

# TRAINERS JOURNAL

SECTION

The NATIONAL ATHLETIC TRAINERS ASSOCIATION

MAY, 1943

No. 9

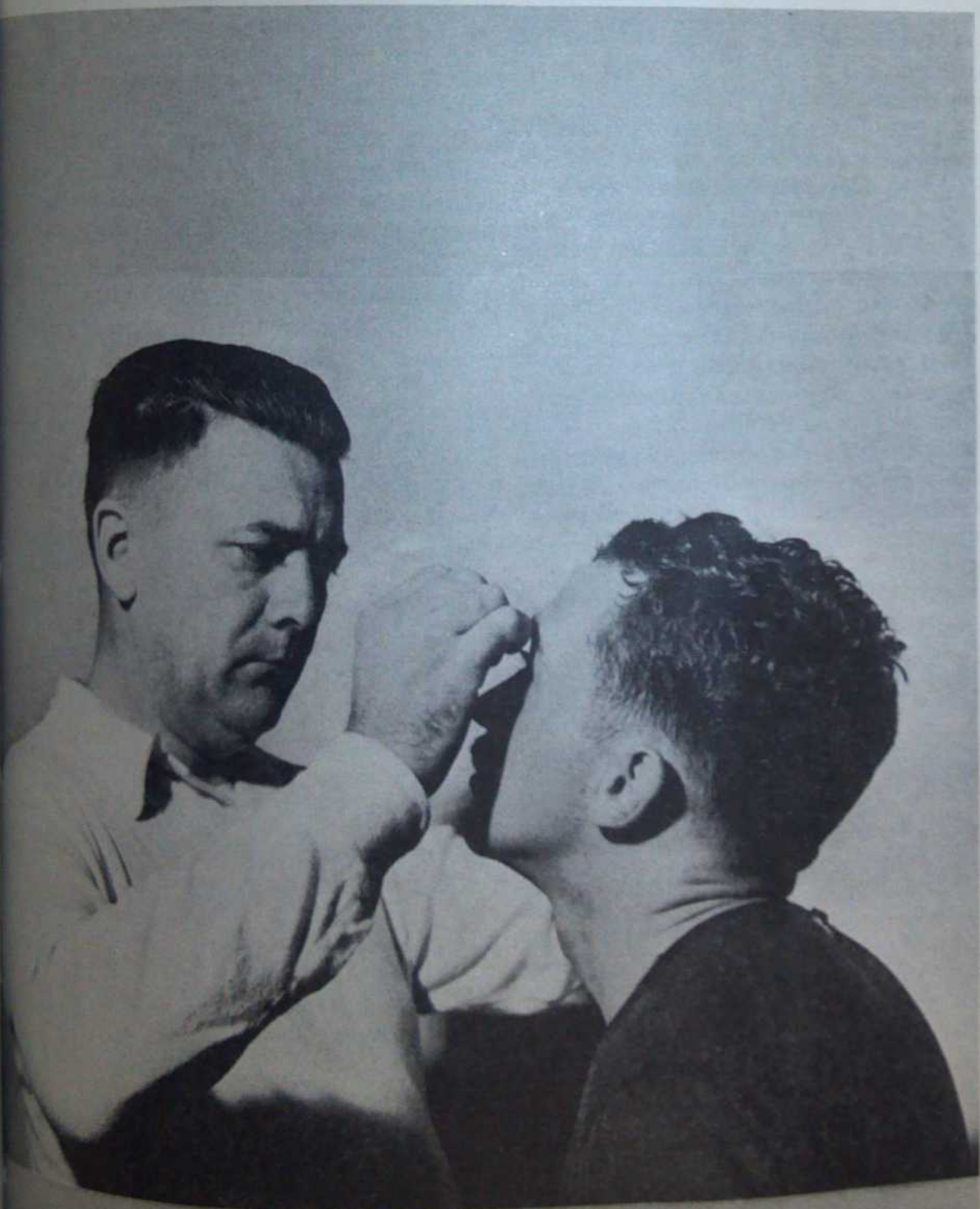
Official Publication  
Of the National Athletic  
Trainers Association

Treatment of Baseball Injuries  
Howard Haak, Lieutenant (j.g.)  
U. S. N. R.

Nutrition and Athletics  
Frank J. Wiechec

Hand and Wrist Sprains  
Phil Hudson

Mickey O'Brien, assistant  
trainer at the United States  
Navy Pre-Flight School,  
Athens, Georgia.





