

Little leagues, BIG COSTS

Kids' play, serious pain

Pushed beyond their limits, young athletes face adult-like surgeries and career-ending injuries

By Mike Wagner, Jill Riepenhoff and Todd Jones THE COLUMBUS DISPATCH

The soccer ball slammed into Lucy Gonzalez's head, blurring her vision and fogging her mind so that she could no longer understand what coaches and teammates were saying.

Later that night, she cried uncontrollably and didn't know why. But she told no one immediately, because she wanted to play in the championship club-soccer game the next day.

The Dublin girl and her family soon would learn that she had suffered a concussion.

Then came a second during a tournament in Chicago a couple of months later.

Then another during a tournament in Las Vegas.

Three serious concussions in about 10 months ended Lucy's soccer career forever this past spring.

She is 16.

"When I lost soccer, I lost my friends. I lost what I loved. I lost the life I worked so hard to get," said Gonzalez, a junior at Dublin Jerome High School. "It's been hard dealing with the injuries, but I don't regret pushing myself like I did. As hard as things have been, nothing is worse than knowing I can't play again."

The exploding number of youths playing sports has led to a rapid increase in the number of injuries, afflicting youths ranging from teens ready for college down to those so young they are still learning to read.

When Nationwide Children's Hospital founded its sports-medicine program nine years ago, its clinics received about 1,200 patient visits each year. Now, it receives about 8,000 patient visits each year at its five clinic locations with a staff of about 50.

Ohio State University's sports-medicine program also has seen its patient visits double to about 3,700 patients since 2004 as the number of sports, organizations, teams and tournaments continues grow.

The year-round rigors and routine of youth sports, or just one sport, leads to the overuse of young muscles and ligaments that aren't designed to handle the constant repetition and pounding, doctors say.

Adding to the problem is that kids often conceal injuries, downplay them or refuse to take time to heal just so they can play in the next game or tournament. Sometimes that pressure to play comes from within; sometimes it comes from parents or coaches.

Parents often are confronted with nearly impossible decisions. If they let their sons or daughters play next week, next season or at all, they risk further injury. If they tell them to sit on the sidelines, they face the potential wrath of their kids and are possibly setting back their athletic progress.

Of more than 1,000 area high-school students who responded to a Dispatch survey on youth sports last fall, more than a third said they had suffered an injury while playing youth sports that required treatment by a doctor.

Parents wrongly assume that youth sports have a safety record similar to that of highly regulated school athletics, said R. Dawn Comstock, an epidemiologist at Children's Hospital and a national expert who tracks injuries among high-school athletes across the country.

"Sports in the high-school setting are much safer than sports in the club, all-star or traveling-team area, because

high schools all are playing by the same set of rules,” she said.

In youth sports, one football league might require its players to wear approved safety helmets and another might not. One baseball team might limit the number of pitches a child can throw; another might not.

Last year, Comstock began collecting information about high-school athletes who were injured while playing youth sports. She found that injury rates among girls who played youth basketball or softball were double those of their high-school counterparts; rates were triple among boys who played youth baseball and basketball.

“The biggest cause of injuries is that kids are playing year-round sports. That pace is just too much in many cases,” said Dr. Thomas Pommering, director of Children’s sports-medicine department. “The definition of a break for kids now is a weekend, or maybe a couple weeks in a year. Even if kids took off one season a year from sports, they could reduce their injuries or risk of an injury. They will play at all costs.”

Youths often plead with parents to help them play on a high-school, college or Olympic team. Then some coaches, who want to stock their teams with talent, tell parents how good their son or daughter could be if he or she would play in advanced leagues.

Doctors who deal with youth injuries say some parents lose perspective and are swept up in today’s manic sports culture, but it’s the children’s passion that often drives them to play even when injured.

On the other hand, a few youths are so desperate for a break that they show up at local clinics faking an injury. They are burned out but don’t want to tell coaches or parents they are tired of playing a game.

“We have started to foster a culture where it is total sports immersion for our kids,” said Dr. Kelsey Logan, pediatric sports-medicine specialist at OSU. “His or her identity is this sport. The main motivation for parents is that they want their child to be happy, do well and live out their dreams. It makes it all really hard for everyone.”

Pressure from within

Jarrold Gilliam was doing his best to hide a slight grimace as he thrust his knees into the air and lunged as far as his injured left hamstring would allow.

Mom was watching this test.

So were his athletic trainers at the Children’s sports-medicine clinic. At stake was whether Jarrold would be healthy enough to attend a basketball camp in North Carolina.

