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## **National Athletic Trainers' Association Issues 2010 Report Card on the Youth Sports Safety Crisis at Washington, D.C., Summit**

### ***Incidence of youth sports injuries spotlights the need for improved health care New concussion study news is released today***

DALLAS, December 7, 2010 – With the support of 40 sports and health organizations, the National Athletic Trainers' Association (NATA) today presented a 2010 report card on the youth sports safety crisis. Today's event at the Cannon House Office Building in Washington, D.C., was a follow-up to NATA's first summit earlier this year where it created the Youth Sports Safety Alliance to encourage legislation and action regarding medical care, equipment safety and increased research into making youth sports safer.

The incidence of youth sport injuries, recent national attention to helmet-to-helmet hitting in football, and the risk of chronic or catastrophic injury from concussion, sudden cardiac arrest, sickle cell trait and heat illness, among other conditions, has spotlighted the urgent need for immediate and improved health care on the playing field. "More kids are playing more sports year-round today," said event moderator Marjorie J. Albohm, MS, ATC, NATA president. "Yet physical activity doesn't come without risk, and the sports philosophy of 'playing through pain' can result in young athletes, eager to make good impressions, continuing or returning to play, when sitting out and taking time to recover is the safest course of action."

Giving the year a "C+" – NATA noted that 48 young athletes have died since the beginning of this year. Sudden cardiac arrest accounted for nearly half of those deaths, while brain injury (concussion) accounted for three, heat illness three, and exertional sickling (a result of sickle cell trait) caused one. On the other hand, Alliance members and other organizations – including state legislatures – are working hard to address safety issues and prevent further deaths. Given what has transpired this year, the Youth Sports Safety Alliance, spearheaded by NATA, has issued a revised Call to Action for athletes, parents, coaches, health care providers and legislators.

Approximately 8,000 children are treated in emergency rooms each day for sports-related injuries. According to the Centers for Disease Control and Prevention, high school athletes suffer 2 million injuries, 500,000 doctor visits and 30,000 hospitalizations each year. "There are three times as many catastrophic football injuries among high school athletes as college athletes, yet only 42 percent of high schools have access to athletic training services," Albohm said.

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## **Speaking Out for Youth Sports Safety**

Kelci Stringer founded the Korey Stringer Institute to serve the needs of active people and athletes at all levels, people who are physically active, and those who supervise and care for these individuals. Her journey towards advocacy, education and prevention of sudden death in sports began on Aug. 1, 2001, when her husband, NFL all-pro lineman Korey Stringer, died from complications of an exertional heat stroke at the age of 27 while practicing with the Minnesota Vikings. As a young widow and mother, she struggled to decide on the best way to honor her husband's memory, and she ultimately established the Korey Stringer Foundation, which has been instrumental in developing a partnership with the National Football League, Gatorade and the University of Connecticut, Neag School of Education to form the Korey Stringer Institute.

Julie Gilchrist, MD, a pediatrician and medical epidemiologist at the National Center for Injury Prevention and Control, Centers for Disease Control and Prevention (CDC) spoke about her organization's commitment to youth sports safety and its dedicated resources on the consumer education and scientific research fronts.

According to Dawn Comstock, PhD, associate professor at The Ohio State University College of Medicine, although boys continue to participate in sports at a higher rate than girls, female athletes are now more likely than their male counterparts to suffer sport-related concussions. Comstock discussed the findings of a new study on gender differences in concussions. The study, to be published in the January 2011 *Journal of Athletic Training*, found no difference in the number of symptoms reported by males and females; however, athletes often reported different types of symptoms, depending on their gender.

Jeff Miller, vice president for Government Relations and Public Policy for the National Football League, reported on the NFL's state legislative advocacy program for 2011. The League is collaborating with the National Athletic Trainers' Association in that effort.

Patti James discussed her ongoing work to enact state legislation to protect young athletes from heat stroke. James is the mother of Will James, a 16-year-old football player in Little Rock, Ark., who passed out from heat stroke on Aug. 13, 2010. He was eventually placed in a medically induced coma for a week and suffered liver damage and kidney failure; he recovered from both. "Heat stroke is life-threatening and it can happen to athletes at all levels – including children," James said. "I'm working to make sure that what happened to my son and our family doesn't happen to others."

### **Medical Presentations: Highlight Risks, Prevention and Treatment**

Gerard Gioia, PhD, a pediatric neuropsychologist and chief of the Division of Pediatric Neuropsychology at Children's National Medical Center, is researching the development and implementation of more effective methods and tools for early and ongoing evaluation of post-concussion neuropsychological functioning and symptoms. Gioia spoke about the need to implement updated guidelines to determine concussion on the field; ways to improve recognition of concussion and to speed the removal of an injured player from the field; and the urgent need for individual assessment and tracking from the time the injury occurred, through treatment and eventual return to play.

For the past 11 years, Douglas Casa, PhD, ATC, FACSM, FNATA, has worked toward his goal of preventing sudden death in sports at the University of Connecticut, Neag School of Education, Department of Kinesiology. According to Casa, 2005 through 2009 were the worst years over the past 35 on record for exertional heat stroke. Casa, once a victim of heat illness himself, spoke on the dangers of heat illnesses, methods of prevention and the latest treatments, including the need to cool affected athletes before transporting them to the emergency room.

Francis O'Connor, MD, MPH, associate professor at the Uniformed Services University, medical director for the Consortium on Health and Military Performance, and president of the American Medical Society of Sports Medicine, spoke about sudden cardiac arrest in athletes. He stressed the need for pre-participation screening for heart ailments, as well as the efficacy of having electronic heart defibrillators, athletic trainers and emergency action plans available, in case an athlete succumbs to cardiac arrest on the field.

Scott Galloway, ATC, LAT, is the head athletic trainer at DeSoto High School in DeSoto, Texas. In 2007, Galloway, who was selected to participate in the National Athletic Trainers' Association Task Force on Sickle Cell Trait, encourages sickle-trait testing of athletes at every level to ensure safe participation in sports. In the past 11 years, exertional sickling has killed 16 athletes, making SCT the leading cause of non-traumatic death in Division 1 football in the past 10 years.

For more information on the Summit and the Youth Sports Safety Alliance, please visit [www.youthsportssafetyalliance.org](http://www.youthsportssafetyalliance.org).

**National Athletic Trainers' Association (NATA) – Health Care for Life & Sport**

Athletic trainers are health care professionals who specialize in the prevention, diagnosis, treatment and rehabilitation of injuries and sport-related illnesses. They prevent and treat chronic musculoskeletal injuries from sports, physical and occupational activity, and provide immediate care for acute injuries. Athletic trainers offer a continuum of care that is unparalleled in health care. The National Athletic Trainers' Association represents and supports 32,000 members of the athletic training profession. NATA supports the Athletic Trainers' Equal Access to Medicare Act (H.R. 1137). Visit [www.nata.org](http://www.nata.org)

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