# **Water Polo**

ater polo is an intense sport that requires athletes to tread water and swim for long periods. There is a version for younger athletes that allows them to stand in shallow water or hang onto the side of the pool, but this is illegal in competitive water polo.

Acute and overuse injuries are common in water polo. *Acute injuries* usually occur when guarding a player or wrestling for the ball. *Overuse injuries* are often the result of repeated swimming and throwing motions and treading water. As in many sports, the risk of injury increases with age due to the style of play, contact forces, and size of athletes. However, the risk of injuries can be reduced.

The following is information from the American Academy of Pediatrics (AAP) about how to prevent water polo injuries. Also included is an overview of common injuries.

#### Injury prevention and safety tips

- Sports physical exam. Athletes should have a preparticipation physical evaluation (PPE) to make sure they are ready to safely begin the sport. The best time for a PPE is about 4 to 6 weeks before the beginning of the season. Athletes also should see their doctors for routine well-child checkups.
- Fitness. Athletes should maintain a good fitness level during the season and off-season. Preseason training should allow time for general conditioning and sport-specific conditioning. Athletes with poor stamina are more likely to get hurt both in and out of the water. Also important are proper warm-up and cool-down exercises.
- Technique. Athletes should learn and practice safe techniques for performing the skills that are integral to their sport. Athletes should be confident in their ability to swim in close spaces with others. If not, they should begin playing in the shallow end in case they need to stand. Athletes should work with coaches and athletic trainers on achieving proper technique.
- **Equipment.** Safety gear should fit properly and be well maintained.
  - Polo caps with ear guards to reduce the risk of ear injury
  - Mouth guards
  - Swim goggles
  - Sunscreen protection (sunscreen, lip balm with sunblock) when swimming outdoors

- Environment. Pool water should be checked by persons in charge of pool maintenance. Excess chemicals and chlorine may cause eye irritation and skin rashes. Hypothermia may occur when playing in cold water.
- Rules. Water polo can be very rough. Much of the "contact" takes place underwater, where referees cannot see well. These fouls are often missed and can lead to injury. Parents and coaches should encourage good sportsmanship and fair play. For instance, athletes should never dunk an opponent under the water.
- Emergency plan. Teams should develop and practice an emergency plan so that team members know their roles in emergency situations in or out of the water. The plan would include first aid and emergency contact information. All members of the team should receive a written copy each season. Parents also should be familiar with the plan and review it with their children.

### **Common injuries**

## Eye injuries

Eye injuries commonly occur in sports that involve balls but can also result from a finger in the eye. Any injury that affects vision or is associated with swelling or blood inside the eye should be evaluated by an ophthalmologist. Water polo players should wear swim goggles during practice and competition. The AAP recommends that children involved in organized sports wear appropriate protective eyewear.

#### **Head injuries**

Concussions often occur when an athlete gets hit in the head by another athlete (usually from their elbow). A concussion is any injury to the brain that disrupts normal brain function on a temporary or permanent basis.

The signs and symptoms of a concussion range from subtle to obvious and usually happen right after the injury but may take hours to days to show up. Athletes who have had concussions may report feeling normal before their brain has fully recovered. With most concussions, the player is not knocked out or unconscious.

Prematurely returning to play after a concussion can lead to another concussion or even death. An athlete with a history of concussion is more susceptible to another injury than an athlete with no history of concussion.

All concussions are serious, and all athletes with suspected concussions should not return to play until they see a doctor.

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#### **Shoulder injuries**

Shoulder injuries usually occur from repetitive throwing and swimming motions. This may be due to weak muscles in the back and trunk of the body. Usually rehabilitation exercises focused on good posture and muscles of the shoulder blade and core, icing, medication, and rest are all that is necessary for treatment.

#### Finger injuries

Finger injuries occur when the finger is struck by the ball or an opponent's hand or body. The "jammed finger" is often overlooked because of the myth that nothing needs to be done, even if it is broken. If fractures that involve a joint or tendon are not properly treated, permanent damage can occur.

Any injury that is associated with a dislocation, deformity, inability to straighten or bend the finger, or significant pain should be examined by a doctor. X-rays may be needed. Buddy tape may be all that is needed to return to sports; however, this cannot be assumed without an exam and x-ray. Swelling often persists for weeks to months after a finger joint sprain. Ice, nonsteroidal anti-inflammatory drugs (NSAIDs), and range of motion exercises are important for treatment.

#### **Knee injuries**

Patellar pain syndrome is a common overuse injury from prolonged kicking and treading water. It causes pain in the front of the knee, sometimes associated with a bump, and can be severe. It is treated with ice, stretching, NSAIDs, and relative rest.

Athletes should see a doctor as soon as possible if they cannot walk on the injured knee. Athletes should also see a doctor if the knee is swollen, a pop is felt at the time of injury, or the knee feels loose or like it will give way.

#### Remember

Water polo injuries can be prevented by using proper technique and safety equipment, playing in a safe environment, practicing good sportsmanship, and following the rules.

The information contained in this publication should not be used as a substitute for the medical care and advice of your health care professional. There may be variations in treatment that your health care professional may recommend based on individual facts and circumstances.

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