# Treatment of Baseball Injuries

By Howard Haak

Lieutenant (j.g.) United States Naval Reserve  
Head Trainer, United States Navy Pre-Flight School, Del Monte, California

WITH most major league baseball clubs doing their spring training in the north where winter still prevails, the problem of treatment for pulled muscles and tendons becomes a major problem for trainers. Battling this ailment, also, are the trainers at the five navy pre-flight schools who treat hundreds of cadets a week during the strenuous physical fitness program.

Quick action is required to avoid serious consequences from a pulled muscle or tendon. Cold applications on the injury immediately for thirty to forty-five minutes are important and the injury should be wrapped in an analgesic pack the next day. Dry heat for an hour a day for two days, whirlpool treatment and light massage also greatly assist in the healing.

In case the injury is to the leg, the regular criss-cross strapping should be employed and no massage should be administered for at least four days. In case the injury is to an arm, light massage and manipulation should begin immediately and treatments should be given at least twice a day.

Sprains and strains provide another problem that deserves careful consideration before treatment. For ankles, the following rules should be followed:

1. Place in bucket of ice water, wrapped with compression bandages for about forty-five minutes.
2. Strap it tightly upon completion of cold applications.
3. Do not wrap, if an excess swelling is expected. Pad injured part with sponge rubber and wrap tightly with an ace

bandage.

4. Use hot and cold applications twice the following day for a period of about forty-five minutes. Do not strap, if the swelling is still great; substitute a compression bandage.

5. Use of the infra-red lamp as dry heat is recommended for the second- and third-day treatments. If no discoloration appears, use diathermy twenty minutes daily.

For injuries that include strained elbows or chipped elbows the following treatment is desired:

1. Ice packs immediately for fifteen minutes to a half hour.
2. Strap with a figure-8 bandage; elbow should be bent at a 90-degree angle.
3. X-ray all elbow injuries; if negative, the manipulation may begin on the third day.
4. Do not let the patient use his arm for at least five days. This type of injury cannot be rushed.

Manipulation, adjustment and the use of heat give relief for sacro-iliac injuries. Strapping from the lower lumbar region to over the upper part of the rump holds the injured part in place. Gauze pads should be placed over the points of the sacrum.

The application of heat and the strapping should continue for four or five days. The patient may continue athletic activity, if the pain allows.

Strawberries (sliding burns) are a common ailment among ball players. These are very painful and can be of serious nature, if they are not treated properly.

Following is a treatment procedure:

1. If the injury is not too deep, wash with alcohol immediately.
2. If there is bleeding, use a 5 per cent ichthylol ointment, spreading a thick layer on a piece of gauze, then covering with tape. Leave this bandage on for three or four days before applying a new one. This allows the wound to heal and lessens the danger of infection. Most injuries of this type will be healed in three or four days.

3. Never use powder on such an injury. The powder dries and leaves a scab, which will break easily, leaving the way clear for infection. Many players have had considerable time because of gland enlargements as the result of infected strawberries.

Contusions and bruises are common and must be guarded against infection. Ice packs should be applied immediately, followed by liberal applications of Dimec ointment. The following day, hot packs are in order. Split fingers and "nubbies" should be packed in ice immediately with hot packs of antiphlogistine and whirlpool treatments given the following day.

These treatments should be given two days for at least one hour each. Use epsom salts if the injured part is being soaked in a basin.

Serious cuts and abrasions should be given the attention of a doctor immediately. If they are of a minor nature, apply a wet dressing of ST-37 and bandage well after being sure the injury is clean of all foreign matter.

## Nutrition and Athletics

By Frank J. Wiechec

Athletic Trainer, Temple University

DURING the present war-time emergency, the problem of nutrition is looming more and more before the public. The war has necessitated that increasing quantities of food be sent to our fighting men, and other large quantities be sent to our fighting allies and some of the starving peoples in occupied countries. This shifting of food has brought about many food shortages for the civilian population of this country, and as a result an increasing number of food commodities are being rationed in order to insure an equal distribution.

The shortage of food has special sig-

nificance for the coaches and trainers in the various schools and colleges of the country. These men deal with young adolescents who are still not physically mature and who need more nutritious foods than the average adult. In addition, these young people, under the tutelage and encouragement of their coaches, are participating in types of activities that call for extremes of physical effort and endurance. Unquestionably, these boys need the quality of food that contains all the essentials necessary to meet the strains of athletic competition, and still promotes good health and growth. The school au-

thorities should concern themselves with this food problem, because on them rests the responsibility of developing and training these young people. An inadequate diet and continued athletic competition in many instances may put so much stress on an athlete that there may be a breakdown somewhere along the stage of physical development.