Jarrold, 15, of Lewis Center, injured his leg playing lacrosse in the spring and went straight into summer basketball, as well as lifting and conditioning for the upcoming football season.

Korrine Gilliam suggested loudly enough for her son to hear that maybe he should just rest and head to the beach rather than another gym.

“No way, Mom. I am not doing that,” Jarrold said, as he shook his sweaty head and raised his voice slightly. “I am playing.”

The athletic trainers told her that her son’s hamstring wasn’t completely healed, but they cleared him to attend his camp as long as he followed their rehab regimen.

Korrine shrugged and acknowledged that this is a common scene around home.

“See what I mean?” she says. “He just can’t stop.”

Thanks to the rehabilitation program, Jarrold successfully made it through basketball camp.

Whether it’s pulled hamstrings, blown-out knees, damaged shoulders or something more serious, such as concussions, some youths find it impossible to give up their sport for a week — even a day.

Thousands of them fill area rehab clinics year-round in hopes of making it back for their next hockey tournament, soccer game or swimming competition.

Kids recovering from a variety of injuries are typically funneled into what’s called functional rehabilitation. Not

only do they finish rehabbing an injury with exercises, but they simulate the exact motions, movements and situations they endure in their sport. Typically, it's designed to put kids back on the playing field in a matter of a few days to four weeks.

"Kids want to compete, and if they are injured, they want to be better yesterday," said Kerry Waple, senior athletic trainer in Children's sports-medicine department. "We understand the kids have a sense of urgency to get back to playing right away. But it's important that we are on the same page with kids, parents and coaches, and tell them you might miss a whole season, not just a tournament, if we don't do what's necessary."

The desire to resume playing as soon as possible burns just as hot in those who suffer serious injuries and have to rehab for months.

On March 25, two Dublin sisters were both in surgery to repair the same injury. Elise Jones, 15, heard a pop while playing soccer in November and continued to play in the game despite tearing her left anterior cruciate ligament.

Her sister Emily, 16, was playing basketball in January when her right knee twisted then buckled, leaving her crumpled on the gym floor as her parents ran from the stands. She, too, tore an ACL.

Both have played sports since they were young girls and thrive on competition. Both have tirelessly rehabbed since their surgeries. Elise is already back on the soccer field, and Emily is on schedule to return to the court this fall. Their motivation isn't scholarships or pressure from anyone but themselves. They simply love their respective games.

But that doesn't make it any easier on their parents.

"I'm dreading watching them when they come back," said their mom, Gina Jones.

"We love watching them play, but if they never play sports again, that is OK," said their dad, Chris. "As long as they are doing something they love."

The Jones girls are among a growing number of kids who are willing to fight through serious injuries and put pressure on themselves to return to the games they love as soon as possible.

Dr. Logan said that as the pressure to compete increases, so does the emotional and physical toll on young athletes.

"It's difficult, because the focus is, you can't miss practice; you can't miss games; you can't miss the next tournament," Logan said. "The pressure these kids learn to put on themselves, both emotional and psychological, is not good for them."

Too much, too young

Emma Saunders repeatedly flipped herself into the air with front handsprings, one after another, until she heard the snap on one of the landings.

The agony came instantly for the 12-year-old girl, who ran across the room holding her broken arm during what was only the warm-ups for cheerleading tryouts at Orange Middle School in May.

That was Emma's first attempt at cheerleading, but it wasn't her first serious injury.

The longtime gymnast already had suffered stress fractures in both ankles from the constant pounding of competition since she was 7. She also suffered a concussion when she fell on her head during a meet.

Now, her elbow would require surgery and three pins to hold it together.

"I love competing," Emma said. "Getting hurt is part of playing sports."

The earlier children begin their youth-sports careers, the sooner they suffer injuries — sometimes serious injuries that can linger the rest of their lives and threaten their development.

More than a third of the central Ohio students surveyed by The Dispatch last fall about youth sports said they

began playing before age 6.

Medical experts say they now are treating serious injuries in children as young as kindergartners.

“These kids play as much as they can, and there is only so much physical stress their muscle structures can take,” Pommering said. “Kids as young as 6 are being treated like amateur athletes with travel, getting on the best teams, constant practices and the pressure to play as much as they can.”

Competing as much as she can is exactly what Emma wants to do as she enters the seventh grade. She spent much of this summer rehabbing her elbow at Children’s sports-medicine clinic in Westerville.

