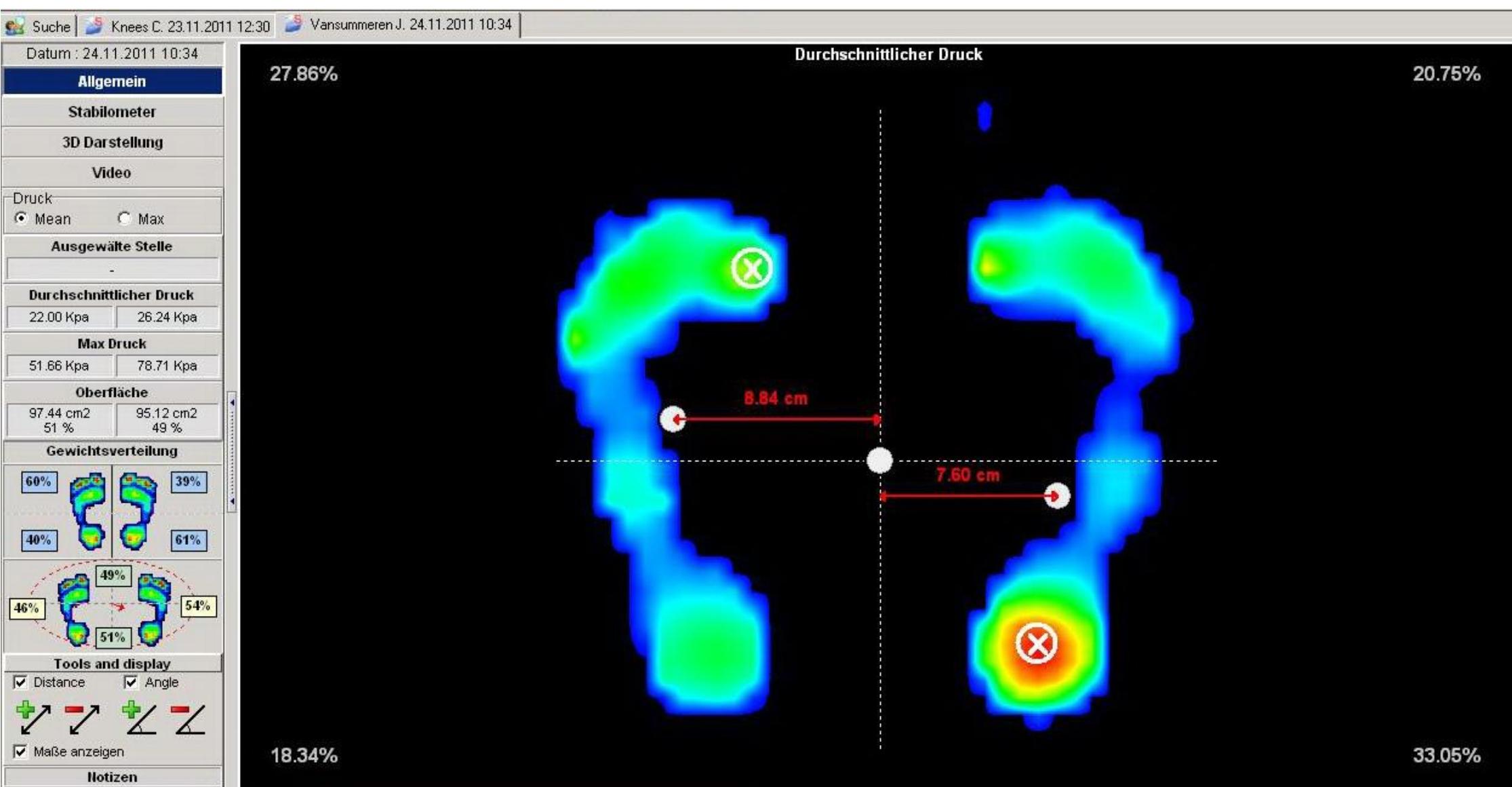


# WORKSHOP

# Foot