The need for an adequate dietary program in competitive athletics is recognized by all coaches and trainers. Experience has shown that certain foods or lack of them, will affect the efficiency of players. It has been demonstrated that

and again, that the addition of foods in the diet will ward off fatigue, increase endurance, enable gains to be made, prevent colds, etc. The studies have been carried on to date in the field of nutrition and medicine have convinced us that the closest to sports of the value of vitamins, minerals, and other nutrients in the athletic dietary.

In a recent survey concerning training in athletics, the concern is the effect that the boys "eat" desire rather than that which is prescribed for each individual. In words, an athletic youth needs a little attention to the food he eats. A normal diet will do. Racial and family diets are not always good for young adolescents, even though excellent football material has been produced by well on Hungarian goulash and Irish stew and potatoes, Polish and cabbage or Italian spaghetti balls. It has been shown that a wide variety of diets, although sufficient for daily activity and growth, are not enough for intensive athletic competition. In a pinch, the body will utilize proteins but with lessened efficiency. Fat or oil are the fuel for the hour, although, in an emergency, or wood or even paper. Usually, a wide enough variety in the choice of food is evident insufficiency of vitamins and minerals. Then many underprivileged families are deprived of the essential cause of economic conditions and an rationing system.

Figures recently released by the United States Department of Agriculture show that there is a high degree of malnutrition in the country, even though we are rich in food as compared with other countries. About a third of the population in the United States have diets that are not rated good, another third might be considered fair. About 40,000,000 of our 130,000,000 people, roughly 30 per cent, are not getting a diet, measured by a standard, that would insure good buoyant health. More than one family in four secured would provide a diet rated as good. In people may be said to be suffering from what is called the hidden hunger. They may not show the marked signs of deficiency diseases as rickets, pellagra. They are undernourished. Many of them show it in such things as night blindness, indigestion, chronic fatigue and emotional distress. Such ailments are visited upon the well as upon the poor. Bad food preparation, the careless food preparation, the food processing, traditional preparing food, etc., explain the large percentage of unsatisfactory nutrition in the United States. This nation was high-lighted, when approximately a third of all the men rejected for military service was disqualified for



and again, that the addition of certain foods in the diet will ward off fatigue, increase endurance, enable gains in weight, prevent colds, etc. The studies that have been carried on to date in the fields of nutrition and medicine have convinced those closest to sports of the value of certain vitamins, minerals, and other food products in the athletic dietary.

In a recent survey concerning diet and training in athletics, the consensus was to the effect that the boys "eat what they desire rather than that which may be prescribed for each individual." In other words, an athletic youth need pay very little attention to the food he eats, and a normal diet will do. Racial and sectional or family diets are not always sufficient for young adolescents, even though excellent football material has been bred equally well on Hungarian goulash and herring, Irish stew and potatoes, Polish sausage and cabbage or Italian spaghetti and meat balls. It has been shown that these foreign diets, although sufficient for routine daily activity and growth, are not nearly enough for intensive athletic competition. In a pinch, the body will utilize fats or proteins but with lessened efficiency. Coal or oil are the fuel for the house furnace, although, in an emergency, one may use wood or even paper. Usually, there is not enough variety in the choice of foods with evident insufficiency of vitamins and minerals. Then many underprivileged families are deprived of the essential foods because of economic conditions and the present rationing system.

Figures recently released by the United States Department of Agriculture show that there is a high degree of undernourishment in the country, even though we are rich in food as compared with other countries. About a third of the families in the United States have diets that might be rated good, another third, diets that might be considered fair. An estimated 40,000,000 of our 130,000,000 people, roughly 30 per cent, are not getting a good diet, measured by a standard high enough to insure good buoyant health. Not more than one family in four secured food which would provide a diet rated as good. These people may be said to be suffering from what is called the hidden hungers, although they may not show the marked symptoms of deficiency diseases as rickets, scurvy or pellagra. They are undernourished and many of them show it in such ailments as night blindness, indigestion, poor teeth, chronic fatigue and emotional instability. Such ailments are visited upon the rich as well as upon the poor. Bad food habits, careless food preparation, the evolution of food processing, traditional practices of preparing food, etc., explain, in part, the large percentage of unsatisfactory diets in the United States. This national condition was high-lighted, when approximately a third of all the men rejected by selective service was disqualified for reasons of

physical disability and defects related to malnutrition.