Her goal was to make it back for another cheerleading tryout and climb back on balance beams for gymnastics meets. With the pins removed and her elbow healed, Emma was recently back at gymnastics practice doing more handsprings.

“How much longer do you let her do this with all these injuries? I don’t know,” said Kim Saunders, Emma’s mother. “You want them to be healthy long term, but you want to help them follow their dreams. Balancing those two things is so tough.”

The toughest call

The cornerback — the smallest player on the Gahanna Cowboys team at 4 feet 8 and 90 pounds — met the oncoming challenge with his head up.

Little No. 47 hit the ballcarrier in the chest, wrapped his arms around him and dropped him like a stone.

“Good job, Taylor!” yelled his mother from the sideline.

Taylor Lampert, 12, made a similar tackle three years earlier in a youth-football game and immediately ran to the sideline with his fingers tingling.

Within two weeks, a neurosurgeon diagnosed him with Chiari Malformation — structural defects in the cerebellum, the part of the brain that controls balance.

Taylor underwent five hours of brain surgery in October 2007 to correct the previously undetected birth defect.

Ten months later, doctors cleared him to return to football.

As the injury risk for youths climbs, so do the nearly impossible decisions for parents who have to weigh their kids’ passion against their long-term health.

Even if their son or daughter is cleared by doctors to play, it’s ultimately the parents’ call on whether children return to the field or court.

If parents refuse to let their kids play after an injury, they face resentment. But if they allow them to return, they risk much more.

More than a quarter of injured athletes responding to the Dispatch survey said their injuries were serious enough that they affected their ability to play sports.

That was the case with Kristin Lanpe, 16, who suffered a second concussion less than four months after being hit in the head by a lacrosse ball earlier this year.

Lanpe battled constant dizzy spells and side effects. On prom night, she could be found sitting in a quiet area because she couldn’t endure the loud music.

“Your first thought as a parent, and it was mine, is this is just not worth it,” said Elizabeth Cooksey, Kristin’s mother. “Protecting their minds and bodies should come before anything, but it’s not always so easy. You have to trust in your doctors, follow their treatment plan and then hope for the best when they start playing again.”

Kristin, who attends Columbus Academy, hopes to continue playing lacrosse next spring.

For Taylor’s parents, the decision to let him begin making tackles again was gut-wrenching. Some thought his

parents were crazy.

“We had a lot of people say that,” Eric Lampert said. “Quite frankly, I’ve had people in my family tell me that. As long as he’s physically fit and medically cleared, we’re fine. If the doctors had come back and said it was a health risk, we weren’t going to let him play.”

A clear-plastic box on a bedroom shelf holds a reminder, one signed by his coaches and teammates.

It is Taylor’s helmet, the one he was wearing the day he made the tackle three years ago and felt his fingers tingle.

Lingering effects

The girl staggered off the soccer field after being head-butted while going for a ball, but she pleaded with her coach to send her back into the game.

“Sit down, and go talk to Lucy,” the coach told her.

Lucy Gonzalez, who was watching some former teammates play, told the girl about the dizzy spells, the crying fits, how she lost 20 pounds and how three concussions recently had ended her soccer career for life. The speech worked, and the injured girl sat down quietly.

It wasn’t just a speech for Lucy — it’s her reality. Nearly every day, she battles some form of depression, memory loss, emotional highs or lows, attention-deficit disorder and the fear of not knowing how long it will take to recover from the concussions. Lucy, a patient of Dr. Logan, now sees a speech therapist to deal with memory loss.

Still vibrant and engaging, Lucy carries a 4.0 grade-point average into her junior year. But her injuries were serious enough that they even forced a change in her class schedule. She can’t take advanced physics or honors calculus. Her head just hurts too much.

“That was the old Lucy,” she told her mom, Beth.

The new Lucy has found a life beyond year-round soccer. There is cross-country running, sailing and even time for concerts. But her newest passion is making sure that other athletes don’t ignore what their minds or bodies are telling them when they get hurt playing sports.

