to evaluate accelerations and angles during COD movement, but so far there are no clear recommendations on specific metrics to be used.

Objective To evaluate the reliability and validity of inertial measurement unit (IMU) sensors to detect COD movement and aspects related to COD movement. To summarize the available evidence on how wearable IMUs are used to analyze COD movement in sports and exercise.

Design Scoping review. A systematic search was employed in MEDLINE (Ovid), CINAHL (EBSCO host), SPORTDiscus (EBSCO host), EMBASE and Cochrane Database of Systematic Reviews. A grey literature search was employed to locate non-peer reviewed studies. The risk of bias of the studies evaluating validity and/or reliability was evaluated using the AXIS tool.

Setting Sport and exercise.

Participants Studies on sports related COD movements measured with IMUs.

Main Outcome Measurements Methodological quality of included studies on validity and reliability.

Results After screening 11,376 articles 47 studies remained, with eleven studies evaluating validity and/or reliability. Most of the studies were conducted with preplanned movements in the laboratory setting and participants were usually adult males. Varying sensor locations limits the ability to generalize these findings.

Conclusions There are promising results on validity and reliability of analysis of COD movement with IMUs, but the number of studies is small and the quality of the studies is limited. Studies using IMUs to evaluate COD movement can be improved with larger sample sizes and agreement on the metrics used and sensor placement. Future research should include on-field studies, where movements are unplanned and factors like speed and how opponent players affect the movements are included in analyses.

114

THE INFLUENCE OF TRAINING VOLUME ON TRAINING AND MATCH INJURY RISK IN ELITE SCOTTISH RUGBY UNION PLAYERS

¹Cameron Paul, ¹Tom Campbell, ²Stuart Yule, ²Jack Walsh, ¹Russell Martindale, ^{1,3}Debbie Palmer. ¹School of Applied Sciences, Edinburgh Napier University, Edinburgh, UK; ²Scottish Rugby Union, Murrayfield, Edinburgh, UK; ³Institute for Sport, PE and Health Sciences, Moray House School of Education and Sport, University of Edinburgh, Edinburgh, UK

10.1136/bjsports-2021-IOC.107

Background Training volume has been shown to influence injury risk in elite Rugby Union players.

Objective To investigate the influence of training volume on injury risk in elite Scottish Rugby Union players.

Design A prospective, observational cohort study design was adopted to collect training volume (hours) and injury data (training and match time-loss injuries combined).

Setting Data were collected from Scottish Rugby Union's professional (Men's 15-a-side) teams (Men's International Squad; Glasgow Warriors and Edinburgh Rugby).

Patients (or Participants) Data were collected from 163 professional Rugby Union players over the 2017/18 and 2018/19 seasons.

Interventions (or Assessment of Risk Factors) Gym & pitch-based training data were collected via team logs & Global

Positioning System devices. Injury data were collected from the medical personnel associated with each team.

Main Outcome Measurements Derived workload measures were calculated. These included: the exponentially-weighted moving average acute: chronic workload ratio (ACWR); week-to-week change in volume, and 1- 2-, 3- and 4-week cumulative volumes. Workload measures were modelled against subsequent week injury using binary logistic regression analysis. Odds ratios (OR) were reported against a reference ('Very-low' workload) group.

Results Players spent a total of 58,044 hours training, and sustained 734 time-loss injuries. Compared to the reference category (<0.50), an 'Intermediate-low' ACWR (0.75–1.00) had the lowest injury risk (OR=0.46). Contrary, an 'Intermediate-high' (1.00–1.25), 'High' (1.25–1.50) and 'Very-high' (>1.50) ACWR significantly increased injury risk (OR=4.85, 13.36 and 15.70, $p<0.001$, respectively). Injury risk was significantly increased for 'Intermediate-low' training volumes over 1–3 week cumulative periods, and 'Intermediate-high' volumes over 2–4 week cumulative periods. 'Very-high' volumes increased injury risk over 1–3 week cumulative periods. 'High' training volumes over 1–4 weeks and weekly change in volume were not associated with injury ($p>0.05$).

Conclusions Increases in acute training volume beyond a player's current chronic status may increase injury risk. Minimising spikes in volume, whilst gradually acquiring high training volumes may be more protective against injury than intermediate and very high volumes.

115

RELATIONSHIP BETWEEN READINESS INDICATORS, TRAINING LOAD AND FATIGUE IN COLLEGIATE FEMALE VOLLEYBALL ATHLETES

^{1,2}Javier Peña, ³Laurie Eisler, ³Carolyn O'Dwyer, ^{1,2}Albert Altarriba-Bartés, ^{1,2}Beatriz Gil, ^{1,2}Clàudia Alba, ³Pierre Baudin. ¹Sport and Physical Activity Studies Centre, University of Vic – Central University of Catalonia, Vic, Spain; ²Sport Performance Analysis Research Group, University of Vic – Central University of Catalonia, Vic, Spain; ³Faculty of Kinesiology, Sport, and Recreation, University of Alberta, Edmonton, Canada

10.1136/bjsports-2021-IOC.108

Background Proper load monitoring can help to determine if athletes are adjusting properly to training loads, minimizing the risk of developing illnesses and injuries.

Objective The main objective of this study was to find relationships between internal and external load variables, and fatigue to enable a better understanding of specific adaptations.

Design An 8-week prospective observational cohort study with 213 observations.

Setting U Sports Canadian volleyball athletes.

Patients (or Participants) Six female volleyball athletes (21±2 years, 179.8±6.1 cm, 72±9.5 kg) with competitive experience of at least three years and able to participate without any physical limitation.

Interventions (or Assessment of Risk Factors) Pre-practice heart rate variability (HRV), energy level, level of soreness, and hours of sleep were recorded before every practice. The number of jumps, the activity minutes, post-practice rating of perceived exertion (RPE), and HRV value the morning after were also collected. Day of the week, previous strength and conditioning practice, quality of sleep, and medical/physio attention were additional factors included in the analyses.