pressure

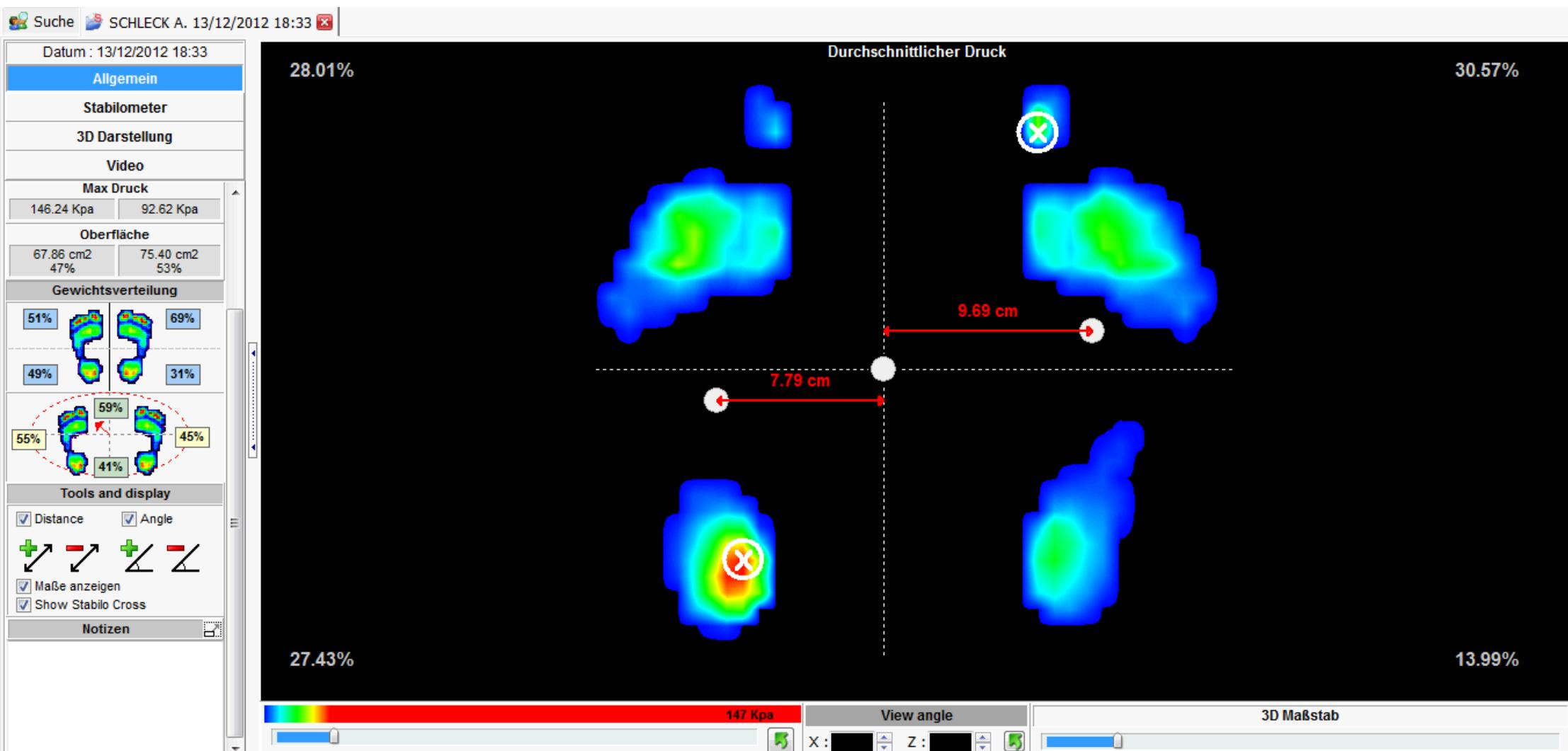


