

High School Athletes

The new injury prevention plan

By Dr. Tim Maggs

32 years ago, when just starting in practice, I contacted our local high school football coach and offered my services to his team. A couple times a week I would work on any players who asked for help. As great as the job seemed, it was short lived. As soon as the school physician got wind of my involvement, I was introduced to the politics of sports. The athletic director informed me I was not to come onto the campus again.

So, my simple goal was to get back onto campus, and through the front door this time, not some side door where no one knew I was there. Along the way, I've learned a lot. We live with a broken sportsmedicine system, and this age group is all but ignored.

Here's the deal;

- Just about all healthcare decisions are based upon health insurance guidelines. Most high school athlete's care will depend upon what their insurance covers. So, they have to be injured before they can do anything. Anyone in the healthcare delivery industry knows that health insurance coverage is shrinking at a severe rate (increased co-pays and deductibles with decreased coverage), and unfortunately, the care of high school athletes is jammed underneath this broken healthcare system umbrella. Athletes, especially middle and high school athletes, have needs that are much different and far greater than the needs of the general population. These needs are ignored.
- All middle and high school athletes receive a physical prior to the season beginning, but the majority of this examination is a medical exam, i.e. eyes, ears, nose and throat. Yes, these tests are needed, but the biomechanical exam, which checks the muscular, neurological and skeletal systems, is absent. The examiner will perform a scoliosis screening. (This is like saying the absence of terminal cancer means you're healthy). As in, there's a lot more to biomechanics than a scoliosis screening.
- We live in a **reactive** healthcare system dictated by economics. These kids are never looked at until they're hurt. Secondly, our front line docs (primaries) are not trained in biomechanics, therefore, are not qualified to accurately diagnose or treat these injuries. The "System" then kicks into a costly referral system, going from the primary to the orthopedist to the physical therapist or chiropractor, and the treatment goal is to get rid of the pain/injury. No biomechanics involved.
- The New York Giants and Chicago Bulls used a conditioning pyramid, with the base of that pyramid containing 6 categories; *aerobic capacity, body composition, joint mobility, strength endurance, core strength and anaerobic capacity*. These professional athletes needed to pass tests in all 6 categories before they could enter the weight room. In almost every high school in this country, kids begin aggressively working out with weights with questionable supervision and absolutely no biomechanical evaluations. This egregious omission WILL produce devastating long term detrimental effects.
- When an athlete becomes injured, the goal is to reduce the symptoms, but never correct the underlying problem. Fig. 1 shows an example of the biomechanical imbalances that exist in all of us, and it is these imbalances that lead to the majority of injuries in athletes.

These imbalances originate in the feet (our foundation), and if this imbalance is not addressed, we have a limited potential in balancing the rest of the structure.

- We're sitting on a ticking time bomb. Many of these kids suffer with low level injuries that don't meet the criteria for taking action. But, all of these kids have mild to extreme biomechanical faults, and our current sportsmedicine system prefers to perform joint replacements and prescribe a lifetime of pharmaceuticals later rather than address the issues now.

Possible solutions;

Chiropractors and Physical Therapists—you're the biomechanical providers out there, so you need to step up. The first step is to get to the schools and educate the families and coaches. Then offer your services for a complete biomechanical exam for all athletes, not just those injured. This should take place before the season begins. A biomechanical exam can be found at www.StructuralManagement.com. Prescribe flexible custom orthotics as a first step in balancing their biomechanics.

Family Drs.—admit this isn't your specialty, and work with the families to find a chiropractor or physical therapist who will help with the biomechanical needs of the athlete.

Athletic Directors—realize you are the lynchpin to all parents and athletes in your school district. Your role is critical. Work with those who are capable of providing more biomechanical information to this group. Don't settle for that age old response, "*We've done fine without this so why do we need it now*".

Coaches—you're the ones who have the most contact with these athletes. Teach them about prevention and the importance of being disciplined in taking care of themselves. Help to build the bridge between families and biomechanical providers in your communities. Small injuries are warning signals. Please don't promote the "*No Pain, No Gain*" mantra. Realize that pain is a warning signal for underlying biomechanical imbalances.

Parents—don't stop until you find someone who will perform a biomechanical exam on your child. It will help detect the predictable signs of injuries, and will uncover the reasons why chronic injuries persist. And, encourage corrective recommendations.

Other than that, have a great month.

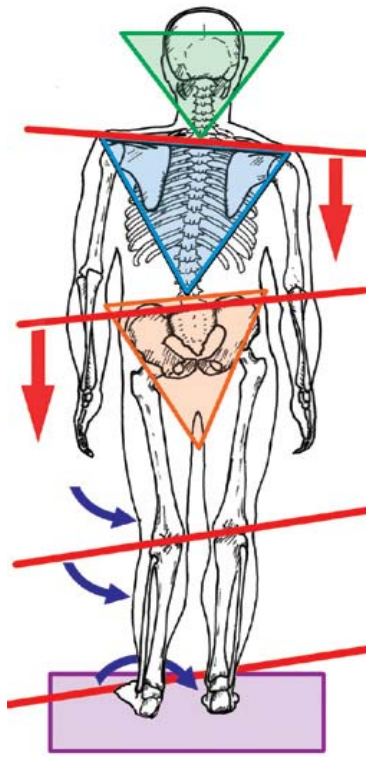


Fig. 1