

Published December 4th, 2013 I Feel Your Pain Teen athletes and injuries on the rise By Cathy Dausman



Swimmer Natalie Morlock receives advice on therapy exercise from physical therapist Tom Clennell at the Children's Hospital Sports Medicine Center for Young Athletes in Walnut Creek. Photo Cathy Dausman Natalie Morlock and Dominique Gillis share something more than attendance at the same high school. The Acalanes High School students are part of an increasing number of young athletes who suffer from sports related injuries. Both Morlock, a swimmer, and Gillis, a competitive cheerleader, are still undergoing physical therapy after recent injuries and subsequent corrective surgeries.

It seems teen athletes may be setting themselves up for more of the same as their once seasonal sports evolve into year-round competition. To borrow a phrase from "Casablanca," athletes whose young bodies are being asked to "play it again"... and again ... and again, end up overstressing their "skeletally immature" (think growth plates) bodies. So says David Arakawa, management coordinator and physical therapist at the new Children's Hospital Sport Medicine Center for Young Athletes in Walnut Creek.

"The number one complaint we treat for is pain," he said. Arakawa has noticed a definite increase in those seeking treatment over the last five years, in part because young athletes want to specialize in a single sport at increasingly earlier ages.

Morlock has been swimming year round for the last seven years. The Orinda Aquatics member would like to compete in college, but six months ago she injured soft

tissue in her knee. Three months ago she had it surgically repaired; she was prescribed four months of postoperative physical therapy in once a week, 45-minute sessions. She estimates seven of her fellow Orinda Aquatics members, (totaling 80) have also had recent surgeries.

Morlock said her rehab work with physical therapist Tom Clennell has been eye opening, not only in strengthening and conditioning her injured knee, but "to see all the other things I can fix."

Clennell enjoys working with young athletes on the rebound, because they come with an "awareness" of what he wants them to do. As Morlock finished up, Clennell's next patient arrived. Dominique Gillis is a competitive

cheerleader known as a "flyer" - the cheerleader atop a pyramid of bodies. She often gets catapulted into the air. After one stunt, Gillis landed full force on her ankle and broke her talus bone. She was in a non-weight bearing cast, and later a walking boot, and finally surgery. It was three months before she could walk. "Even resting my leg hurt," Gillis noted. But she wants to return full force. "I want to cheer in college," she said.

Her mother Mary Piscitelli feels athletic activities are especially intense in Lamorinda, and while sports are a healthy outlet, she said their endorphins drive them to push their bodies no matter what the consequences.

Some students have worn out joints by the time they enter college, and many suffer from knee and hip injuries in their 40s, Piscitelli said. As long as there are year-round practices and driven young athletes striving for the next level of competition, physical therapists like Arakawa and Clennell will have their work cut out for them.

"You have to be 100 percent cleared for PE to get back to sports," said Gillis, which includes being able to run the track.

For the best long-term athletic development, Arakawa recommends that students not specialize in a single sport at least until high school. Participating in a variety of sports - call it cross training - is "the best relief for over stressed bodies," he said. "With each sport [played] you gain a certain skill set."

Reach the reporter at: cathy.d@lamorindaweekly.com

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