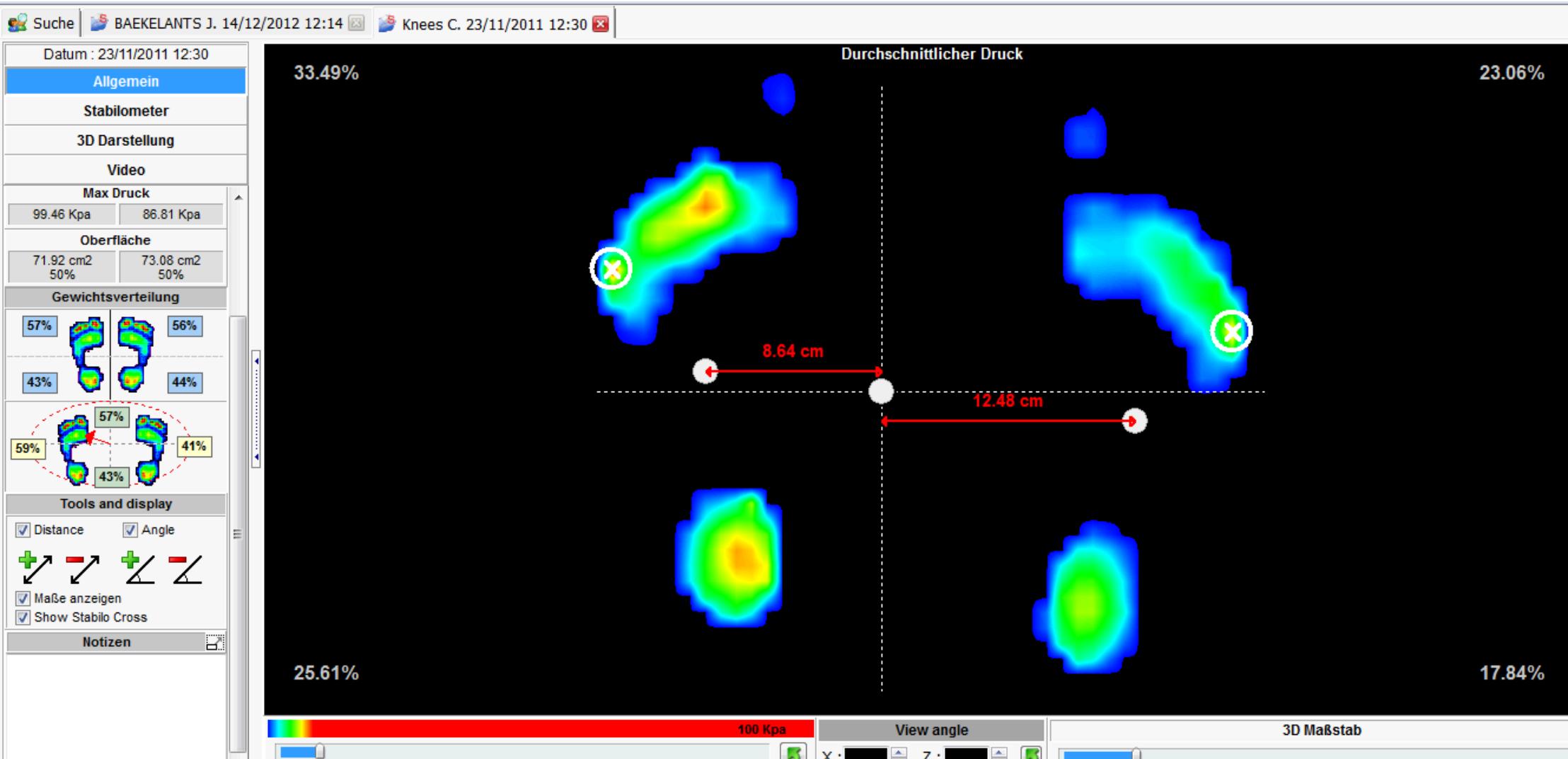
SOLESTAR