“Soccer did not put me in this situation,” Lucy said. “Thinking I could play no matter how much I hurt is what did.” mwagner@dispatch.com jriepenhoff@dispatch.com tjones@dispatch.com



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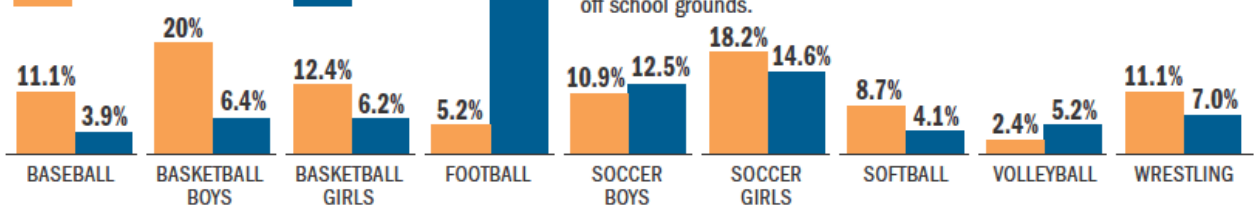
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Tracking injuries

PERCENT INJURED

Outside school

At school



► Researchers at Nationwide Children's Hospital track injuries among athletes at 200 high schools across the country. Last year, they began asking where athletes were hurt: at school or playing on a youth-sports team. In some sports, athletes were more likely to be injured off school grounds.

Source: Center for Injury Research and Policy at Nationwide Children's Hospital

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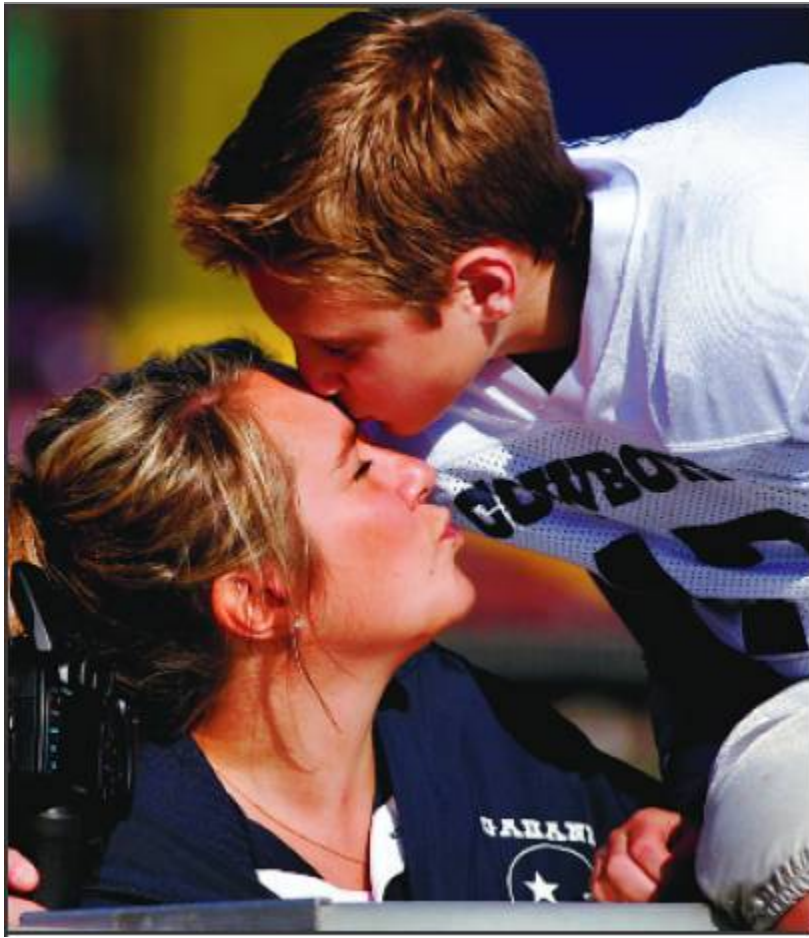


The Dispatch
examines the dangers
in youth sports



FRED SQUILLANTE DISPATCH PHOTOS

Taylor Lampert, No. 47, at far left, returned to his team after a delicate surgery. He stood with the Gahanna Cowboys as his team was introduced at the Gahanna Youth Football League championship game in November. "Football is the best because there's more contact than most sports," Taylor said.



