Objective To assess the current state of knowledge and practice regarding SRC (diagnosis, treatment, return to play) within the French-speaking sports community in order to tailor the prevention approaches.

Design Multicentric cross sectional survey.

Setting An online survey (~ 15 minutes completion time) was sent through mailing lists and social networks. The survey was available for three months and monthly reminders were sent.

Patients (or Participants) Athletes, sports healthcare professionals, and coaches through the ReFORM network

Interventions (or Assessment of Risk Factors) N/A

Main Outcome Measurements Reported level of knowledge regarding SRC and access to educational resources.

Results 2072 participants took part in the survey and 1704 finished it (completion rate: 82%). The sample included 48% of athletes, 33% of coaches and 19% of healthcare professionals. The main countries represented were France (35%), Canada (32%) and Belgium (12%). The preliminary analyses reported a SRC knowledge self-assessment as ‘good’ or ‘excellent’ in 87% of healthcare professionals and 69% of coaches; while more than 40% of athletes rated their knowledge as ‘poor’ or ‘none’. Only 17% of athletes reported knowing about a SRC education programme in their setting against 63% for healthcare professionals and 45% for coaches. Regarding coaches, 54% do not feel having sufficient professional resources to correctly manage a SRC over the return to sports continuum.

Conclusions There seems to be a great interest from field stakeholders reflected by the completion rate. These preliminary results show a discrepancy in the level of SRC knowledge and the access to educational resources between athletes, coaches and healthcare professionals.
Results Eight teams [n=118 players; 83 males, 35 females] consented to participate. All control teams and 3/4 of the intervention teams completed all 6 sessions [median 85 days (range 42–102)]. No adverse events were reported. There were 6 concussions in the intervention group (n=65) and 4 in the control group (n=53). Exploratory univariate Poisson regression analysis adjusted for cluster by team revealed no difference in concussion risk between groups [incidence rate ratio (IRR)=0.99 concussions/100 players/season (95%CI; 0.28–3.48)]. For males alone, there was also no difference in IRR [IRRmales=0.37 (95%CI; 0.068–1.94)]. Both female teams were allocated to the intervention group.

Conclusions The implementation of a neuromuscular and sensorimotor training program with youth ice hockey teams was feasible and safe. Future evaluation in a larger sample over a longer training period to examine the effects of neuromuscular and sensorimotor training strategies on the risk of concussion in youth ice hockey players, including consideration of sex and age group is warranted.

THE EFFECT OF THE FÉDÉRATION INTERNATIONALE DE FOOTBALL ASSOCIATION (FIFA) 11+ KIDS INJURY PREVENTION PROGRAM ON REDUCING INJURY RATES IN CHILDREN’S SOCCER: A CLUSTER-RANDOMIZED CONTROLLED TRIAL

Background The Fédération Internationale de Football Association (FIFA) 11+ Kids injury prevention program is an exercise-based program developed by an international group of experts to prevent injuries among children’s soccer players.

Objective The objective of this study is to evaluate the effect of the FIFA 11+ Kids injury prevention program on reducing the incidence of injuries among children soccer players aged 7–13 years.

Design A cluster-randomized controlled trial.

Setting Children’s soccer.

Patients (or Participants) Ninety-four boys’ soccer teams (780) players (under 8 years, under 9 years, under 11 years, and under 13 years age groups) were randomly allocated into the experimental or a control group.

Interventions (or Assessment of Risk Factors) The experimental group performed the FIFA 11+ Kids injury prevention program as warm-up during training sessions for at least twice a week, and the control group performed their usual warm-ups. Participants were prospectively followed during one season.

Main Outcome Measurements The primary outcome was to investigate the incidence of initial, recurrent injury, mechanism of injury and injury severity.

Results A total of 43 injuries were reported among 391 players in the experimental group in 8353.33 hours of exposure (0.85 injuries/1000 exposure hours), and a total of 86 injuries were reported among 389 players in the control group in 7102.67 hours of exposure (2.01 injuries/1000 exposure hours). The injury risk ratio IRR was 0.43, which suggests that the injuries in the experimental group were 57% less in comparison to the control group.

Conclusions Implementation of the FIFA 11+ Kids injury prevention program reduced overall injury rates in boys’ soccer players more than the usual warm-up.