

GA Elite Baseball Player Health

Player Health

In an effort to keep parents informed regarding ways to improve the longevity and enjoyment of the baseball experience we will use this section to post relevant player health related articles, links, and useful information.

This does not replace or promote any specific doctor advice. Information provided is intended to increase awareness on specific topics. Please consult your physician with any medial related concerns.

Little League Elbow Syndrome

Little league elbow syndrome (LLES) has risen in incidence in recent decades. It is manifested by pain on the medial aspect of the throwing elbow. Young athletes with the condition may also notice decrease throwing distance and velocity as early signs of an injury. Several different anatomic conditions exist which may represent the little league elbow including tendinitis, medial collateral ligaments strain/injuries, and up to fractures at the medial epicondyle. Though classically thought of as a pitcher's condition, catchers, outfielders, and infielders can also develop these injuries

Factors contributing to the increase frequency of these injuries include: increased single-sport participation with year-round training, higher intensities at young ages, and longer competitive seasons. Once a LLES is suspected, the athlete should immediately discontinue playing and seek medical evaluation. Many doctors including pediatricians and family doctors are excellent first line providers to seek care from. Affected youth will usually have physical examination and radiographic exams.

The therapy initiated depends on the specific type of injury and its severity as well as of course the experience of the clinical provider. The initial treatment phase usually begins with immobilization, and ice and anti-inflammatory regimens may be added by your doctor. On occasion, if the injury is a fracture the treatment may range from casting to surgical repair.

The exact duration of limited play for less complex injury is difficult to predict and once again depends on your doctor's recommendations. Your physician will usually want to see a combination of abatement of pain and symptoms and possibly radiographic testing to show healed conditions. Various physical therapy protocols are available once the injury is healed to strengthen and condition the young athlete. The ultimate goals of treatment are to safely return the athlete to a preinjury level of function. Two links are provided below. The first is to an excellent overview of the LLES on emedicine.medscape.com and the second link is to USA Baseball pitcher's recommendations.

http://emedicine.medscape.com/article/97101-overview

http://mlb.mlb.com/usa_baseball/article.jsp?story=medsafety11