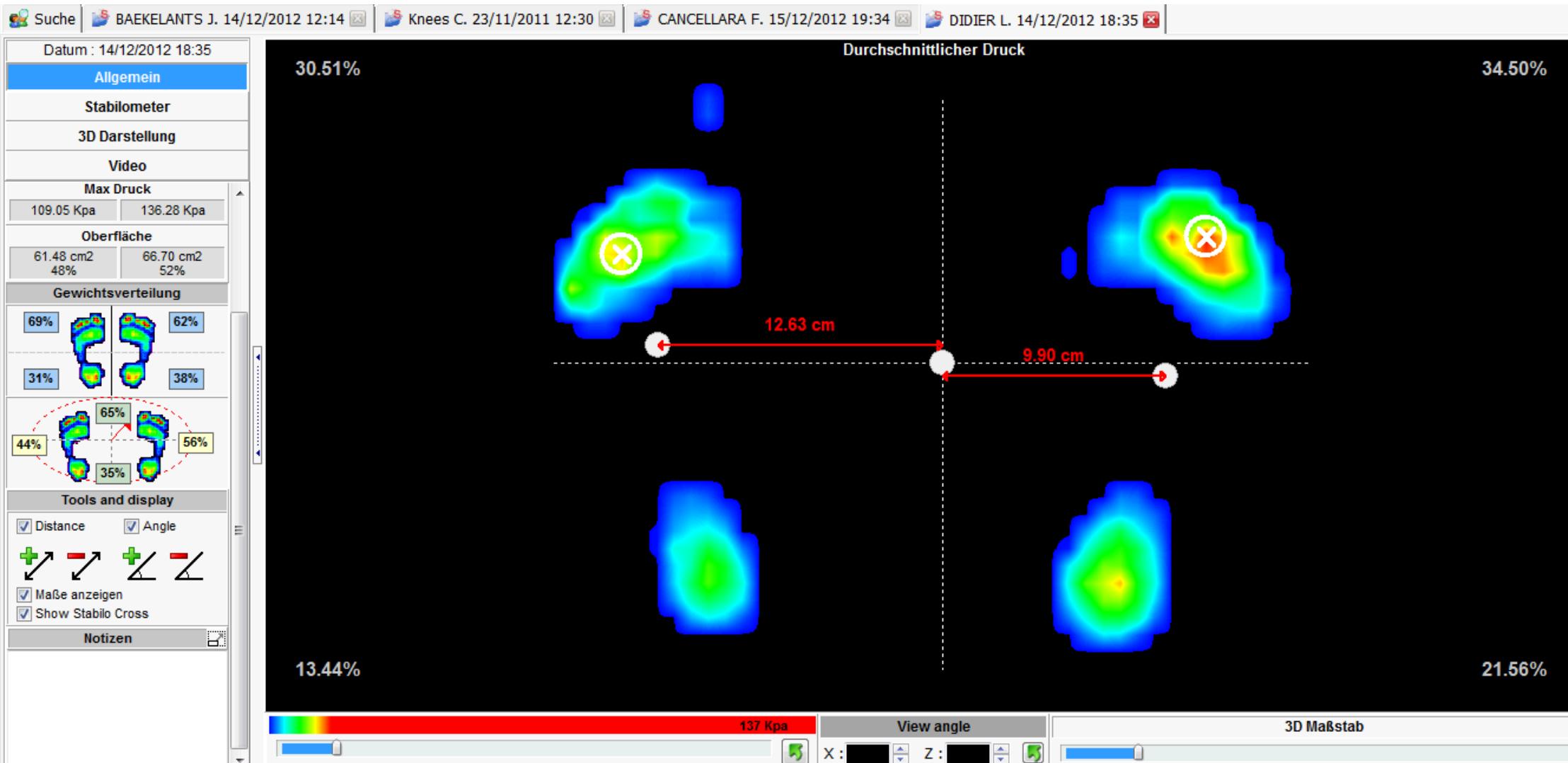


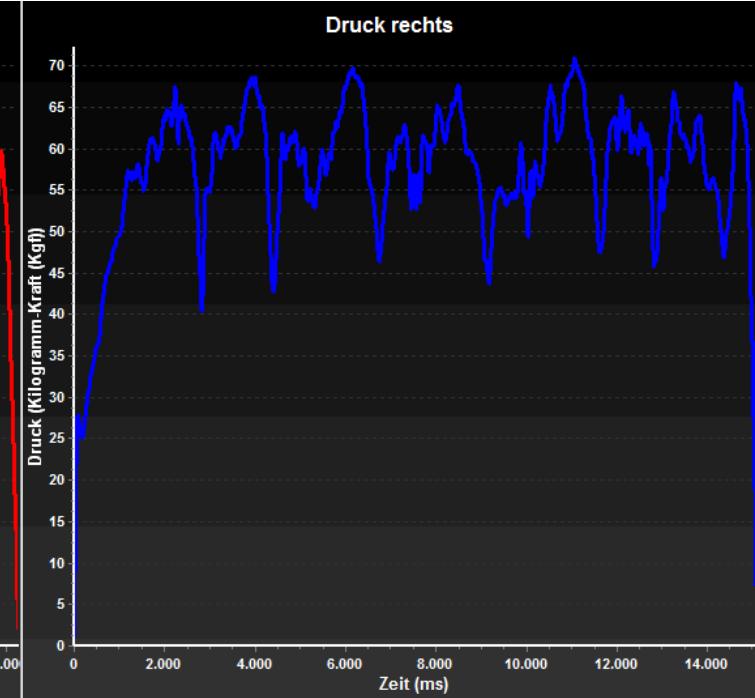