Coaches and trainers have long been aware of the nutritional deficiencies of the home diet of many of their charges. Now, because there is need for an extra supply of food, in order to produce maximum athletic performance, many coaches have gone out of their way to supply this energy by insisting that their charges take in certain supplements to their diets, outside of regular meals during the athletic season. One football coach has a milk bar and insists that his boys drink two or three glasses between meals. Another is convinced of the value of gelatine and he has established a cocktail bar before every practice; this, he states, prevents fatigue, and builds up endurance. A basketball coach in the mid-West provides his team members with extra portions of ice cream. One track coach is so convinced of the values derived from eating raw carrots that he always has a supply on hand for

---

### Coming in the June Issue Suggestions for Treatment of

Knee Injuries

Mickey O'Brien

Anatomy of the Knee

Wilbur Bohm

Sore Arms, Prevention and  
Treatment

Roland Logan, Lieutenant U. S. N. R.

---

the boys to munch on. Thus, it has been the routine with some to load their athletes with various sugar additions, vitamins, and, recently, gelatines. These, it is claimed, are indispensable for maximum muscular effort.

Peculiarly enough, in the days when trainers paid very little attention to the study of the principles of nutrition, all sorts of weird and ridiculous diets were forced on athletes. About a hundred years ago, the diet prescribed for an athlete was a great deal different from the present-day diet. Usually only two meals a day were allowed, one at eight in the morning, the other at two or five in the afternoon. The most essential part of each meal was meat. Only beef and mutton might be used. "All young meat, such as veal and lamb, all white meat whether game or poultry, are good for nothing. They contain no nourishment for the muscles." Vegetables were prohibited. Potatoes in a small quantity were allowed because they would absorb the evil effects of soft bread and also would absorb the animal fats. Plain water was scorned and was allowed in the least possible amounts, just sufficient to quench the thirst. Some trainers even attempted to prohibit entirely the use of water for drinking. The proper effect of the diet was controlled by a frequent sweating and blood letting. Emetics and laxatives were in common use.

So much for the past. What about the present? Have we rid ourselves of baseless prejudices? In many instances, we have, but still a number of them remain. In addition to the old prejudices we have added some new ones. Here are some of the old practices still found at the present time. Before training starts the bowels are cleansed. Meat is still considered the strength-giving food. Milk has not won universal approval for the reason that it is believed that milk is fattening, constipating, causes indigestion because of the curds formed in the stomach, cuts the wind, requires a long time to digest, and causes an excessive dryness in the throat and mouth. Some of the newer prejudices that are in effect at the present time are a complete denial of meat in the athlete's diet, overemphasis on an alkaline diet, and bad combinations of food (mixing protein foods with starches, meat with milk, acid fruits and starches). Butter is considered a substance which inevitably causes an increase in weight and decrease in endurance. A soup is not always welcome. Soft bread is taboo, pies are scorned and bananas are looked upon with suspicion. A split meal system is followed by some in which proteins are eaten at a different time from carbohydrates. Some use honey or sugar immediately before a race, etc.

### Conclusion

Because of rationing and the scarcity of certain foods at the present time, food and diet are of outstanding interest. This, in itself is serious enough but government figures have shown that only one-third of the people of this country have an adequate diet, the other two-thirds being undernourished or having a barely adequate diet. Yet, many physicians, coaches and trainers advise athletes to eat anything that is normal for them during the training season.

This is poor advice because the so-called normal diet is quite insufficient for athletes; (1) because they expend a terrific amount of energy in daily practice and (2) since most athletes range in age from sixteen to twenty-two years and are still growing, they must have more than the usual amounts of minerals, vitamins, building foods and rest, than the average person needs.

There is urgent need at the present time for definite research in the nutrition of athletes. A great strain is being put on these boys with the accelerated physical fitness program and increased sport schedules. Teachers of physical education, coaches and athletic trainers, because they are always working with large groups of boys and enjoy their confidence, are in an enviable position to make advances in the field of nutrition and spread their knowledge of foods and proper diet to those who need it most.



# Hand and Wrist Sprains

By Phil Hudson

Civilian Trainer, United States Navy Pre-Flight School, Athens, Georgia

**I**N OUR physical conditioning program for future Navy fliers, where heavy emphasis on body-contact sports is a primary feature, sprains of the hand and wrist are bound to occur. Treatment of such injuries without incurring loss of valuable time to the cadet is, of course, highly important.

Except where fracture is obviously present, our first consideration is to arrest swelling of the injured member by application of cold packs for fifteen to thirty minutes. Following this, if any doubt exists regarding the extent of the injury, X-ray is advisable.

With common sprains, I personally prefer not to immobilize the fingers or wrist for the first twenty-four hours, provided the cadet will not be exposed to further injury during that period. My theory has been that all possible freedom of movement should be allowed during the twenty-four-hour period in which the effects of the sprain are gradually manifesting themselves. Unnecessarily restricting motion by complete immobilization often increases stiffness and retards recovery. Nature herself will usually do an adequate job of restricting movements within required limits during that period. The patient should also be advised of the benefits to be derived from keeping the hand elevated, so that gravity may assist in establishing proper circulation.

