

274 **RISK FACTORS ASSOCIATED WITH ANXIETY AND DEPRESSION IN PROFESSIONAL CRICKETERS**

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Background In elite sport, mental health has become a topic of concern as athletes frequently appear to experience symptoms of anxiety/depression. Cricket is particularly demanding, given the globalisation and different formats of the game. To reduce anxiety/depression in professional cricketers, potential risk factors need to be identified.

Objectives Firstly, to determine the prevalence of anxiety/depression in South African professional cricketers. Secondly, determine whether factors such as education, family life, or career-related factors are associated with anxiety/depression.

Design A cross-sectional survey design using the General Health Questionnaire – a robust and reliable self-report measure for risk of anxiety/depression.

Participants All Professional South African Cricketers (n=177).

Assessment of Risk Factors Players' career (e.g. main role in the team, level of cricket), family (e.g. marital status, whether they had children) and education (e.g. highest level of education, whether they were currently studying)

Main Outcome Measurements General Health Questionnaire 12 (GHQ) Score (ranging from 0–12). Anxiety/Depression prevalence (based on GHQ). Relative Risk Ratios (RR) for anxiety/depression based playing career, family and education.

Results The prevalence of anxiety/depression was 58%. The mean GHQ score for the sample was 3.6 (95% CI: 3.2–4.0). The likelihood of developing anxiety/depression increased when players were playing a higher level (RR: 7.3; 95% CI: 2.0–26.3; $p < 0.01$), contracted for more than 2 years (RR: 5.0; 95% CI: 1.2–21.3; $p < 0.05$) or if they played their last offseason overseas (RR: 3.5; 95% CI: 1.3–9.6; $p < 0.05$). The likelihood of developing anxiety/depression decreased when players made productive use of their spare time in the offseason (RR: 0.3; 95% CI: 0.1–0.9; $p < 0.05$) and were contracted for 2 years (RR: 0.3; 95% CI: 0.1–1.0; $p < 0.05$).

Conclusions The prevalence of symptoms of anxiety/depression in this cohort was higher than previously reported for elite athletes. Potential risk factors have been identified that can be used to design and develop strategies to reduce anxiety/depression in professional cricketers.

275 **ABSTRACT WITHDRAWN**

276 **EPIDEMIOLOGY OF HOSPITAL TREATED CRICKET-RELATED HAND INJURIES OVER A 5-YEAR PERIOD IN VICTORIA, AUSTRALIA**

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Background Cricket is one of the most popular sports worldwide. However, the risk of hand injuries is high. For example, batters can be struck, wicketkeepers must catch the fast-moving ball, and fielders might dive to stop the ball. In retired elite cricketers, previous search shows 36% report severe hand injury, and this is associated with pain (20%) and osteoarthritis (2%). Hand osteoarthritis is known to decrease quality of life, and increase morbidity. The majority of cricketers are recreational players. However, the epidemiological data on cricket-related hand injuries are under reported in this population. This data are needed to inform development of evidence-based injury prevention programmes.

Objective Present the first comprehensive epidemiological profile of hospital treated cricket-related hand injuries from 2013–14 to 2017–18 in Victoria, Australia.

Design Retrospective analysis of routinely collected hospital presentation data (detailed case-series).

Setting De-identified hospital-treatment data from two hospital databases: Victorian Emergency Minimum Dataset (ED-presentations) and Victorian Admitted Episodes Dataset (hospital-admissions), were obtained from the Victorian Injury Surveillance Unit.

Participants Male and female cricketers.

Main Outcome Measurements Incidence and description of ED-presentations and hospital-admissions.

Results 2,415 cases (1,960 ED-presentations) were treated in Victorian hospitals. 96% of cases were male. All (n=455) hospital-admissions were for one day. Most frequent ED-presentations were in the -15–19 year age group, whilst the 25–29 year ago group reported most frequent hospital-admissions. Fractures (48% ED-presentations versus 73% hospital-admissions) were the commonest injury type. Thumb injuries (17%) were most frequently treated in EDs. The most common injury mechanism was being hit/stuck/crushed (84% ED-presentations versus 79% hospital admissions).

Conclusions Cricket-related hand injuries are more frequent in younger players. Fractures are the most common type of injury, accounting for half of all ED-presentations. Fractures are also the most severe injury, accounting for 3 out of 4 hospital admissions. Hand injury prevention strategies need to be prioritised in recreational cricketers.

277 **IMPACT OF SPECIFIC PREVENTION TRAINING MEASURED BY THE STAR EXCURSION BALANCE TEST MODIFIED (SEBTM) IN YOUNG FEMALE SOCCER: A CLUSTER RANDOMISED CONTROLLED TRIAL**

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