

## INJURIES AND PERFORMANCE IN FOOTBALL

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### ABSTRACT

*The primary aim of the present study was to identify the incidence of injuries among competitive footballers. The investigator has made an attempt to classify or define the groups of footballers based on the age of the footballers. Accordingly three groups of footballers were targeted; junior, young and senior group football players aged between 14 to 30 years. The information of injuries was collected, individually through a questionnaire from 685 football players. The investigator personally contacted the players and the purpose of the study was explained to them. Further instructions were given by the investigator to the players for the completion of questionnaire. A questionnaire prepared by Cromwell & Gromely (2007) for elite Gaelic football players and modified by the investigator was used. Result reveals that 72.10% junior, 27.72% young and 15.85% senior groups football players were absent from training due to their injuries. Meanwhile, 8.18% junior, 37.91% young, and 39.28% senior groups football players were affected their play due to their injuries. Doctor treats maximum percentage of injuries to football players.*

*Keywords: Hazardous. Injury and Performance.*

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### INTRODUCTION:

Football has been demonstrated to be among the most hazardous of organized team sports and injury is a frequent event in football ( Winter Griffith, 1989; Sinku 2006 ).

Football requires a variety of physical attributes and specific playing skills, therefore participants need to train and prepare to meet at least a minimum set of physical, physiological and psychological requirements to cope with the demands of the game and to reduce the risk of injury. It is an enjoyable and social sport than can be played from childhood to old age, either at a recreational level or as a competitive sports. Football playing largely involves starting, running, slopping, twisting, jumping, kicking, and turning movements that place the players to greater risk of injury ( Waston 1993).

In the epidemiological studies, injury occurs in training or matches interrupted or hampered play ( Sinku 2006 and 2007 ). Special treatment required in order to continue the game, or if the injury has made playing impossible. Football has received a little interest in the sphere of sports medicine.

Football is a high risk sport dominated by overuse injuries while recovery time from injuries is relatively long, but only a few working days are lost by the players to return back to play, thus leading to abuse of the injured sites. In football only a few studies have been made in the literature regarding incidents of injury and pattern, possible risk factors and injury prevention (Winter Griffith, 1989; wastan. 1993; Junge, 2004 ). In football overuse injuries are the most frequent occurrences of injury; and injuries are traditionally divided into contact and non contact mechanism in which case contact refers to players contact. Some of the forces involved in a non contact injury are transmitted from the playing surface to the injured body part.

Football is sports that makes heavy demands on the player. The physical work is intermittent involving high intensive activity interspersed with short pauses.

When the time of exposure is taken into account, men have a higher injury risk than women and recreational player a high risk than elite players. Contrary to most other sports the relative injury risk is higher during training than in match.

#### MATERIALS AND METHODS:

The study deals with effects of play due to injuries among three groups of competitive footballers. The investigator has made an attempt to classify the footballers based on the class of the games. Accordingly three groups of footballers were targeted. Junior, Young and Senior football players their aged between 14 to 30 years. The data was collected with the help of questionnaires prepared by Cromwell, F.J. Walsh Gromley for Elite Gaelic footballers (2000) and it was modified by the investigator and utilized. The subjects were required to fill out a separate part B for each injury occurrence within one year.

#### STATISTICAL ANALYSIS:

The Statistical Package for the Social Sciences (SPSS; version 18.0) was used for the data analysis. One Way Analysis of Variance and LSD post hoc test were used to assess overall differences of injuries among tree group.

**RESULTS AND DISCUSSION:**

This section is dedicated to the presentation of results along with the discussion of present study. The results and discussion have been presented in concise and comprehensive manner that is easy to comprehend. The results concerning this are presented in the form of figure. For the sake of convenience and methodical presentation of the results, following order has been adopted.

