

Kevin Zawadzki of East Aurora moved his coaching efforts — and his son — from football to baseball when he felt the league wasn't receptive enough to adding more safety measures.

For many families, sports are a step away from the mind-numbing, obesity-fueling world of electronics and a way to develop physical skills while learning to win and lose with grace. But along with that comes the threat of injury — from the minor to the cataclysmic — that can sideline a child for a season, or alter his life forever.

Managing risk

By Laurie Kaiser

During one of his son's football games a few years ago, Kevin Zawadzki of East Aurora witnessed a 9-year-old boy put back into play after receiving a blow to the head.

"The coach didn't realize he had a concussion," said Zawadzki, a former Little Loop coach himself. "The child was dizzy and at the end of the game he was throwing up. In my mind, we're not educated on the science of concussions."

It bothered Zawadzki so much that he started investigating concussions in children and found that constant contact is too much for young, undeveloped children.

"There are so many drills and things you can do to improve football skills without contact at all," he said.

He invited physicians and former Buffalo Bills player Mark Kelso to address the league and encourage less contact among the players during prac-

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Tips for preventing sports injuries in children

- Ensure appropriate equipment and footwear.
- Encourage stretching before and after games and practices.
- Check to see that child is appropriately sized for his or her team.
- Make sure child rests — taking not just days off but seasons off, too.

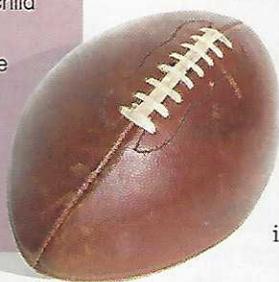
Source: Michael Ferrick, pediatric orthopedic surgeon at Women and Children's Hospital

Recognizing a concussion

If you suspect a child may have a concussion, look for changes in personality and how the child is able to process information. Balance will be off and the child may stare "like a deer in the headlights." A child doesn't need to be unconscious to have suffered a concussion. The safest thing to do is take the child out of the game and have him evaluated by a physician.

If the physician determines the child has a concussion, he or she should rest for at least a few days in a dark room without computers, television or even books, in order to give the brain a chance to heal.

Source: John Leddy, internal and sports medicine physician and director of the University of Buffalo's Concussion Management Clinic, and Karen Hughes, director of athletic care and outpatient rehabilitation for Catholic Health



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tice, and fewer days of practice.

"Not all coaches were receptive to the changes," Zawadzki said.

This "culture of resistance," as termed by a 2013 report issued by the Institute of Medicine and the National Research Council, resulted in Zawadzki moving his son and his volunteering efforts to baseball.

The report also found that self-reporting of concussions and adherence to treatment plans is lacking. Add that to a growing competitiveness at an earlier age for all sports, and the result is a rise in children's injuries — both concussions and otherwise.

According to the Centers for Disease Control and Prevention, almost 3 million U.S. children end up in emergency rooms for sports-related injuries each year,

while millions more are treated at clinics and by family physicians.

Local physicians have witnessed the impact, too.

Since he began practicing 17 years ago, Michael Ferrick, a pediatric orthopedic surgeon at Women and Children's Hospital, has seen a jump in sports injuries and injuries occurring at younger ages. He attributes this to more kids being involved in sports and the tendency to focus on one sport year-round. The most serious injuries Ferrick has treated have come from football, snowboarding and freestyle skiing.

"We've treated a number of spinal injuries, along with joint dislocations, broken bones and fractures."

Karen Hughes, director of athletic care and outpatient rehabilitation for Catholic Health, has also seen a rise in injuries in younger athletes.

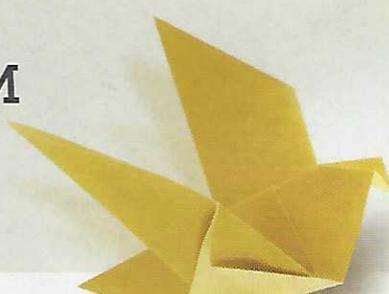
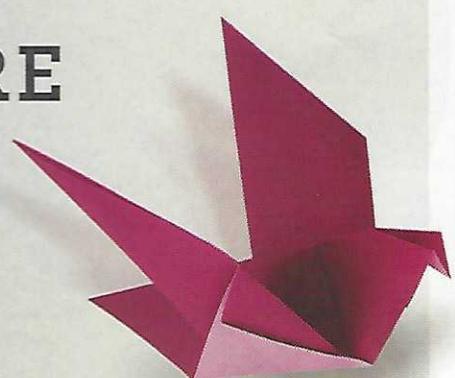
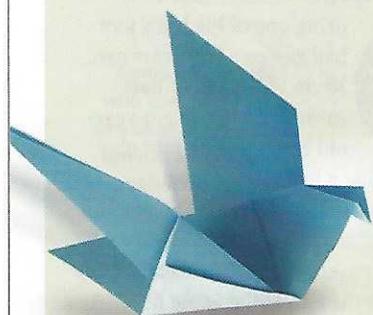
"Kids are doing things that are beyond their development,"

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Hughes said. "For instance, children younger than 13 shouldn't be lifting weights, but they are. Children can't be treated as little adults."

At the University of Buffalo's Concussion Management Clinic, Director John Leddy, an internal and sports medicine physician, said he's seen the number of concussions double over the past two decades, with more occurring in children between 9 and 19 years old.

"More kids are participating in contact sports," he said, "and kids are bigger and faster than they used to be."

Ferrick believes adult expectations also play a factor. Tougher drills are trickling down from the money involved in the pros, he said.

"Fifty or 60 years ago, businessmen made more than pro athletes," he said. "Not anymore. Scholarships for college athletes are linked to that. It's a big incentive for parents and coaches to push too hard."

One recent bright spot is that the topic has garnered more national attention. NFL athletes are speaking publicly about the long-term impact they've experienced from head injuries, and in late May, the White House hosted the first Healthy Kids and Safe Sports Concussion Summit to advance research on sports-related youth concussions and raise awareness on how to prevent, identify and respond to the injuries.

But Zawadski said that even though more youth football leagues are trying to make positive changes, it's a slow process.

Beyond football

Although they don't receive as much attention as concussions and more traumatic injuries, "overuse" injuries are also on the rise — about one-quarter of which are serious. When children play the same sport and perform the same movement too often,

tendons, bones and joints can become overtaxed.

"No longer do kids play hockey for three months out of the year," Ferrick said. "Now it's all year long — and the level of intensity increases. We're seeing more back, knee and shoulder injuries."

Leddy said playing the same sport for too long results in back and neck pain in hockey players, shoulder injuries in tennis players and swimmers, and growth plate, elbow and rotator cuff injuries in young baseball players.

Ferrick recommends that children under age 15 not concentrate on one sport all year, which can be a tough pill to swallow for children and parents who feel year-round participation is necessary to compete.

Getting children to rest following an injury also is a challenge.

"A kid may be told not to play basketball for a week following an injury," Hughes noted, "but then he's playing hockey all weekend."

"Younger children heal much more quickly than adolescents or adults, but that is a double-edged sword," Ferrick said. "Because they feel better, they are more likely to want to move around before the tissue has finished healing."

It's imperative, he said, for parents to be on board to ensure that children heal properly and thoroughly.

And nowhere is this more important than with head injuries. Following a concussion, children need to be resting their brains as well as their bodies.

"Most kids shouldn't go back to school for the next day or so," Leddy said, "and they need to limit their cognitive activities at home, including refraining from playing video games and watching TV sometimes for two weeks or more. The trick in concussion management is knowing when a child has rested enough." ■

Laurie Kaiser is a local freelance writer.



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