

Lacrosse

Lacrosse is one of the fastest-growing sports in the United States. It's both a contact (boys) and noncontact (girls) sport. Injuries differ between the contact game of boys' lacrosse (body contact and stick checking allowed) and the noncontact game of girls' lacrosse.

Game and practice injuries include injuries to the knee, ankle, wrist/hand, and face/head. Many injuries occur because of contact with the stick, ball, or another player, while some injuries happen because of overuse. Most lacrosse injuries are sprains/strains or contusions.

The following is information from the American Academy of Pediatrics (AAP) about how to prevent lacrosse injuries. Also included is an overview of common lacrosse injuries.

Injury prevention and safety tips

- **Sports physical exam.** Athletes should have a preparticipation physical evaluation (PPE) to make sure they are ready to safely begin the sport. The best time for a PPE is about 4 to 6 weeks before the beginning of the season. Athletes also should see their doctors for routine well-child checkups.
- **Fitness.** Athletes should maintain a good fitness level during the season and off-season. Preseason training should allow time for general conditioning and sport-specific conditioning. Also important are proper warm-up and cool-down exercises.
- **Technique.** Athletes should learn and practice safe techniques for performing the skills that are integral to their sport. Athletes should work with coaches and athletic trainers on achieving proper technique.
- **Equipment.** Safety gear should fit properly and be well maintained.
 - **Helmets with face masks** are required for male athletes and both male and female goalkeepers. Soft helmets made of foam-type material are optional for female athletes.
 - **Protective eyewear.** Female athletes are not required to wear helmets but are required to wear eye guards. These are made specifically for lacrosse and consist of a metal cage that covers the eyes and nose and should be worn at all times.
 - **Mouth guards**
 - **Gloves**

- **Additional gear for goalkeepers** includes separate throat protectors, padded gloves, chest protectors, mouth guards, pads (shins and thighs; arms and shoulders)

Common injuries

Ankle injuries

Ankle sprains are a common lacrosse injury and can prevent athletes from being able to play. Ankle sprains usually occur while an athlete is running or cutting. Ankle sprains are more likely to happen if an athlete had a previous sprain, especially a recent one.

Treatment begins with rest, ice, compression, and elevation (RICE). Athletes should see a doctor as soon as possible if they cannot walk on the injured ankle or have severe pain. X-rays may be needed.

Regular icing (20 minutes) helps with pain and swelling. Weight bearing and exercises to regain range of motion, strength, and balance are key factors to getting back to sports. Tape and ankle braces can prevent or reduce the frequency of ankle sprains. Tape and an ankle brace can also support the ankle, enabling an athlete to return to activity more quickly.

Knee injuries

Knee injuries commonly occur from cutting, pivoting, or contact with another athlete. If the athlete feels a pop or shift in the knee, then it's most likely a ligament injury. Anterior cruciate ligament (ACL) tears are more common in females than males.

Treatment begins with RICE. Athletes should see a doctor as soon as possible if they cannot walk on the injured knee. They should also see a doctor if the knee is swollen, a pop is felt at the time of injury, or the knee feels loose or like it will give way.

Athletes who return to play with a torn ACL risk further joint damage. Athletes with an ACL tear are usually unable to return to their sport.

Head injuries

Concussions usually occur with body to body, body to object (ball or stick), or body to ground contact. A concussion is any injury to the brain that disrupts normal brain function on a temporary or permanent basis.

The signs and symptoms of a concussion range from subtle to obvious and usually happen right after the injury but may take hours to days to show up. Athletes who have

had concussions may report feeling normal before their brain has fully recovered. With most concussions, an athlete is *not* knocked out or unconscious.

Prematurely returning to play after a concussion can lead to another concussion or even death. An athlete with a history of concussion is more susceptible to another injury than an athlete with no history of concussion. While helmets have not been shown to prevent concussions, they are recommended for use in contact boys' lacrosse to prevent head, neck, jaw, and dental injuries.

All concussions are serious, and all athletes with suspected concussions should not return to play until they see a doctor.

Eye injuries

Eye injuries commonly occur in sports that involve balls but can also result from a finger or another object (like a stick) in the eye. Any injury that affects vision or is associated with swelling or blood inside the eye should be evaluated by an ophthalmologist. The AAP recommends that children involved in organized sports wear appropriate protective eyewear. Both boys and girls are now required to wear eye/face shields to help protect them from serious injuries.

Wrist/hand injuries

Contusions, sprains, and fractures are common injuries to the wrist and hand in lacrosse. Getting hit with the stick is the most common way to injure the wrist and hand. Boys wear hockey-style gloves to protect their hands from injuries, whereas girls usually wear batting-style gloves.

Treatment begins with RICE. Athletes should see a doctor if their wrists are swollen or painful the next day. X-rays may be needed.

Remember

Lacrosse injuries can be prevented when fair play is encouraged and the rules of the game are enforced. Safety guidelines should always be followed. Equipment should be properly fitted, maintained, and used.

NOTES

The information contained in this publication should not be used as a substitute for the medical care and advice of your health care professional. There may be variations in treatment that your health care professional may recommend based on individual facts and circumstances.

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