Figure-I, illustrates the Percentage of Absentees from Training due to incidence of injuries among three groups of competitive football players

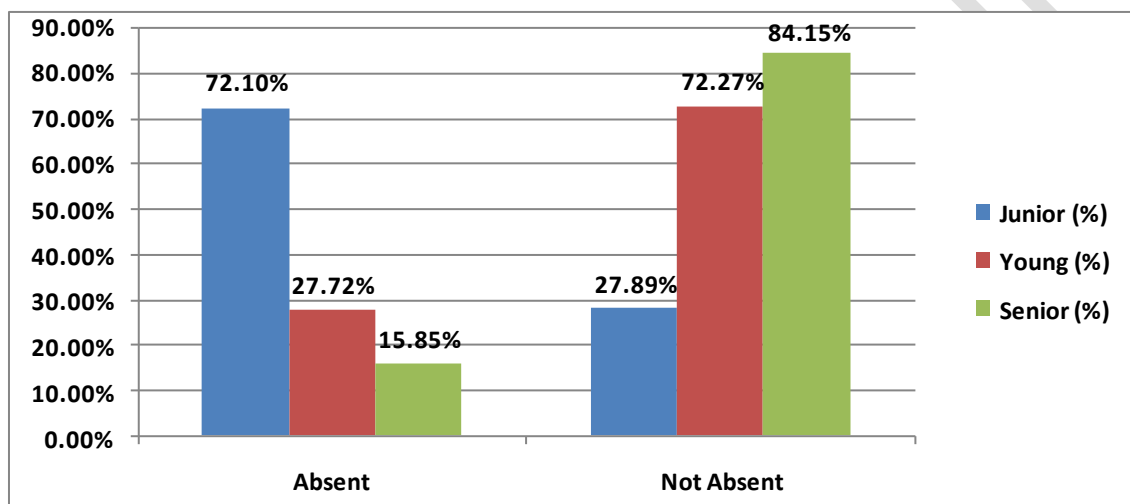


Figure –II, illustrates the Percentage of Play Affected due to injuries among three groups of competitive football players

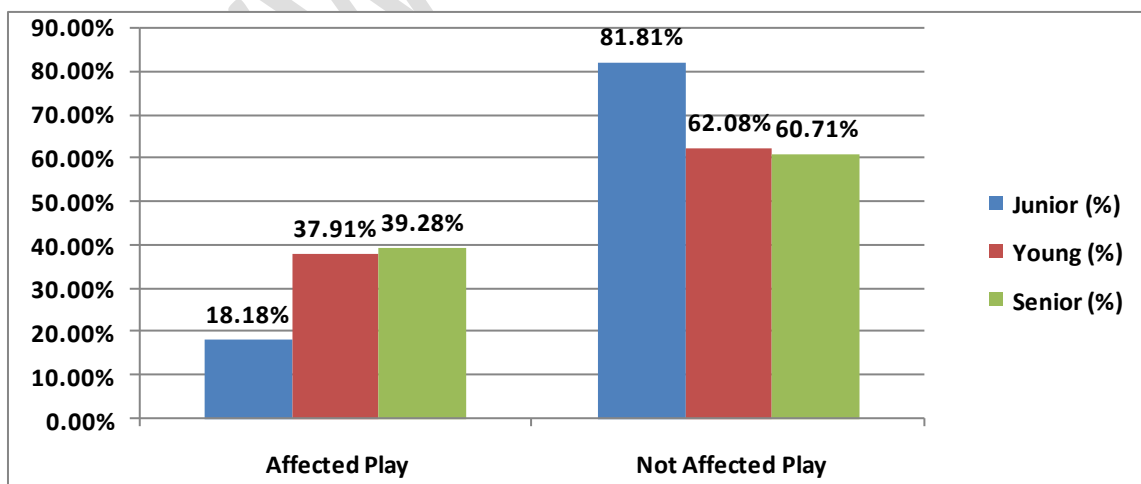


Figure-III illustrates the Percentage of Recommendation of Treatment of injuries among three groups of competitive football players

