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For Immediate Release

**PROTECTING YOUNG GOLFERS FROM SHOULDER INJURIES ON THE LINKS**  
*Sports orthopaedist Dr. Kevin Plancher's prevention strategies*

**New York, NY and Greenwich, CT, July 2009** – Young golfers are on the links this summer, clubs in hand, in the hopes of becoming the next Tiger Woods. According to the National Golf Foundation, in 2007, the most recent year for which there are statistics, there were 29.5 million golfers in the United States ages 6 and above. Of those, the number of junior golfers increased by more than 12 times, from 2.1 million in 1986 to 26.7 million in 2002, a number which continues to grow.

With all of these young players on America's golf courses comes a growth in the number of injuries. According to the American Academy of Pediatrics, sports injuries are on the rise among U.S. children and teens. Each year more than 3.5 million sports-related injuries requiring medical treatment occur in children under age 15. Of those, golfers report injuries including shoulder pain, rotator cuff damage and growth plate injury, particularly to the lead shoulder (the left shoulder in a right handed player). These injuries typically are caused by overuse or poor swing mechanics.

According to Kevin Plancher, M.D., a leading NY-area orthopaedist and founder of the Orthopedic Foundation for Active Lifestyles ([www.ofals.org](http://www.ofals.org)) – a non-profit organization dedicated to advancements in research and education for orthopedics and sports medicine, “many kids don't realize that the same injuries that afflict their parents or grandparents on the golf course can also impact their ability to enjoy the sport.” Dr. Plancher adds that it is key for golfers of all ages to recognize the difference between a muscle sprain or strain and a tear so that they can get the appropriate treatment.

**Shouldering the burden of fitness**

The shoulder is the most flexible joint in the body, with the potential for approximately 1,000 different positions in its range of motion. It is also one of the most heavily relied upon joints, particularly in sports like golf. “While golf can certainly be a great activity for kids, it is also a sport that places heavy demands on all of the joints in the body – but particularly on the rotator cuff of the shoulder joint,” Dr. Plancher notes. The rotator cuff is a network of muscles and tendons that holds together the shoulder and arm bones, facilitating the majority of the shoulder's movements.

Injuries to the rotator cuff can be sustained through trauma – a single event, like a poorly executed power swing, overuse, or hitting a divot or from the cumulative effect of many weeks, months and years

on the links. According to the American Academy of Orthopaedic Surgeons (AAOS), more than 4 million Americans each year seek treatment for a rotator cuff injury, and nearly 40,000 are severe enough to require surgical repair. Unfortunately many patients wait too long to repair a rotator cuff tear, not realizing that repair and rehabilitation is significantly faster if it is treated early. However, in many instances, Dr. Plancher assures that these types of injuries can be minimized or avoided altogether with preventive strategies.

### **The Three “R”s: Ready, Recognize and Rest**

Dr. Plancher believes that many sports-related injuries in general, and many golf-related rotator cuff injuries in particular, can be prevented or minimized using the technique of “ready, recognize and rest.” He urges parents to recognize that the three Rs apply to their children as well. He explains, “When sports enthusiasts prepare their bodies for play, they should recognize an injury when it occurs, and when they provide their bodies with time to rest and heal after an injury, they will find they could spend much more time playing their sport and less time on the sidelines.”

- 1. Getting Ready** – To prepare the shoulders and strengthen the rotator cuff muscles for golfing, Dr. Plancher suggests weight training exercises, each performed with relatively light weight and more repetitions, since the rotator cuff muscles can be injured simply by trying to lift too much weight. Dr. Plancher recommends simple routines, such as the forward dumbbell raise or the lateral fly, and advises patients against military presses (he suggests substituting an incline press) to avoid an awkward, injury-prone position. Warming up the entire body with easy aerobics like walking, jogging or biking prior to golfing may also lessen the chance of muscle injury.
- 2. Recognizing Injury** – While it is tempting to play through an injury, Dr. Plancher cautions that most joint injuries only worsen with continued stress. “It is difficult to call it quits, but players may find that a few extra hours on the course to finish out a game after a rotator cuff injury could cost them a few extra days, weeks or months of rest and rehabilitation later,” he adds. Even more importantly, players need to recognize the difference between an overuse injury, which tends to be less severe and will respond to self-treatment, and a traumatic injury, which should be evaluated by an orthopaedist immediately.

