

Hockey and Health

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This is a sport practiced for over 2000 years, proven through cave paintings and engravings on stones in various civilizations. In the nineteenth century, the sport was regulated in Great Britain where tournaments and clubs were organized that became the first hockey organizations. And in 1908 hockey was included in the Olympic Games.

Hockey is described as a contact sport between two groups of athletes who play to score in their opponent's goal, driven only by a stick that is curved at the lower end. Among the sport's many qualities we emphasize that it is extremely inclusive and socializing. In general, it is practiced primarily in institutions such as clubs or schools.

Hockey promotes a strong sense of **personal formation and equality among peers**. Those who practice it develop a strong group work ethic when executing tasks and this ability transcends the boundaries of sport.

Currently, the sport is practiced mostly in an amateur level and also at high performance level for regional or national teams. Having in mind this last point we must recognize what forms true elite athletes, and they must be devoted almost exclusively to the sport if they intend to be in high level international competitions.

And obviously as any contact sport and team sport, it is clear that hockey is highly **beneficial to health, education and personal development**. But there are also risks, even if at minimum levels.

Relatively, this sport has a **low rate of injuries** in competitions. Which means that if we take into account the number of games played and the number of players involved, we may state that this sport has one of the lowest rates of injuries over all other sports.

Listing by the order of occurrence, the most common injuries occur in the fingers and hand, caused by the contact of the stick or the ball.

With the use of synthetic surfaces, some other pathologies have also emerged (which were minimum before) such as muscle strains, tendinitis, enthesitis (groin injury), and other muscular dysfunctions. Meniscal lesions of the knee and sometimes ligament ruptures have also appeared.

Thus, there must be a higher fitness preparation, to prevent injuries from such a fast and demanding surface as the synthetic grass. We should also mention that as in all contact and action sports accidents happen, occurring in specific isolated cases. The most common ones are due to a hit from the stick and are always caused by a mistake in individual technique.

With respect to the ball, technically it should not be played above the knee level, but in certain plays shots may be high and very rarely, these plays make impact with vulnerable areas of our body.

Some of the low frequency injuries that occur due to direct trauma are: head trauma, facial trauma with nasal, malar, mandibular or dental commitment (the last, less common).

We believe that prevention is the best method of injury treatment, so the use of shinguards is mandatory, and the mouthguard as well. At international competitions, the sticks and equipment are measured, so there are no disadvantages or potential dangers.

Despite the very low incidence of these injuries, internationally through the FIH the evolution of the game is analyzed through its medical and rules committees, adapting and modifying rules to achieve a safer game that is fair and competitive for athletes. It is very important for federations to promote this sport in a healthy manner, so we can say that today it is a **Doping Free** sport.

But we are mindfully following very closely all aspects related to physical safety, modifying or proposing modifications to all aspects of the game in order to guarantee the best possible prevention for hockey players.

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