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FACT SHEET

Report Title: **"Collegiate Athletic Injuries – Trends and Prevention"** – A report on the NCAA Injury Surveillance System (ISS).

Background: Since 1982 the National Athletic Trainers' Association (NATA) and National Collegiate Athletic Association (NCAA) have collaborated to create the largest ongoing collegiate sports injury database in the world: the NCAA Injury Surveillance System (ISS).

In a special spring 2007 issue, the *Journal of Athletic Training*, the quarterly scientific publication of NATA, has published the latest findings from 16 years of critical injury surveillance. ISS data is collected by certified athletic trainers and records injuries across 15 major collegiate sports (http://www.nata.org/jat/readers/archives/42.2/i1062-6050-42-2-toc.pdf).

Between 1988-1989 and 2003-2004, participation in collegiate athletics has grown 80 percent among women and 20 percent among men. Nationally more than 380,000 student-athletes participate in NCAA sports that offer national championships.

Mission: To provide credible data to allow the NCAA to make informed health and safety decisions on rules and policy and further injury prevention research to improve athletic programs and the quality of student athlete care.

Authors/ Editors: **Randall (Randy) W. Dick, MS, FACSM,** associate director of research/Injury Surveillance System for the NCAA. Since 1987, he has overseen development and application of the ISS through his liaison role with the NCAA Committee on Competitive Safeguards and Medical Aspects of Sports and various other sports medicine organizations.

Jennifer M. Hootman, PhD, ATC, FACSM, section editor of the *Journal of Athletic Training*, and an epidemiologist for the Division of Adult and Community Health at the Centers for Disease Control and Prevention (CDC).

Christopher D. Ingersoll, PhD, ATC, FACSM, editor-in-chief of the *Journal of Athletic Training*, and Joe H. Gieck Professor of Sports Medicine and director of the Exercise and Sport Injury Laboratory at the University of Virginia.

University Representatives: **Robert L. Howard Jr., MA, ATC,** head athletic trainer, University of Connecticut. He is one of the hundreds of certified athletic trainers who collect the data for the ISS.

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Dennis (Denny) A. Miller, MS, ATC, director of sports medicine, Purdue University, who utilized ISS data in spearheading NATA's Appropriate Medical Coverage for Intercollegiate Athletics recommendations issued in 2000 and recently revised in 2007.

Disclaimer: The recommendations associated with the findings are those of the invited authors and do no necessarily represent the views of the National Athletic Trainers' Association, National Collegiate Athletic Association or the Centers for Disease Control and Prevention.

Key Findings: The study identifies several factors that, if addressed through injury prevention initiatives, may contribute to lower injury rates. Among the key findings across all sports over 16 years (1988-1989 through 2003-2004):

- More than half of all collegiate athletic injuries were to the lower extremities.
- Preseason practice injury rates were two to three times higher than injury rates recorded during the regular seasons.
- Competition injury rates were higher than in practice.
- Rates of concussions and anterior cruciate ligament (ACL) injuries increased significantly, likely due in part to improved reporting and identification of these injuries.

General Findings:

- Competition injury rates did not change substantially over time (though competition rates appear to be declining over the past few years).
- Several sports showed decreased competition injury rates, including women's gymnastics, basketball and field hockey. Spring football and women's basketball practice injury rates also decreased.
- Sports involving collision and contact, such as football and wrestling, had the highest injury rates in both games and practices; whereas men's baseball had the lowest rate of injuries in practice and women's softball the lowest rate in games.
- Sports that inherently limit or prohibit player contact, such as men's and women's soccer and basketball, and women's ice hockey, still have a significant number of injuries caused by contact with players.

Injury Prevention:

Several general and sport-specific areas that can be addressed through injury prevention initiatives, which if broadly implemented can make collegiate sports even safer:

- Prophylactic ankle taping and bracing.
- Balance-training exercise programs.
- Neuromuscular conditioning.
- Data-driven rule and policy changes.

Historic Relevance: Over the years, several changes in collegiate sports policies and rules have been made due to the results of these data, including the following:

- Appropriate response to bleeding in collegiate sports, due to the risk of HIV transmission.
- New rules to reduce incidence of concussion in ice hockey by encouraging reduced hitting from behind and contact to the head.
- Revisions in spring football regarding permissible equipment and contact during practices to reduce injury risk.
- Mandate for protective eyewear for female lacrosse players to reduce risk of eye injuries.
- Modifications in preseason football to reduce heat illness and general injury risk.
- Increased focus on prevention research for female athletes, who are at a greater risk of noncontact anterior cruciate ligament (ACL) injuries in basketball and soccer than men.

Methodology: Results were based on a sampling of NCAA Division I, II and III schools representing approximately 15 percent of schools sponsoring each of the following sports: fall and spring football, men's and women's soccer, women's field hockey, women's volleyball, men's and women's basketball, men's and women's ice hockey, women's gymnastics, men's wrestling, men's baseball, women's softball, and men's and women's lacrosse. Data collection for women's ice hockey began in 2000-2001. In 2004 the ISS converted to a Web-based interface program, which reflects the continued commitment to this project by providing a real-time electronic athletic-training facility record for each institution that simultaneously contributes to the aggregate national database.

Web Sites: For more information, please visit www.nata.org/collegiateinjurystats07 and http://www2.ncaa.org/portal/media_and_events/press_room/.

NATA: Athletic trainers are unique health care providers who specialize in the prevention, assessment, treatment and rehabilitation of injuries and illnesses. The National Athletic Trainers' Association represents and supports 30,000 members of the athletic training profession through education and research. NATA advocates for equal access to athletic trainers for athletes and patients of all ages, and supports H.R. 1846. www.nata.org. NATA, 2952 Stemmons Freeway, Ste. 200, Dallas, TX 75247, 214.637.6282; 214.637.2206 (fax).

NCAA: The NCAA is a membership-led nonprofit association of colleges and universities committed to supporting academic and athletic opportunities for more than 380,000 student-athletes at more than 1,000 member colleges and universities. Each year, more than 49,000 student-athletes compete in NCAA Championships in Division I, II and III sports. For more information, go to www.ncaa.org.

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