LACROSSE SAFETY

A PARENT'S GUIDE FOR KEEPING KIDS IN THE GAME

KNEE INJURIES

A common injury in lacrosse is an **anterior cruciate ligament (ACL)** sprain or tear, which occurs when the knee is twisted forcefully or hyperextended. Athletes with a damaged ACL often describe a "pop" at the time of injury, followed by a lot of swelling within a few hours.

Athletes should see a pediatrician or pediatric sports medicine physician if pain and/or swelling persist. 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.

- Core strengthening and training in proper cutting, jumping and landing technique may help to prevent this injury.

HEAD INJURIES

A concussion is a brain injury usually caused by a sudden jolt or a blow to the head or neck. This can occur in lacrosse when a stick or ball hits the athlete's head or in a collision with another athlete. An athlete does not need to be knocked out, or have memory loss, to have suffered a concussion.

You may observe that an athlete with a concussion:

- Appears dazed or stunned
- Forgets plays
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Has a behavior or personality change
- Can't recall events either before or after hit
- Loses consciousness

An athlete with a concussion may have:

- Headache
- Nausea
- Balance problems or dizziness
- Sensitivity to light or noise
- Concentration or memory problems
- Double or fuzzy vision
- Feelings of being "in a fog"

ANKLE INJURIES

The most common injury in sports is a **lateral ankle sprain**, which occurs in lacrosse by rolling the ankle over the outside of the foot. A lateral ankle sprain causes damage to the ligaments just below the bone on the outside of the ankle. In some cases a "pop" is felt or heard by the athlete. Treatment varies with the severity of the injury:

- Mild sprains require rest but not necessarily medical treatment.

- Injuries with persistent swelling, pain or any deformity should be seen by a physician.

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LACROSSE SAFETY (CONT.)

BUMPS, BRUISES, TWISTS, & MUSCLE STRAINS

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

Protect the area with a sling or crutches, if necessary.

Rest the injured area.

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

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

Elevate the injured area above the heart.

DEHYDRATION

Lacrosse players are at risk of **dehydration** if they don't get enough fluid to replace what is lost through the skin as sweat and through the lungs while breathing. It is important to drink plenty of fluids before, during and after a workout or game. Athletes should take a water bottle to school and drink between classes and during breaks so that they are well-hydrated before their workout. In addition:

- Water should be readily available when working out.

- Athletes should drink often, ideally every 15 to 30 minutes.

- Sports drinks are recommended for activities lasting longer than one hour to replace sugar and salt as well as water.

Early signs of dehydration can be non-specific and include fatigue, nausea, decreased athletic performance, headache, apathy, irritability and thirst. Signs of **advanced dehydration** include dark urine, decrease in reaction time, dry lips and mouth and disorientation.

Athletes with any of these signs should rest and drink water or sports drinks. Athletes should be seen by a doctor if they don't improve, feel dizzy or faint, or have not had much urine output. Seek emergency treatment if an athlete is disoriented, unable to drink or has pale skin. If symptoms **persist**, take your child to their pediatrician or pediatric sports medicine physician.

For more information about SSM Health Cardinal Glennon SportsCare or to find a specialist for your athlete, call us at **314-577-5640** or visit us at **cardinalglennon.com/sportscare**.

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