**YOUNGEST** of the staff of six civilian trainers at the Navy Pre-Flight School, Athens, Georgia, is twenty-six-year-old Phil Hudson, a product of Appalachian State Teachers College, Boone, North Carolina. An all-round athlete as an undergraduate, Phil gained valuable experience as a student-trainer assisting in the college clinic. Later, as director of high school physical education and athletics at Marion, North Carolina, he acted as a one-man trainer staff for the school's 750 students.

After the twenty-four hours have elapsed, our next step is to administer heat treatment. In cases where swelling is unusually severe the infra-red lamp is advisable for about twenty minutes at a distance of about two feet. In less severe cases, or after congestion has been sufficiently reduced, the whirlpool is preferable since it allows the sprained member to be exercised during the treatment.

If the athlete must return to competition before the injury has run its course, taping is necessary for protection. The accompanying photos show methods of applying supportive wraps to thumb or wrist for this purpose. The wraps should be removed when the cadet is at rest so that natural movement may be restored as quickly as possible. Heat treatments should be given each day until pain and swelling have subsided.

Illustrations 1, 2 and 3 show application of a wrist wrap. First bind the wrist with ten or twelve continuous turns of two-inch gauze bandage. Then follow with individual strips of adhesive, one around from top to top, and overlapping each other as shown. The use of individual strips instead of continuous wrapping prevents any single turn of the tape being too tight.

Illustrations 4 through 8 show steps in applying a supportive wrap to the thumb. As seen in Illustration 4, gauze bandage is wound three times around the wrist from the inside up, and then around the outside of the thumb to the inside, and then around the wrist from the outside down. The gauze terminates after three successive figure-eight turns around the thumb in this manner.

Illustration 5 shows the beginning of the taping with adhesive. Strip A goes once around the wrist to secure the gauze. Strip B is brought from back of the wrist once around the thumb from the inside to the outside in figure-eight turn and terminates as shown in Illustration 6. Application of two more overlapping strips in figure-eight fashion is shown in Illustration 7. A strip, seen in Illustration 8, completes the figure-eight wrapping. Anchor strip is then brought once around the wrist to finish the job.

## QUALIFICATIONS FOR MEMBERSHIP IN THE NATIONAL ATHLETIC TRAINERS ASSOCIATION

**SENIOR MEMBERSHIP:** 1. Men who have been actively engaged in athletic training or closely allied work for a period of two or more years. 2. Men who are qualified to take charge of the work, in co-operation with the medical department and to direct it in athletic training in a college or university. 3. Men who have had four years of practical experience in a recognized athletic training department of a college or university or some other institution of recognized standard. Senior members have voting privileges.

**JUNIOR MEMBERSHIP:** 1. Men who do not qualify as Senior members but who are actively engaged in athletic training either as an assistant in a college or university. 2. Men in charge of the training program in a high school, or in closely allied work. 3. Men who are taking an approved training course.

Any Junior member may become a Senior member upon completing the requirements for Senior membership and passing an admission test given

by the Membership Committee. Junior members do not have voting privileges.

Senior and Junior applicants must submit along with the application blank a letter of endorsement from the physician who acts as medical supervisor in their institutions.

**ASSOCIATE MEMBERSHIP:** 1. Men who have not been actively engaged in athletic training for a period of eighteen months previous to their application. 2. Junior or Senior members who have not been actively engaged for a period of eighteen months, but who are interested in the advancement and recognition of athletic training. 3. High school coaches and student high school trainers. Associate members do not have voting privileges.

Senior and Junior membership dues are one dollar per year. Dues for Associate members fifty cents. Applications for membership should be addressed to Bill Frey, Secretary and Treasurer, Iowa City, Iowa.



how appli-  
bind the wrist  
ous turns of  
Then follow  
hesive, one  
l overlapping  
of individual  
wrapping pro-  
e tape beca-

how steps in  
o the thumb  
uize bandage  
d the wrist  
n around the  
e inside, and  
the outside  
s after three  
around the

beginning of  
Strip A goes  
re the gauze  
of the wrist,  
the inside to  
n and termi-  
n 6. Appli-  
ing strips in  
in Illustra-  
lustration 8,  
apping. An-  
once around

members  
t along  
sement  
ervisor

no have  
g for a  
eir ap-  
no have  
ghteen  
cement  
3. High  
rainers.  
g priv-

one dol-  
rs fifty  
d be ad-  
asurer.

