

Young Athlete Program: Ultimate Flying Disc Injuries

Ultimate, played with a flying disc, has existed since the early 1970s and has increased exponentially in interest among college students, as well as young athletes. It's is a limited contact sport that combines elements of soccer, football, and basketball. Players must run, cut, guard, jump, throw, catch, and at times dive with an outstretched arm for the disc. Because of the high level of endurance and the intricate movement patterns required per game, this limited contact sport can sideline any young athlete because of its demands.

Common Injuries

Because movements in Ultimate are similar to football, soccer, and basketball, most injuries are due to overuse. Muscle strains and ligament sprains of the knee and ankle are the most common injuries. Some of the more severe injuries can include shoulder instability as a result of a fall, as well as knee and ankle ligament rupture.

Causes of Injury

Ultimate players cut, guard, jump, throw, catch and dive with an outstretched arm for 60 to 90 minutes. It is common for players to have multiple games, playing up to an average of six games in a two-day tournament, which can result in five to 15 miles of running in two days. Sometimes players also are not ready for the intricate sequences of movements and fast reactions required of the game, which can lead to injury.

Preventing Injuries

A proper warmup prior to playing as well as pre-season and in-season strengthening and conditioning are the best ways to prevent injuries. If your young athlete does experience pain or soreness that lasts for greater than 48 hours, it is recommended they be evaluated by a medical professional.



Proper Landing and Cutting

The anterior cruciate ligament (ACL) provides stability for an athlete to land and pivot. When the front thigh muscles contract to help with stabilization, the ACL is stressed, increasing the risk of injury. Learning to use other muscles to help with stability can reduce the risk of an ACL tear by 82 percent.

When landing, the knees should be behind the toes and stacked on top of the ankles. Landing with a straight leg forces the knee to absorb four times the body's weight. The hips should be positioned as if the player is about to sit in a chair. The trunk/abdominal area should land flexed, not in an upright position. Eliminate side to side motion when landing, and land softly. If the feet "slap," the muscles are not absorbing the load.

Cutting or pivoting is a sudden change in direction, common in sports such as soccer and basketball. Often athletes, especially females, cut or pivot over a straight leg or cross over their legs to change direction. Proper cutting involves changing directions on the outside leg, the leg away from the direction the athlete wants to go.



Screening Young Athletes

Our team of sports rehabilitation experts provides injury prevention screenings to young athletes. These screenings can help uncover existing injuries and areas of weakness, and can help prolong participation in sports.

These 45-minute screenings include:

- Flexibility
- Strength
- Functional movement assessment

The results of the screening will help determine if a young athlete needs to consult with a physician, participate in physical therapy, or consider sport-specific performance training. UPMC Sports Medicine has the expertise and comprehensive services to support young athletes.

Contact the Young Athlete Program

Regardless of age or sport, the Young Athlete Program has the expertise, technology, and services to make a difference for your athlete. For more information or to make an appointment, call 1-855-93-SPORT (77678) or visit UPMCSportsMedicine.com.



@UPMC Sports Medicine



@UPMCSportsMed



@UPMCSportsMed