“It is key for golfers of all ages to recognize the difference between a muscle sprain, or tear, and a sprained muscle,” Dr. Plancher says. “While both types of injuries may cause pain, redness or swelling, a muscle tear is a serious injury that can only be diagnosed accurately through an ultrasound. A torn muscle will not heal on its own with rest, but requires a physician’s intervention.” In general, Dr. Plancher says, golfers should assume that if they have a significant muscle injury that

doesn't start to get better within 24 hours, if they hear a popping sound with the injury, or if they cannot use the arm or have significant pain, swelling or fever, they should call their doctor.

- 3. Resting the Shoulder** – A vast majority of rotator cuff injuries will resolve themselves within 3-4 weeks if they are given the RICE treatment – Rest, Ice, Compression and Elevation. “Resting the joint immediately and coaxing it back into service with gentle stretches and strengthening exercises as it heals will help golfers get back into the swing of things much more quickly than if they rush the rehabilitation,” Dr. Plancher notes. What's more, an incompletely healed joint is far more likely to be reinjured.

For the small percentage of severe rotator cuff injuries that will not heal using rest and physical therapy, Dr. Plancher notes that advances in arthroscopic surgical repair have provided an alternative for young athletes. “Today's fully arthroscopic knotless rotator cuff repair allows for the entire procedure to be done with precision through buttonhole-sized incisions,” Dr. Plancher explains. “The fully arthroscopic technique presents less risk of injury to surrounding muscle and tissue, promotes faster healing and rehabilitation, and is as effective as open repair at relieving pain and restoring range of motion,” he adds.

“All young athletes who think they have dislocated their shoulder should see an orthopedic surgeon soon after the injury to discuss treatment options,” Dr. Plancher says.

**About Dr. Plancher:**

*Kevin D. Plancher, M.D., M.S., F.A.C.S., F.A.A.O.S., is one of the nation's leading orthopaedic surgeons and sports medicine experts, specializing in the treatment of knee, shoulder, elbow and hand injuries. He is Associate Clinical Professor in Orthopaedics at Albert Einstein College of Medicine in New York City and on the editorial review board of the Journal of the American Academy of Orthopaedic Surgeons. In 2007, 2008 and 2009, Castle Connolly Medical Ltd., a New York City research company, named Dr. Plancher America's Top Doctor in Sports Medicine. Every year from 2001 to 2009 he has been included in Castle Connolly's list of Top Doctors in the New York Metro area, as published in New York Magazine's yearly "Best Doctors" issue.*

*Dr. Plancher received his M.D. degree (cum laude) and an M.S. degree in physiology from Georgetown University in Washington, DC. He completed his residency at Harvard University's orthopaedic program and a fellowship at the Steadman-Hawkins Clinic in Vail, Colo., where he studied shoulder and knee reconstruction and served as consultant to the clinic for six years. He has been team physician for more than 15 high school, college and national championship teams. He is currently the team physician for the professional lacrosse team, the Long Island Lizards.*

*An attending physician at Beth Israel Hospital in New York City and Stamford Hospital in Stamford, CT, he maintains offices in Manhattan and Greenwich, CT. Visit [www.plancherortho.com](http://www.plancherortho.com) for more information. Dr. Plancher lectures extensively in the U.S. and abroad on issues related to orthopaedic procedures and injury management. He also has been named to the sports medicine arthroscopy program subcommittee for the American Academy of Orthopaedic Surgeons. Since 200X, Dr. Plancher has been awarded the Order of Merit (magna cum laude) for distinguished philanthropy in the advancement of*

*orthopaedic surgery by the Orthopaedic Research and Education Foundation. In 2001, he founded The Orthopaedic Foundation for Active Lifestyles, a not-for-profit foundation focused on maintaining and enhancing the physical well-being of active individuals through the development and promotion of research and supporting technologies. See [www.ofals.org](http://www.ofals.org) for more information.*