

PEDIATRIC FOOT & CLEAT INJURIES

WHAT PARENTS NEED TO KNOW

10% of all injuries seen in the ER are ankle sprains

83% of ankle injuries are diagnosed as ligament sprains with incomplete tears

Not all fields are created equal:
90% of ankle sprains are due to poor field conditions

Flat feet or a rigid arch and use of improper or worn-out footwear may **increase the risk of developing shin splints**

In football, the foot and ankle account for **16%** of all injuries

Overuse injuries include **Achilles tendonitis** and **stress fractures**



Rubber cleats are not necessary for **children under 10** – use an all-purpose sports shoe

Metal spikes should not be used until **teenage years**

The ankle is the **second most common site of injury in baseball players** after the shoulder

Pediatric heel pain is very different from adult heel pain; **it does not get better with walking around**

Generally, injuries seen in younger athletes fall in three categories:

1 Injuries related to growth

2 Overuse injuries

3 Acute presentations

When is a sprain really bad? | Sprains are classified in three categories:

FIRST DEGREE

Tissue is only stretched

- Slight swelling
- Mild loss of range of motion and strength
- No decrease in stability

SECOND DEGREE

Involves stretching and some tearing of tissue

- Moderate swelling
- Usually includes some bruising
- Moderate loss of range of motion and strength
- Some decrease in stability

THIRD DEGREE

Complete tearing of tissue

- Significant swelling and bruising
- Near complete loss of range of motion and strength
- Marked decrease in stability

The heel is where it's at | Sever's disease is a common cause of heel pain in growing kids, physically active kids.



The most important thing to know about Sever's disease is that, with proper care, the condition usually goes away in under two months. Early diagnosis, proper care, and taking measures to protect the heel can help protect against future problems.

