

# Volleyball safety

A parent's guide for keeping kids in the game.



**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.**

## Shoulder injuries

Because of repeatedly moving their arms overhead, volleyball players can suffer overuse injuries to their shoulders. Without ample time for recovery, the tissue cannot adapt to the demands placed on it, and further damage is likely. 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

## 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. 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 (follow the PRICE treatment plan, printed on pg. 2).
- Persistent swelling, pain, or any deformity should be seen by a physician.

## Knee injuries

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

Athletes should see their pediatrician or pediatric sports medicine physician if pain and/or swelling persists 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.
- Core strengthening and training in proper cutting, jumping, and landing technique may help to prevent this injury.

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

- **Patellofemoral pain syndrome** (runner's knee) — pain in the front of the knee related to muscle and tissue stress around the knee cap; 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.



# Volleyball safety (cont.)



## Sports safety

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

## Athletes should see a pediatrician or pediatric sports medicine physician 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.
- Effusion — mobile soft tissue swelling on both sides of a joint, often easily seen at the knee or ankle.
- Pain that returns quickly with activity at the next session or is not gone after two weeks of rest.

## 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.
- Keep sports fun! Remember to be positive and don't push kids to perform beyond their abilities.

## Bumps, bruises, twists, and 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.

## 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.

## SSM Health Cardinal Glennon SportsCare

SSM Health 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.

Specialists your child has access to include adolescent medicine physicians, cardiologists, emergency medicine physicians, neurologists, nutritionists, orthopedists, pediatric psychologists, physical therapists, pulmonologists, radiologists, and rehabilitation specialists. We also keep kids in the game through educational programs and supports for parents, coaches and athletes that focus on injury prevention, proper technique and overall athletic health.

For more information about SSM Health Cardinal Glennon SportsCare or to find a specialist for your athlete, call or text us **24/7 at 314-577-5640**.

Expert care for young athletes by SSM Health Cardinal Glennon Children's Hospital providers, **24 hours a day in the ER at:** SSM Health Cardinal Glennon Children's Hospital, DePaul Hospital, St. Clare Hospital, St. Joseph Hospital-St. Charles, St. Joseph Hospital-Lake St. Louis, Anderson Hospital, and HSHS St. Elizabeth Hospital.

During the COVID-19 pandemic, SSM Health ministries implemented enhanced safety measures, which are evaluated periodically based on COVID-19 transmission numbers. To ensure your protection and that of others, we continue to require face masks upon entry along with ministry-specific screening processes.