**Background** Dutch handball has gained popularity since recent international successes. Downside is the risk of injuries.

**Objective** To gather information on the prevalence and distribution of injuries in Dutch handball for the development and implementation of targeted preventive measures.

**Design** Repeated cross-sectional design.

**Setting** Adolescent and adult handball players active in Dutch leagues of any playing level were invited through social media, club mailings and the website of the Dutch Handball Federation to participate in a monthly online survey.

**Participants** Handball players (16 years or older) were included. In total 1136 respondents (80% female) filled in 4171 monthly questionnaires from September 2018 to June 2019.

**Risk Factors** Outcomes were categorized by sex and playing position.

**Main Outcome Measurements** New injuries (injury incidence) and number of injured players divided by the total number of respondents (prevalence) per body location. Injury definition: the inability to fully participate in handball training and/or matches over the last month due to a problem sustained during handball. The Oslo Sports Trauma Research Centre Questionnaire (OSTRCQ) was used to quantify injury severity.

**Results** Of 657 new injuries, the knee (21%), ankle (17%) and shoulder (10%) contributed similarly in both sexes and the lower leg predominantly in female players (10%). Overall injury prevalence was 43% (female 46%, male 34%). Most prevalent body locations and their mean (standard deviation (sd)) OSTRCQ-scores were the knee (8.8%; OSTRCQ 61, sd 26), shoulder (4.4%; OSTRCQ 50, sd 22), ankle (4.0%; OSTRCQ 55, sd 27) and the lower leg (3.1%; OSTRCQ 56, sd 26). For all playing positions the knee showed the highest prevalence followed by the shoulder (wings and backs) and/or ankle (backs, pivots and goalies).

**Conclusions** The high prevalence of knee, ankle and shoulder injuries in both sexes in Dutch handball emphasizes the need for implementation of preventive measures. Preventive training programs already proven successful in handball populations from other countries can be implemented in Dutch handball as well.

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**Background** The implementation of injury prevention interventions commonly do not consider the context where injury occurs.

**Objective** To describe the socioecological context to guide the development and implementation of injury prevention interventions in youth Brazilian basketball (YBB).

**Design** Cross-sectional study.

**Setting** YBB teams affiliated to the Basketball Federation of the State of São Paulo. Participants recruitment and data collection occurred during the regular season, between March and September 2018.

**Patients (or Participants)** 534 athletes and 54 staff members of 35 YBB teams were included in the study. Eligibility criteria included (1) staff members who have graduated in a health care profession and (2) youth athletes with age between 10 and 19 years old.

**Interventions (or Assessment of Risk Factors)** Participants responded a survey on a regular day of practice or official match.

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**Description of the Context for Injury Prevention Interventions Development and Implementation in Youth Brazilian Basketball: A Cross-Sectional Study**

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