PREVENTING WRESTLING INJURIES

Wrestling, one of the world’s oldest sports is offered at various levels of competition, including the Olympics, the American Athletic Union, the U.S. Wrestling Federation, and high school and college-sponsored tournaments. It’s a sport for all sizes of people. Competition rules require that athletes be paired against each other according to their weight class. Some competitions require that contestants be matched by age, experience, and/or gender. This not only allows more people to participate, but also decreases the risk for injury. Nevertheless, injuries do occur, particularly in the knee, shoulder, skin and head.

WHAT ARE SOME COMMON WRESTLING INJURIES?

The face and head are the most common areas to be injured during wrestling, including concussions, scrapes and bruises. However, knee injuries occur with more severity than all other injuries and are responsible for the most lost time, surgeries and treatments. Speciﬁcally, prepatella bursitis, ligament sprains and skin infections are among the most common injuries.

- **Prepatella bursitis**
  Prepatella bursitis is the inﬂammation of the sac (bursa) located in front of the knee (patella). For wrestlers, the constant stance of being on the kneecaps can irritate the area and keep the kneecap from moving smoothly under the skin. Once prepatella bursitis has developed, it’s treated by anti-inﬂammatory medication, such as ibuprofen or aspirin, ice, rest, and kneepads.

- **Ligament injuries**
  Ligament injuries can also occur during wrestling, most commonly to the inside or outside of the knee. These injuries are often the result of the leg twisting outward from the midline of the body. First-degree strains can be treated with RICE (Rest, Ice, Compression and Elevation) and the athlete can return when the pain subsides. Second and third degree strains need to be treated by a physician, but they rarely need surgical intervention. Anterior cruciate ligament (ACL) strains are injuries that cause instability of the knee, and in most cases, require surgery for the athlete to compete at the same level. The wrestler can expect to return to competition six-to-nine months after surgery, following a rehabilitation program.

- **Skin Infections**
  With deadly infections such as MRSA developing in schools across the country, infection prevention is key. Epidemics of skin infections have been known to spread quickly from team member to team member with the three most common infections in wrestlers being herpes simplex, ringworm, and impetigo. With so much skin-to-skin contact, it is especially important to minimize risk by:
  - Taking routine and thorough showers both before and after practice and matches
  - Wearing clean clothing at each practice session
  - Sanitizing mats with antiseptic solution after each practice
  If an infection does develop, a doctor should treat it promptly with antibiotics or antibiotic creams. Wrestlers may continue to drill or participate in conditioning workouts, but should avoid bodily contact with other team members until the infection is completely resolved.

HOW DOES WEIGHT CONTROL AFFECT WRESTLERS?

Proper control of diet, preferably with the advice of the coach and a dietician, is the preferred method of “making weight.” If a wrestler maintains his weight near his weight class limits, it is then a simple matter to lose two-to-four pounds to “make weight.” Nutritional advice should emphasize daily caloric requirements associated with a balanced diet based on age, body size, growth, and physical activity level.

Weight reduction in wrestling, unfortunately is practiced most commonly to “make a weight class.” This desire to make weight is often influenced by uninformed friends and other wrestlers. Such extreme tactics as utilizing rubber suits and a sauna to sweat off weight pose a health hazard and definitely weaken the wrestler before a match. Severe dehydration and food deprivation also diminish muscle strength and endurance, leading to a weakened physical condition. Additionally, entering a bout under these conditions will make the wrestler more susceptible to injury and illness.

Recently, most wrestling associations have adopted regulations to ensure control of body weight by establishing
minimum weight certification programs. In these programs, each wrestler must weigh in during the first two weeks of the season. The athlete's minimum weight is not established as the athlete's best weight, but rather as no less than seven percent of his/her initial weigh-in.

**SUMMARY**

An injury, no matter how trivial, should be treated as soon as possible. A small cut or scrape may not be of much consequence in hockey, football, or track athletes, but for a wrestler, even a minor infection can keep him out of a match. Any injury should be reported to the coach, trainer, or personal physician as soon as possible, so that proper care can be started. Rehabilitation after an injury is an important part of preventing further injury, since a large number of all injuries result from aggravation of an old injury.

Injury prevention should be a primary goal of all participants, coaches, and trainers. This requires using good-quality equipment, including mats, uniforms, headgear and pads. The wrestler should be coached and supervised at all times, stressing proper technique and discipline to avoid injury. Proper officiating can also do much to prevent injuries. Finally, a well-structured strengthening program conducted under proper supervision can help prevent injury and enhance the athlete's performance.

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