

STAYWELL

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COMMON YOUTH INJURIES

Growing Pains in young people often come as pain at night, usually after a day of physical activity. Young children will often wake in tears. They ask to have their legs rubbed just below the knee and



above the ankle. Most of the time, medical doctors will refer to this as growing pains, but that isn't always what it is. It is usually a result of the shoes the child is wearing. The shoes might not have cushion

or they might be too stiff and rigid. The shoe may limit natural foot motion or provide no cushion to the joints. Movement then translates to the next area in the human segmental chain which is the growth plate. The increased shock or movement to that area leads to intense pain. The treatment is simple. Prevent the trauma. The child needs to wear flexible, cushy shoes so the foot takes the force and not the growth plate. This helps the symptoms subside and not come back.

Osgood-Schlatter's Disease is another injury near the growth plate located below the knee, where the quadriceps tendon attaches to the knee. This disease sometimes leaves a permanent raised lump on the shin bone. The simplest way to describe this is as an overuse injury. The physical activity of the quad, especially repeated jumping and start-and-stop running, is overpowering the tissue at the growth plate. This causes inflammation and stress on the bone at the growth plate. Pain usually occurs after the activity.

Treatment is easy and, if caught early, can diminish pain and limitations. Decreasing the amount of activity and icing the area of the injury may lead to a quick return to activity, but complete rest at times is needed when pain is present with any activity.

Sever's Disease is pain or inflammation on the back of the heel, where the Achilles tendon attaches. This was common years ago because of the poor selection of shoes. With the development of Nike Air and other subsequent shoe designs, the problem in young athletes has diminished for many years. A few years ago, a young lady came into the Staywell Center and she had Sever's Disease. I asked about the shoes she wore and the young lady told me about a pair of shoes she wore all the time. At the next visit, she brought the shoes in. The shoes were an old canvas pair her mother had worn in the late 70s and early 80s. The poor design of the shoe did not support the foot properly for the activities the young lady participated in. She quit wearing the shoes and the symptoms went away within a few days. A few years later, the young lady came back with the same problem and she had the same shoes on her feet.

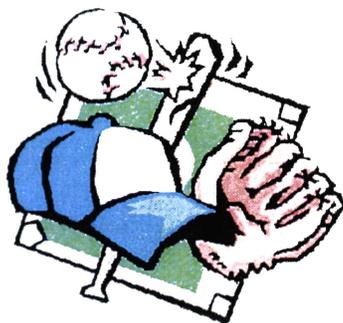


In recent years, many shoe styles have returned from that era. The lack of cushion or the honeycomb pattern used to build the rubber of the shoe can lead to Sever's Disease. To help with quick healing, simply elevate the heel (with a heel pad or a cushion) to reduce force and apply ice to the injury. This will help to diminish the pain and swelling. If the disease is severe enough, complete rest is warranted.

Good shoes with proper cushion are usually recommended because of a rigid, stiff foot type. A common trigger is when a coach has his/her team run a warm-up lap in cleats. Children or team members should not jog in field cleats. The cleats are not designed for it and neither is the body.

Little League Elbow is another cumulative trauma injury caused by repeated force where a muscle attaches to the growth plate. It can be the direct result of improper throwing mechanics, specifically poor lower body throwing mechanics. For example, a pitcher over strides and opens up too much, rather than stepping directly to the plate when pitching. A pitcher will then compensate with the arm, which increases the force on sensitive tissues, especially the inside of the elbow. This can happen with any position when a player opens up too much when throwing.

This also happens with young pitchers throwing curve balls. The action and whip required to throw a curve ball places too much force on the young, underdeveloped growth plate at the elbow and may lead to serious injuries. Most sports medicine professionals recommend that young pitchers need



to wait until the age of 15 before throwing curve balls to allow the growth plate at the elbow to close all the way. This begins for young men during puberty.

Little League Shoulder is similar to Little League Elbow. It is an overuse injury from extensive warm-up and game-time throwing by the pitcher. The following scenario is indicative of the problem. A young, talented, and hard-throwing Little League pitcher begins to get a sore shoulder that progresses as the season goes on. The player's accuracy is also diminishing. With all the new rules over the years regarding pitch counts, rest days, etc., both the coach and the dad of the pitcher are confused with what the problem is. The young pitcher begins the game and struggles to throw strikes. The coach and the dad of the boy talk between innings. The coach says, "I am not sure what is going on." The dad responds, "I don't know; he threw hard and accurate at home before we came to the game." The coach states, "Yes, and he threw great for me before he took the mound."

Here is the problem: The pitcher's dad warmed him up for 30 minutes before the game. The coach warmed the pitcher up at the game and then had him throw to the catcher. The game starts. The pitcher takes the mound to warm-up and throws 15 more pitches. Not being in a game situation, the young player takes less time between pitches



and can throw as many as two or three pitches per minute. In 30 minutes he may throw 60 to 75 times. Total it up: 60 pitches with dad, 45 with the coach, and 30 with the catcher, and 15 on the mound before the first pitch of the game.

By the time the pitcher faces his first batter, he has thrown the ball 150 times. His shoulder is fatigued and his form changes, causing strain to his shoulder. The pitcher has less control of his pitches, forcing him to throw more pitches per batter. After two innings, the pitcher complains his arm is sore from the 50 pitches he has thrown. His dad asks him if he can continue and the young athlete says, "Yes." In the next inning, the coach pulls the pitcher out of the game when he gets to pitch 75, which, by rule, requires the pitcher to come out. Because of the player's skill, he is put in as the catcher or shortstop where he continues to throw. By the end of the game, this player has thrown the ball 200 to 250 times and has a very sore shoulder.

Prevention is simple. To avoid an overuse injury, do not engage in an extensive warm-up and use "preventive ice" after each practice or game. This has been used repeatedly by sports medicine professionals for years and is proven to reduce this type of overuse injury.