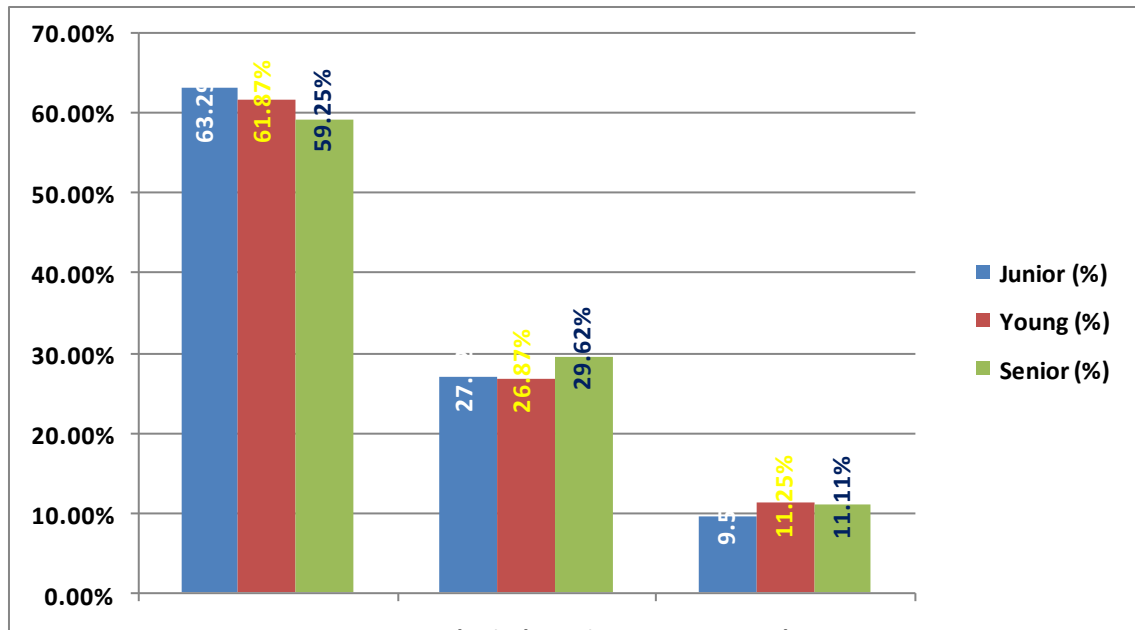
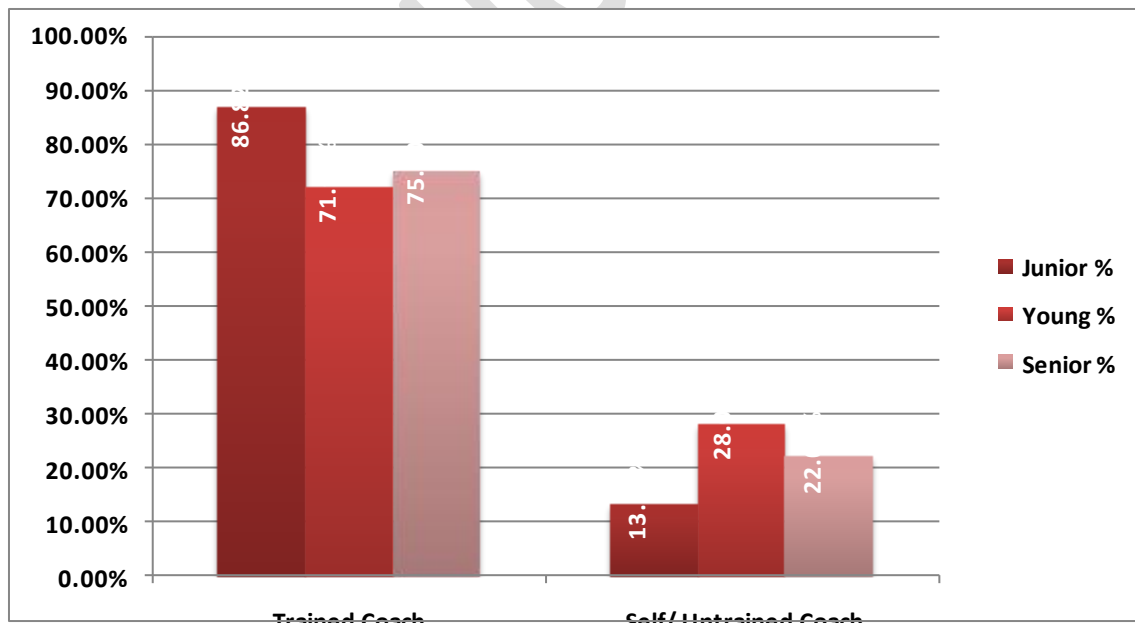


