



Appendix to the POSITION STATEMENT

Neuromuscular Training Programs Can Decrease Anterior Cruciate Ligament Injuries in Youth Soccer Players

Implementation of ACL Injury Prevention Programs at the Community Level

In partnership with the Kamloops Youth Soccer Association (KYSA) we embarked upon a program to reduce the risk of ACL tears in young soccer players. Our first goal was to educate the board of directors of the KYSA about the incidence of ACL tears, in particular amongst young female athletes, and then to solicit their cooperation in implementing this program. The KYSA agreed to implement this program across their entire rep program for youth soccer. They also agreed to let the House league coaches know about these education sessions and take part if interested. This program had three components.

1. Education

This involved holding education sessions for parents, athletes, and coaches (evening lectures and discussions). It is essential that all those involved know what the risks are for ACL tears in young athletes and to know what the consequences of these injuries are both in the short-term and the long-term. We also worked to educate them regarding interventions that can help to reduce the risk of these injuries. We held a number of evening education sessions for parents regarding ACL prevention programs. Primarily it was the parents of young athletes that attended.

2. Coaches – Dynamic warm up

The second component was to institute a dynamic warm-up program that the coaches would implement at every practice and before every game. This was done across the entire rep program. The KYSA made it mandatory for all rep coaches to attend these education sessions. The sessions consisted of a lecture outlining similar information that was used to educate the parents but also included a discussion of the 11+ program. We then used a rep soccer team to go through the 11+ program in detail, on the field with the coaches and demonstrated some of the dysfunctional movement patterns the coaches could look for in their players. We chose the 11+ program because it was well packaged and consisted of considerable resources (video, manual etc.) that could be used to educate coaches.



Most coaches have well-established training programs developed over years. It is important to recognize that, but to persistently encourage them to implement the 11+ as their regular warm up program. It is only with consistent implementation at every practice and before every game, that it will have the maximum effect in terms of reducing the injury rate. Ongoing monitoring of compliance and encouragement is essential as the program is implemented.

3. Specific ACL Injury Prevention

The third component was to offer a more intense eight-week, 16 session program for ACL prevention. This was run through our sport medicine clinic at a nominal cost to each participant. This program was modeled after the best evidence in the literature, as well as the experience that our Athletic Trainer (CATA) had gained by implementing this with varsity athletes at Thompson Rivers University for the past five years. The program was designed to include any athletes that were interested and those that the coaches identified as being at higher risk. An Athletic Trainer with the help of a Sport Physiotherapist (SPC) and exercise physiologist ran the program.

It is critical that qualified and knowledgeable health care professionals that have expertise in conducting these programs in neuromuscular training offer these programs.

Parents with athletes participating in soccer are already busy with practices, games and other training sessions. The additional time and cost of a program like this was not felt to be mandatory but was felt to be necessary and available until these prevention programs could be offered consistently by coaches. This last sentence seems awkward and its meaning is unclear.

This is a work in progress. Education is the key component. Monitoring of each coach's compliance in consistently implementing the 11+ program is ongoing. We have had good support from the Board at the KYSA as well as the head coach. Expansion to the house league and rec league coaches will follow next year.

We have plans to do the same type of intervention with the local school board to see these programs expanded to high school soccer programs.

Respectfully submitted,

Ross Outerbridge, MD, FRCSC. Dip Sport Med
Sage Sport Institute, Kamloops, BC
1-250-314-5000
routerbridge@sagesportinstitute.com