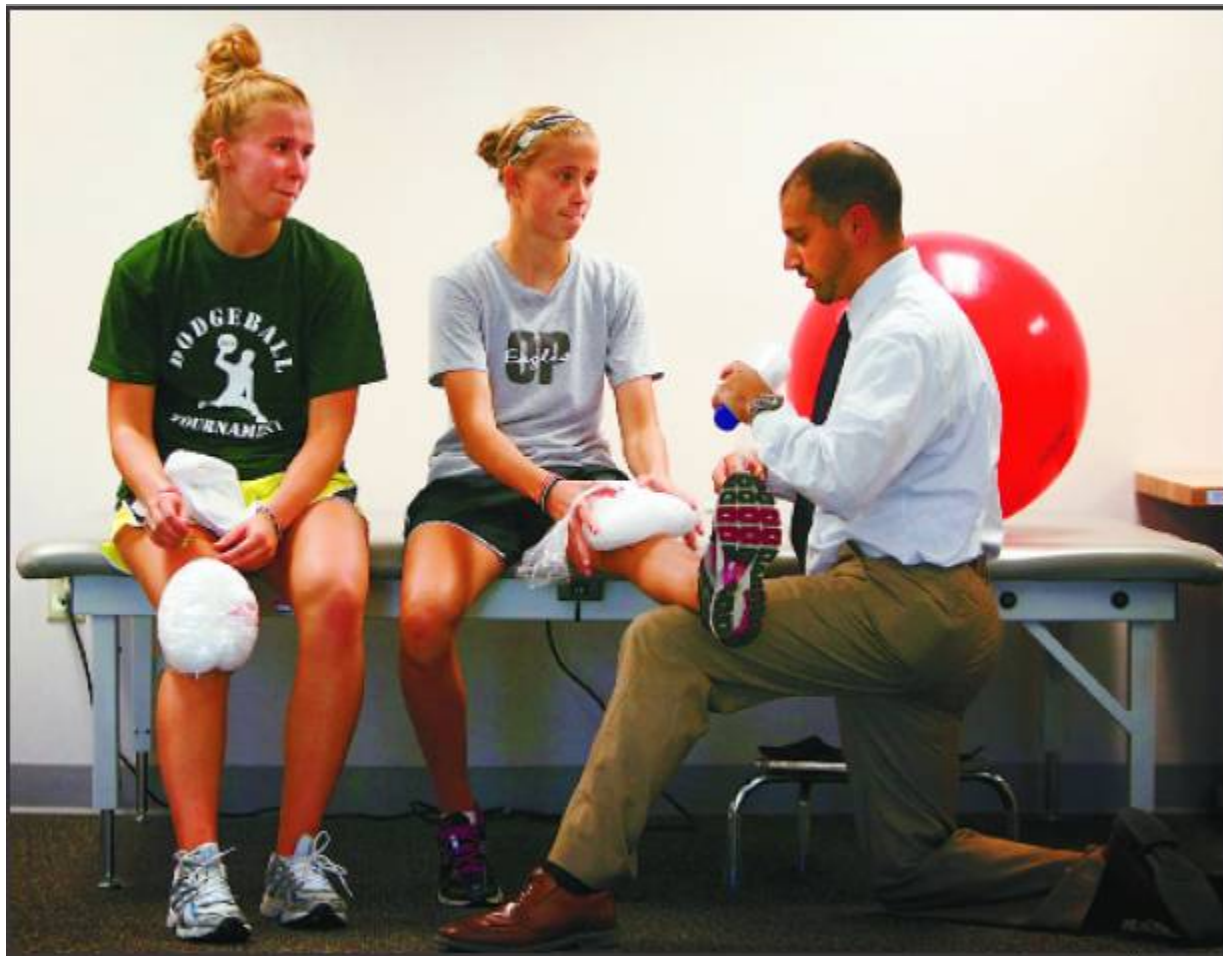
Taylor, 12, gives his mom, Jen, a kiss before a game last fall. Some people think the Lamperts are crazy for letting him play. "When the doctor gave him medical clearance and I saw Taylor out there holding his own, I was at peace," she said.

DISPATCH SURVEY

Injuries take a big toll

A Dispatch survey of 1,000 central Ohio high-school students and 218 coaches found:

- **78 percent** of athletes injured at a youth-sports event needed treatment at a hospital or urgent-care center
- **50 percent** of coaches lost at least one athlete to a youth-sports injury
- **50 percent** of high-schoolers believe supplements boost athletic performance
- **38 percent** of athletes injured at a youth-sports event first were treated by their own parents
- **25 percent** of coaches said supplements help high-school-age athletes perform



JONATHAN QUILTER DISPATCH

Sisters Emily, left, and Elise Jones ice opposite knees after undergoing the same surgery on the same day for the same ACL injury. Emily, 16, who plays basketball, and Elise, 15, who plays soccer, worked with OSU therapist Anthony Ganim in July.



JONATHAN QUILTER DISPATCH

Emma Saunders is back in the gym after recovering from her most recent injury. The 12-year-old has suffered a broken arm, stress fractures in both ankles and a concussion. Injuries, she says, are just part of the sport.