

SAVING “GOD”

Doctors can make or break a star player's career. Dr Michael Soon, orthopaedic surgeon in Mount Elizabeth Novena Hospital, discusses the twists and turns of soccer injuries.



“FOWLER FALLS.”

Gasps of disappointment filled the stadium. On 23 February 1998, fans watched the young and seemingly untouchable Robbie Fowler stretchered off the pitch in excruciating agony, never to return en forme...

Fowler, affectionately known as “God” to his fans, started the highly-anticipated 1997-98 season, missing the first seven games with strained knee ligaments. The challenge against Everton on that fateful day marked the worst time for Fowler – he tore a cartilage, a knee ligament and ruptured a cruciate ligament (ACL tear).

His dream of playing in the World Cup was dashed.

More trouble loomed large. Fowler sustained an ankle injury, thereby missing nearly all of the 1999-00 season. The new Liverpool manager decided to replace him with Leicester's star striker, Emile Heskey, for a club record fee.

Injuries in football are common and are more frequent with increasing age. Sometimes they ruin players' career. Most of the time, these injuries involve the knee and ankle, and the two worth mentioning are the ligament injuries of the joints and muscle and tendon tears.

TEARS OF MUSCLES AND TENDONS

While muscle and tendon tears may be caused by the players' muscles crushed against an opponent's studs, shin guard, knee or elbow, the more common causes are due to sudden movement like:

- breaking out into a full sprint,
- stopping and cutting past an opponent,
- landing from a jump, or even,
- kicking a ball.

The amount of momentum that the muscle has to overcome can lead to excessive forces imparted to the tissues, which can give way. The results are partial or full tears of muscles in the lower legs, like quadriceps tears, hamstring tear, or groin strain.

Pre-game and daily stretching of tight tendons prevents such injuries.

MANAGING TEARS

Once a tear occurs, the main solution is rest.

Most acute tears would take 6 weeks to recover, and this period includes avoidance of sports and gradual stretching and strengthening to return to sports. Returning too quickly to football would usually just lead to a recurrence and aggravation of the initial injury.

In the professional circles, PRP (platelet-rich plasma or Growth-Factor Injection) is often used for such injuries to accelerate healing, allowing a return to sports in about half the duration. This is of financial importance to clubs, as some players can be paid up to 20-40,000 euros a week or more.

LIGAMENT INJURIES OF THE JOINTS

Ligament injuries of the joints are also common in football.

When I was attached to the football clinic (Mutualidad de Futbolista) in Barcelona, I was involved in the care of many such injuries, both recreational and professional players which included the top football players of FC Barcelona and Europe. The ACL or anterior cruciate ligament, is an important ligament of the knee, which is responsible for the stability of the knee joint. Once torn, as in Fowler's case, it almost always requires surgery.

However, not many patients are able to return to the pre-injury level of sports participation, with approximately two out of three being able to do so. During my sabbatical in Barcelona, I had the opportunity to treat La Liga's football players. A notable example of a patient who managed to return to pre-injury level would be a player from FC Barcelona and Spain.

At Mount Elizabeth Novena Hospital, we adopt a multi-pronged approach with the involvement of a team of highly committed professionals, to help sportsmen on their road to recovery and their road to GLORY.

Managing Tears With RICE:

Rest,
Ice,
Compression
Elevation.

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