

# VOLLEYBALL SAFETY

A PARENT'S GUIDE FOR KEEPING KIDS IN THE GAME

## VOLLEYBALL SAFETY

Knee and ankle injuries are the most common injuries seen in youth volleyball.

Parents and coaches should take precautions to be sure their players don't suffer sudden or overuse injuries. This reference guide provides information on the most common volleyball injuries requiring treatment.

### KNEE INJURIES

A common injury in volleyball is an **Anterior Cruciate Ligament (ACL) sprain or tear**, which occurs when the knee is twisted forcefully or hyper extended. This often occurs when landing from a jump, changing direction on the court or when colliding with another player. Athletes with a damaged ACL often describe a pop at the time of injury, followed by a significant amount of swelling within a few hours after the injury.

Athletes should see their pediatrician or a pediatric sports medicine physician if pain and or swelling persist after PRICE treatment. In addition:

- In younger athletes, bone maturity helps to determine the treatment plan. Injury to an open growth plate requires special consideration by a pediatric orthopedic specialist.
- Training in proper jumping and landing technique may help to prevent this injury.

Knee pain that comes on slowly over time can indicate other problems, such as:

- **Patello-femoral Pain Syndrome (Runner's Knee)** – pain in the front of the knee related to muscle and tissue stress around the knee cap. This can be addressed with proper training in physical therapy
- **Osteochondritis Dissecans** – a defect in the knee's cartilage that can become evident over time during repetitive activity such as jumping
- **Osgood-Schlatter Disease** – stress-related inflammation in a growth center at the front of the knee

### ANKLE INJURIES

The most common injury in sports is a lateral ankle sprain. This injury occurs in volleyball by rolling the ankle over the outside of the foot. This often occurs when landing from a block, planting for a sudden change of direction or jumping for a spike attempt. A lateral ankle sprain causes damage to the ligaments just below the bone on the outside of the ankle. In some cases a "pop" can be felt or heard by the athlete.



Treatment recommendations vary with the severity of the injury:

- Mild sprains require rest, but not necessarily medical treatment (follow the PRICE treatment plan, printed below).
- Injuries with persistent swelling, pain, or any deformity should be seen by a physician.

### SHOULDER INJURIES

Because of repeatedly moving their arms overhead, volleyball players can suffer **overuse** injuries to their shoulders. These injuries occur when tissue such as muscle, tendon, bone or cartilage is damaged by repetitive motion activities. Without ample time for recovery, the tissue cannot adapt to the demands placed on it, and further damage is likely. The body responds to the repetitive stress with inflammation that damages the tissue and causes pain. Overuse injuries, also called **chronic sports injuries**, can have symptoms including:

- Pain when performing the activity or sport
- Intermittent swelling
- Decreasing athletic performance
- Dull pain even at rest

If the symptoms persist, take your child to her pediatrician or a pediatric sports medicine physician. In each consecutive season, repetitive maneuvers by certain body parts can lead to fatigue and long-term damage.

### BUMPS, BRUISES, TWISTS & MUSCLE STRAINS

These can affect all areas of the body. Recommended treatment is the **PRICE** formula:

**P**rotect the area with a sling or crutches, if necessary

**R**est the injured area

**I**ce the injury for 20 minutes at a time. Do not apply the ice directly to the skin

**C**ompress the injured area with a wrap. Do not pull tightly, as this can cut off circulation

**E**levate the injured area above the heart, if possible

Athletes should see a pediatrician or pediatric orthopedic specialist if any of these symptoms are present:

- Deformity
- Limping that lasts more than 48 hours
- Soft tissue swelling that gets worse the next day despite ice and over-the-counter anti-inflammatory medication such as Motrin®
- Effusion – mobile soft tissue swelling on both sides of a joint, often the knee or ankle
- Pain that returns quickly with activity at the next session or is not gone after two weeks of forced rest

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# VOLLEYBALL SAFETY (CONT.)

## SPORTS SAFETY

Children ages 5 to 14 make up almost 40 percent of all sports injuries treated in hospital emergency rooms. Injuries in children are best handled by pediatric specialists trained in treating skeletally immature patients.

### How to protect your child:

- Schedule your child for an annual physical before playing sports
- Monitor play and practice and encourage players to abide by the rules
- Have a first aid kit handy and an emergency action plan in place. Appropriate shelter should also be close by in case of a storm with lightning
- Keep sports fun! Remember to be positive and don't push kids to perform beyond their abilities

### Make sure your young athlete:

- Wears appropriate properly-fitting safety gear, free of heavy wear and tear
- Stays properly hydrated. Kids don't sweat as much as adults and need to drink plenty of fluids before, during and after activity
- Does warm-up and cool-down exercises before and after practices and games
- Gets proper rest and avoids overdoing it. Baseball, basketball, running, gymnastics and swimming are sports that cause the most overuse injuries in kids



VOLLEYBALL SAFETY

## SPORTSCARE AT SSM CARDINAL GLENNON

Cardinal Glennon SportsCare is the premier pediatric sports medicine provider in St. Louis and St. Charles. We provide exclusive, direct access to comprehensive medical care for young athletes.

By working with multiple specialists and care partners, we guarantee your child will get the top care that is best suited to treat their unique injury, improving recovery time and outcome. Many of our services are offered in multiple locations so your child can even be treated close to home.

Specialists your child has access to through SportsCare include orthopedists, pulmonologists, cardiologists, radiologists, neurologists, emergency medicine physicians, adolescent medicine physicians, rehabilitation specialists, physical therapists, nutritionists and pediatric psychologists.

Partners your child has access to through SportsCare include SSM Cardinal Glennon Children's Medical Center, SSM Orthopedics, SSM Physical Therapy and SLUCare, the physicians of Saint Louis University.

We also keep kids in the game through educational programs and support for parents, coaches and athletes that focus on injury prevention, proper technique and overall athletic health. SportsCare is a young athlete's best connection to sports medicine and athletic well-being.

For more information about Cardinal Glennon SportsCare or to find a specialist for your athlete, call us at **314-577-5640** or visit us at [cardinalglennon.com/sportscare](http://cardinalglennon.com/sportscare).



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Expert care for your young athlete by SSM Cardinal Glennon pediatricians and SSM emergency medicine specialists, 24 hours a day in the ER at:

DePaul Health Center  
St. Clare Health Center  
St. Joseph Health Center  
St. Joseph Hospital West