Common Soccer Injuries, Prevention, and Treatment

P.R.I.C.E. Treatment Method

- Protect - Protect your injury from further harm by using a brace, splint, immobilizer, or ace bandage.
- Rest - Rest the injured area by not participating in activities that is painful to perform.
- Ice - Ice the area for 20min every 2 hours. Never use heat because that will cause the area to swell even more.
- Compression - Compress the swelling using an ace bandage or compression wrap to limit any further swelling. When wrapping the injured area start at the furthest point away from the body and move towards the body. Be sure that you are not cutting off circulation.
- Elevate - Elevate the injured area above the heart to pull blood flow away from the injured area. Use pillows to elevate the injured area.

Ankle Sprain

The most common type of ankle sprain is an inversion or lateral ankle sprain. This injury occurs in soccer by rolling the ankle over the outside of the foot. This often occurs when planting for a sudden change of direction or landing on an uneven surface. A lateral ankle sprain causes damage to the ligaments just below the bone on the outside of the ankle. In some cases a "pop" can be felt or heard by the athlete.

Treatment recommendations vary with the severity of the injury:

- Mild sprains require rest, but not necessarily medical treatment (follow the PRICE treatment plan).
- Injuries with persistent swelling, pain, or any deformity should be seen by a physician.
- Activity should be limited until you can perform sport specific movements without any pain.

Groin Strain

Also known as an adductor strain. This type of strain will be felt on the inside of the thigh. Most often it occurs from stretching the leg away from the body too far. A lot of soccer athletes will injure this when they are striking the ball or when changing direction while running. You may find it hard to bring your leg out to the side away from your body.

Treatment recommendations for this type of injury are:

- For mild strains follow the PRICE method.
- Injuries with extreme swelling, severe bruising, or a complete tear of the muscle should be seen by a physician.
- Activity should be limited until the pain has subsided when performing sport specific movements.

Hamstring Strain

Also known as a hamstring pull, this occurs when the leg is extended beyond the point of flexibility of that individual. It can also occur when making an abrupt stop (known as an eccentric strain).
Treatment recommendations for this type of injury are:

- For mild strains follow the PRICE method.
- If you are experiencing severe pain, unable to walk, or have a complete tear of the muscle you should be seen by a physician.
- Activity should be limited until you can perform sport specific movements without any pain.

Quad Contusion

A quad contusion occurs when a direct blow is taken to the quadriceps (front of the thigh). It is essentially a large, deep bruise, but can be extremely painful and sometimes make it difficult to walk.

Treatment recommendations for this injury are:

- Follow the PRICE method.
- An important addition to the PRICE method is to make sure that when you apply the ice that your knee is bent, putting your quad on a stretch.
- Stretch the quadriceps so that they do not become stiff.
- Activity should be limited until you can perform sport specific tasks without pain.
- If you are experiencing extreme pain, the bruising is spreading, you have extreme swelling, or if your skin become shiny and looks wet see a physician immediately.

Knee Injuries

A common injury in soccer is an Anterior Cruciate Ligament (ACL) sprain or tear, which occurs when the knee is twisted forcefully or hyper extended. This often occurs when landing from a jump, changing direction on the field or when colliding with another player. Athletes with a damaged ACL often describe a pop at the time of injury, followed by a significant amount of swelling within a few hours after the injury.

Athletes should see an orthopedic physician if pain and or swelling persist 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 orthopedic physician.
- Training in proper jumping and landing technique may help to prevent this injury.

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

- Patello-femoral Pain Syndrome (Runner’s Knee) – pain in the front of the knee related to muscle and tissue stress around the knee cap. This 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. Use the PRICE method to treat this condition.
- Osgood-Schlatter Disease – stress-related inflammation in a growth center at the front of the knee. The best way to treat this is to ice after any physical activity.
Concussion

Concussion is a brain injury usually caused by a sudden jolt or blow to the head or neck and disrupts normal brain function. An athlete does not need to be knocked out or have memory loss to have suffered a concussion. In fact, most athletes who suffer a sports-related concussion DO NOT lose consciousness.

You may observe that an athlete with a concussion:

- Appears dazed or stunned
- Is confused
- Forgets plays
- Is unsure of game, score, or opponent
- Exhibits unsteadiness or 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
- Sensitivity to light or noise
- Nausea
- Balance problems or dizziness
- Double or fuzzy vision
- Feelings of being “in a fog”
- Confusion
- Concentration or memory problems

An athlete with signs of a concussion should be removed from play immediately and not allowed to return until evaluated by a doctor. Do not leave an athlete alone after a concussion.

Call for immediate medical help the athlete displays:

- A headache that gets worse, lasts for a long time or is severe
- Confusion, extreme sleepiness or trouble waking up
- Vomiting (more than once)
- Seizures (arms and legs jerk uncontrollably)
- Trouble walking or talking
- Weak or numb arms or legs
- Any other sudden change in thinking or behavior

Most athletes with a concussion will recover completely within a few weeks of the initial injury. Returning to play before completely recovering puts the athlete at risk for a more serious injury, long-term damage and even death.