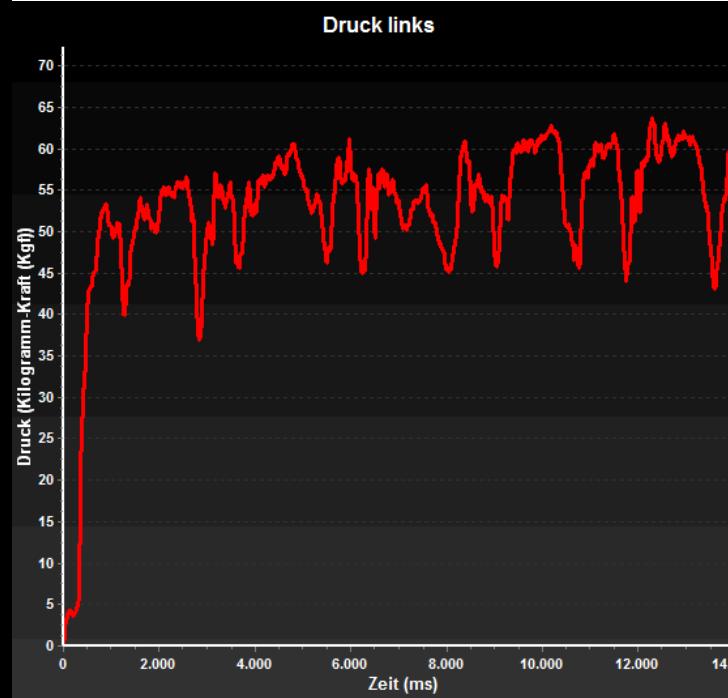