Figure-IV, illustrates the Percentage of Training by Trained and Self or Untrained Coach among three groups of competitive football players



## DISCUSSION OF FINDINGS:

Figure I, shows that the percentage of absentees from training due to injuries among three groups of competitive football players. 72.10% junior, 27.72% young and 15.85% senior groups football players were absent from training due to their injuries. However, 27.89% junior, 72.27% young, and 84.15% senior groups football players were not absent from training due to injuries.

Meanwhile, 8.18% junior, 37.91% young, and 39.28% senior groups football players were affected their play due to their injuries. However, 81.81% junior, 62.08% young, and 60.71% senior group football players were not affected their play due to injury. Keeping in view the fact that injuries have important health consequences during their participation in game, a large number of studies on been have been reported from different countries of the world. Data on the injuries from England America Brazil, China, Russia and Europe are available in the literature, all these reports made the football expert realize the play affected due to injuries of football players.

Figure -III shows that the percentage of recommendation of treatment of injuries among three groups of competitive football players.

Doctor treated 63.29% injuries of junior group football players, 61.87% injuries of young group football players, and 59.25% injuries of senior group football players. Physiotherapist treated 27.12% injuries of junior group football players, 26.87% injuries of young group football players, and 29.62% injuries of senior group football players. However, other treated 09.57% injuries of junior group football players, 11.25% injuries of young group football players, and 11.11% injuries of senior group football players. Figure III reveals that Doctor treats maximum percentage of injuries to football players. This result is also supported by Crombell 2002, Sharma 2003, Singh 2007, pagare 2009, Singh 2009, stayajeet 2010 and Verma 2010 reported that maximum injuries treated by the doctor to the sports person.

Figure IV, shows that the percentage of training by trained and self/untrained coach among three groups of competitive football players. 86.82% Junior group football players have taken training by trained coach. 71.94% young group football players have taken training by trained coach and 75.00% senior football players have taken training by trained coach. Junior group football players have taken more training by trained coach.

Most team sports have been examined in the scientific literature at some point in time with regard to estimating the number of injuries occurring. Other field games similar to Gaelic Football have conducted injury surveys. The Australian Football League conducted its first comprehensive study in 1983 and has

conducted a continuous injury survey since 1992 with the injury rates published annually (Orchard and Seward 2002; ) numerous epidemiological studies on injuries in elite level Soccer have been conducted comparison of these studies is problematic because of differences in population size and demographics, levels of play, and the definition of reporting of injuries. Studies have indicated that a low volume of training, a low training to match ratio and inadequate warm-up could be risk factors for injuries in football. Results of this research can be used to prevent from further subsequent injuries, considering the strategies available. Consequently, the most important usage of this research is to prevent the occurrence of subsequent injuries by identifying injured athletes and to provide preventive strategies. This can be also used in rehabilitation of impairments and disabilities of injured athletes. Ultimately, the findings will increase the awareness of Players, Coaches and physical educates regarding effects of injuries on their performance.

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