

# THREE CHEERS for a SAFER SIDELINE

KNOW THE RISKS OF A SURPRISINGLY HAZARDOUS SPORT: CHEERLEADING

**QUICK QUIZ: WHAT ACTIVITY** has caused 66 percent of girls' catastrophic injuries in high school athletics in the last 25 years?

If you guessed lacrosse or soccer, guess again. According to the American Academy of Pediatrics (AAP) it's cheerleading. Once simply a sideline spirit-booster with rah-rah songs and energetic dancing, cheerleading has become a highly competitive, year-round sport with increasingly spectacular—and dangerous—routines.

"Cheerleaders are now real athletes performing high-risk maneuvers," says Robert Cristofaro, M.D., a pediatric orthopaedic surgeon at Maria Fareri Children's Hospital at Westchester Medical Center. These often take place in fields or on hard floors with little or no padding. A mistake can lead to a catastrophic injury.

"We see fractures that require surgery, and in young children that can affect bone growth," says Dr. Cristofaro. Head trauma, including skull fractures and concussions, is also fairly common, he notes. Extreme cases around the country have included broken necks and accidents that caused paralysis.

Complicating the problem, some national authorities haven't caught up with cheerleading's new status. Kids' doctors, though, are ahead of the game. The AAP issued a policy statement last

fall calling cheerleading a sport and noting with concern that only 29 state high school athletic associations recognize it as such. That's important, said the group, "because being classified as a sport gives athletes valuable protection including qualified coaches, well-maintained practice facilities, access to certified athletic trainers, mandated sports physicals and surveillance of injuries."

Despite the risks, Dr. Cristofaro does not advise parents to bar their kids from cheerleading. But he does suggest "frank discussions with the people who are in charge of your child's cheerleading team or group." He feels that many coaches and administrators of the sport aren't fully attuned to the risks. "The weak links are with the coaching and the preparation of the kids with proper exercise, stretching and good supervision," he says. He recommends finding out how much training



the coaches have had and how prepared they are to prevent and to address injuries.

Dr. Cristofaro thinks that as this issue becomes more prominent, national guidelines will be established to set limits, based on a child's age, height, weight and ability, for the types of moves allowed.

For now, discreet parental oversight is in order. "In general, cheerleading is a great activity," the doctor remarks. "I encourage it—just be sure there is adequate supervision." ★

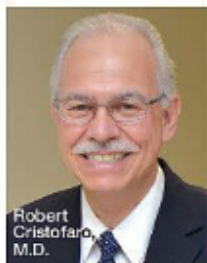
» For more information about pediatric orthopaedic services at Maria Fareri Children's Hospital, visit [westchestermed.icalcenter.com/pediatric-orthopaedics](http://westchestermed.icalcenter.com/pediatric-orthopaedics).



## 5 POINTERS FOR CHEERLEADING SAFETY

- » All cheerleaders should have a pre-season physical and access to qualified strength and conditioning coaches.
- » Cheerleaders should be trained in all spotting techniques and only attempt stunts after demonstrating appropriate skill progression.
- » Pyramid and partner stunts should be performed only on a spring/foam floor or grass/turf and should not be more than two people high. No stunts should be done on hard, uneven or wet surfaces.
- » Coaches, parents and athletes should have access to a written emergency plan.
- » Any cheerleader suspected of having a head injury should be removed from practice or competition and not allowed to return until he or she has clearance from a health professional.

Source: The American Academy of Pediatrics



Robert Cristofaro, M.D.