SOLESTAR

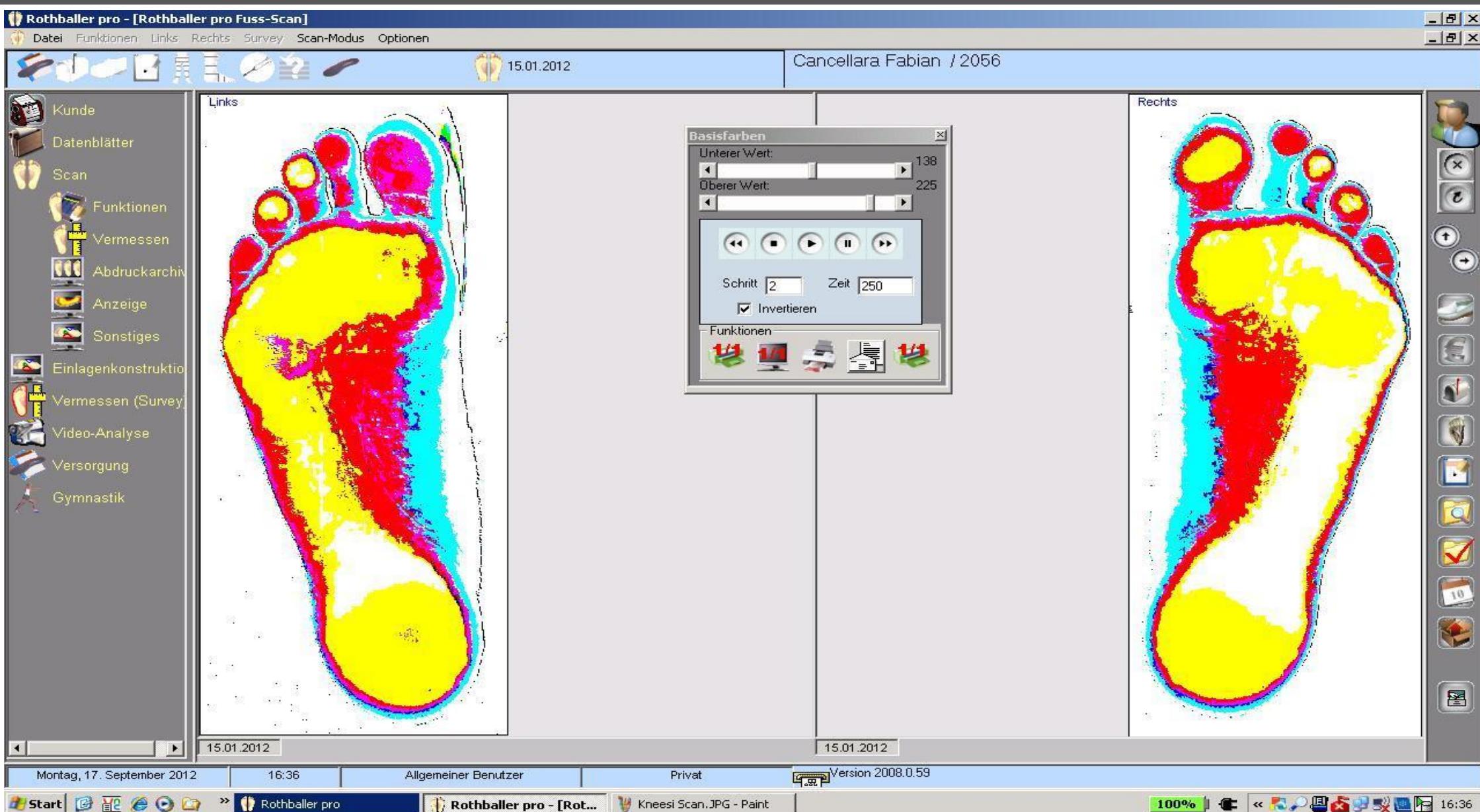








# Foot scan



# Podotrack



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# Practice II



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Diagnosis:

Hip rotation – right side

Action:

Long pronation wedge right



# Practice III



Diagnosis:

Difference in Leg Length --  
functional or anatomical

Action:

Long pronation wedge right  
Short sub wedge right

