Softball Game Injuries, Prevention and Treated

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Abstract – The risks of overuse injuries in children or adolescent athletes are high for several reasons but mainly because the growing bones of young athletes simply cannot handle as much stress as the mature bones of adults. For example, a young Foot Ball player who has poor running mechanics is more at risk for injuries within the lower body or a young Softball pitcher who has not learned the proper throwing technique is at risk for elbow and shoulder injuries.

Keywords: Injuries Are Shoulder Tendinitis (Inflammation of the Tendon), Back or Neck Pain, and Elbow, Forearm, and Wrist Tendinitis. For Catchers, Back and Knee Injuries

INTRODUCTION

An indoor version of baseball, called softball, was initially developed in the United States. The first set of rules and equipment for outdoor play were designed in 1895 and the outdoor game was officially named 'softball' in 1933.

The major difference between the games is the technique by which the ball is pitched to the batter. In softball, the ball is pitched in an underarm action whereas in baseball an over arm or sidearm action is used. There are two types of softball pitching techniques used, depending on the style of softball involved. Fast-pitch softball tends to be the more formal version of the game, particularly in the United States. In fast pitch, the pitcher uses a windmill action to throw the ball thereby causing it to be released in a flat elevation. Slow-pitch softball, the more recreational form of the game and the more popular version in Australia, involves a slower pitching motion and the ball must arc approximately 6 to 12 feet when pitched.

SOFT BALL SKILLS:

- 1. Throwing, including pitching and fielding
- Catching
- Batting
- 4. Base running.

Softball injuries in young athletes are on the rise and nearly as frequent as baseball injuries, but they generally result in less time lost to competition. These injuries most commonly involve the back, shoulder, forearm, wrist, and hand. Pitchers are not more prone to injury than position players; catchers and infielders have similar injury rates. However, pitcher injuries differ from position player injuries because pitchers

use a windmill motion that places unique demands on the back, neck, shoulder, forearm, and wrist.

THE MOST COMMON INJURIES IN SOFTBALL

For pitchers, the most common overuse injuries are shoulder tendinitis (inflammation of the tendon), back or neck pain, and elbow, forearm, and wrist tendinitis. For catchers, back and knee problems in addition to overhead throwing shoulder problems are the most common. For other position players, overhead shoulder and sometimes elbow problems predominate.

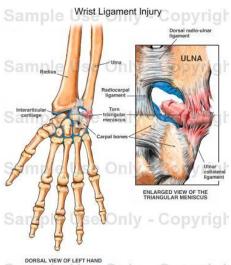
1. Back & Knee injury.





2. Shoulder & wrist Injury.





OVERUSE INJURIES ARE PREVENTABLE

- 1. Warm up properly by stretching, running, and easy, gradual throwing.
- 2. Rotate playing other positions besides pitcher.
- 3. Concentrate on age-appropriate pitching.

- 4. Adhere to pitch count guidelines (see tables).
- 5. Avoid pitching on multiple teams with overlapping seasons.
- 6. Don't pitch with pain, and see a doctor if the pain persists for a week.
- Don't pitch more than two consecutive days until age 13, and then no more than three days in a row.
- 8. Communicate regularly about how your arm is feeling and if there is pain or fatigue.
- Speak with a sports medicine professional or athletic trainer if you have any concerns about Softball injuries or softball injury prevention strategies.
- 10. Return to play only when clearance is granted by a health care professional.
- 11. The athlete should return to play only when clearance is granted by a health care professional.

MAXIMUM PITCH COUNTS

Age	Pitches/Game	Pitches/Day Days 1 & 2	Pitches/Day Day 3
8-10	50	80	0
10-12	65	95	0
13-14	80	115	80
15- over	100	140	100

AN OVERUSE ELBOW OR SHOULDER INJURY TREATED

The most obvious treatment for overuse is rest, especially from the activity that created the injury. Ice is also used to reduce soreness and inflammation, and Ibuprofen can be taken to help with any pain. If symptoms persist, it is critical that a rehabilitation professional or physician be contacted, especially if there is a lack of full motion. Unlike baseball injuries, most softball overuse injuries do not require surgery, but the care by a professional is advised, especially if pain persists or the injury recurs. Under some circumstances, surgery may be necessary to correct a problem. After a time loss injury, a return to play throwing program should be used (see references).

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