

AVOID THE
SHOUTING IN
PAIN PART OF
YOUR SUMMER
ATHLETICS



TWIST AND SHOUT

With the extra number of daylight hours in the summer, it's easy to get in some extra time on the soccer field or the basketball court. But for weekend and evening warriors, that could be extra time to cause a knee injury.

Dr. Al DeSimone sheds some light on one of the most common knee injuries: ACL tears. DeSimone is a board certified orthopedic surgeon who is sports medicine fellowship trained and specializes in shoulder and knee ligament reconstructive surgery and answers some questions about this common injury.

WHICH SPORTS TEND TO CAUSE AN ACL INJURY?

The twisting and pivoting sports, with lots of starting and stopping, such as soccer, football, basketball and lacrosse.

WHAT IS THE ACL?

Anterior cruciate ligament (ACL) ruptures remain one of the most devastating injuries to the young competitive athlete. The ACL is the major supporting ligament within the knee joint providing stability to the knee during running, cutting and twisting sports.

EXPLAIN THE INJURY.

Though a traumatic collision with another athlete can cause a rupture to the ACL, a sudden alteration in speed and/or change in direction can also predispose an athlete to this injury.

WHAT HAPPENS WHEN THE INJURY TAKES PLACE?

The athlete will often describe a loud popping sensation within the knee joint and experience severe pain, swelling and weakness combined with an inability to ambulate.

HOW IS THE INJURY DIAGNOSED?

Diagnosis is usually made by obtaining a proper history of injury and by performing a thorough clinical examination of the involved knee. X-rays and MRIs are extremely beneficial during this evaluation and will often help rule-out concomitant injuries to the adjacent ligaments, menisci and/or cartilage.

HOW BEST TO PREVENT AN ACL INJURY?

It comes down to conditioning. When an athlete has the proper conditioning such as strength training, conditioning specific to the sport, proper nutrition and hydration, that will prevent fatigue.

WHAT IS THE TREATMENT?

The goal of treatment is to return the athlete back to his or her prior level of activity, including competitive sports. Rarely, one may consider conservative/non-operative treatment for those patients that are extremely sedentary and inactive in athletics. In this incidence, treatment may include rehabilitation, bracing and restriction to certain activities.

For those individuals who are competitive athletes and participate in high-demand twisting sports, surgical ACL reconstruction is the treatment of choice.

WHAT SHOULD SOMEONE DO IF THEY THINK THEY'VE HURT THEIR ACL?

Get off the leg. Don't attempt to return to that sport. Ice the knee, use crutches and elevate the knee. Then see an orthopedic or sports medicine specialist, someone who takes care of this kind of injury at least two to three times a week.

HOW BEST TO PREVENT AN ACL RE-INJURY?

Though re-injury may be a common cause of failure subsequent to ACL reconstruction, technique related failures are commonly seen. Timing of surgery and proper postoperative instructions, including return to athletics, also play a significant role in prevention of re-injury. I prefer to utilize bone-patella tendon-bone autograft for the young, high-demand athlete.

WHY IS IT IMPORTANT TO SEE A SPORTS MEDICINE SPECIALIST?

Treatment of an ACL rupture continues to be a challenging problem for the high school, collegiate and community athletes. It is imperative that young individuals (and parents) understand the importance of pursuing treatment by an experienced surgeon, preferably with a subspecialty interest in knee ligament reconstruction. Failure to do so may predispose an athlete to additional surgery and prevent return to sports in a timely manner.