

Prevention Strategies and Injuries Management among College Cricket Players

Abstract

The purpose of the study was to analyze the prevention and injury management among college men cricket players through various preventive methods, treatment and rehabilitation programme. The study was conducted on 80 men cricket players from different colleges in Panjab University, Chandigarh. All the subjects were involved in their daily training programme and were participating in the intercollegiate, inter-physical education and interuniversity tournaments. The subject age ranged between 18 to 25 years. The present study the subjects with hamstring strain, shoulder injury, spine injury, knee injury, ankle injury and fingers, wrist and elbow injuries were taken. The information so obtained from the questionnaire and interviews were carefully noted down, classified on the basis on injury type and locations were analyzed. The information sought through the questionnaire and the interview schedules were classified with respect to frequencies and other descriptive measures. The percentage analysis was employed to describe the relative incidence of injuries, their causes, treatment and aspects.

Keywords: Hamstring Injury Rotator Cuff Injury Rehabilitation.

Introduction

Injuries lower an athlete's fitness level, impair competitive performance, and predispose him or her to long-term musculoskeletal problems. The two best predictors of injury are a history of past damage (such as a previous ankle sprain increasing the likelihood of a future ankle sprain) and the number of consecutive days spent training (the higher the number of consecutive days, the greater the incidence of injury). Many sports injuries, whether acute (occurring suddenly or caused by sudden trauma) or chronic (of a long duration or recurring) can be prevented through proper training before participation in the sport and with appropriate action taken after the initial harmful event.

Injury prevention begins before an athlete steps onto the playing field. It involves adhering to a comprehensive conditioning program that includes a complete warm up and cool-down routine, stretching, aerobic training, and sport-specific strength training. This is the way to create well-balanced and flexible muscles. For many sports, proper and well-fitted equipment is also required. Finally, eating properly plays a key role in preventing injury, eating right makes athletes less susceptible to being injured, and an anti-inflammatory diet may minimize the impact and duration of an injury (Elise Weiss, 2008).

Objectives of the Study

The aim of the study was to analyze the prevention and injury management among college men cricket players through various preventive methods, treatment and rehabilitation programme.

Methodology

The study was conducted on 80 men cricket players from different colleges in Punjab University, Chandigarh. All the subjects were involved in their daily training programme and were participating in the intercollegiate, inter-physical education and interuniversity tournaments. The subject age ranged between 18 to 25 years. The present study the subjects with hamstring strain, ankle injury, knee injury, shoulder injury, spine injury and fingers, wrist and elbow injuries were taken. The information so obtained from the questionnaire and interviews were carefully noted down, classified on the basis on injury type and locations were analyzed. The information sought through the questionnaire and the interview schedules were classified with respect to frequencies and other descriptive measures. The

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percentage analysis was employed to describe the relative incidence of injuries, their causes, treatment and aspects.

Tools

Injury prevention questionnaire by Martin, T.J. and Committee, 2001 was used.

Result and Discussion

The analysis of data pertaining to sports injures collected from 100 men cricket players from different colleges in Punjab University, Chandigarh. The incident of injuries among the sportsmen responses were obtained with the help of carefully prepared questionnaire and personal interviews of players. Table-i percentage indication of the injuries for different anatomical location of cricket players

Table-1

Percentage Indication of the Injuries for Different Anatomical Location of Cricket Players

Anatomical location	Frequency	Percentage
Hamstring strain	7	8.8%
Shoulders injuries	8	10%
Spine injuries	3	3.8%
Knee injuries	16	20%
Sprained ankle	12	15%
Fingers, wrist and elbow injuries	10	12.5%

The table 1 indicates the percentage of injuries to different anatomical locations of cricket players. It indicates that the greater percentages of occurrence of injuries were Hamstring strain (8.8%), shoulder injuries (10%), spine injuries(3.8%), knee injuries (20%), sprained ankle (15%) and Fingers, wrist and elbow injuries (12.5%).

The following are some statistics regarding body area injured, type of injuries and recommendations for either management or prevention strategies. Ankle injuries account for (15%) of acute injuries. Management should include icing, ankle manipulation and rehabilitation including proprioceptive training. An ankle orthosis or taping may assist in active rehabilitation. The subjects under rehabilitation were under go for various strength training program like dorsi flexion and plantar flexion exercises. Knee injury account (20%) of acute injuries. Anterior cruciate ligament tears usually occur as non-contact injuries when the player lands with the knee hyper extended. The management should include hamstring stretching, quadriceps stretching, ice massage, ultra sound and petro wax treatment. Shoulder injury account (10%) of overuse injuries. Many players will have loose shoulders on load and shift testing. Scapular stabilization exercises followed by glenohumeral rehabilitation (rotator cuff) are important to prevent impingement. Spine injury account (3.8%) of acute injury, spine injury are usually managed by strength training programme and suggested asanas. hamstring strain account (8.8%) of acute injury. Hamstring strain is usually managed by fluid replacement and strength training programme. Fingers injury account (12.5%) of acute injuries. Fingers sprains are usually managed by buddy taping or splinting. The study results the need for educating

Remarking

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the players regarding the potential risk of injury occurrence, proper mastery of skill and techniques, to maintain proper physical condition and strength.

Conclusion

The result of the survey indicates that higher incidence of injuries were found in knee injury. The subjects who injured with knee injury are due to improper warming up and wrong execution of movement. The results also revealed that 20% of players injured with knee injury are due to improper warming up and wrong execution of movement. The results also revealed that 15% of players injured with ankle injury are due to improper landing. The study revealed that 8.8% of the players with hamstring strain are due to the improper warming up, overuse of muscle, fluid imbalance and weakness of the muscle. The study revealed that 10% of the players with shoulder injury are due to the wrong execution of the movement and weakness of the muscle. The results also revealed that 3.8% of players injured with spine injury are due to overuse and wrong execution of movement. They also experience 12.5% players got fingers injuries are due to wrong execution of the movement.

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