Asymmetries as a risk factor for injuries in gymnastics

OMEGA

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d by Emotio

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FOKYO 2020

Anthropometry of a gymnast

- Research by Ivan Čuk and others
- Anthropometric parameters (40 competitors, WC in Ljubljana 2000)



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Anthropometry of a gymnast

- Weight = 66kg
- Height = 168cm
- No left/right side aysmmetries

Found differences in:

- Elbow diameter
- Circumference of forearm
- Skinfold thickness of biceps brachii
- Skinfold thickness of triceps brachii



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|----------|-------------|------------|-----|---------|
| Table I. | Descriptive | statistics | and | t-test. |

| Variable | X | SD | Max | Min | | |
|--|--------|-----------|--------|------------|--------|-------|
| Age (years) | 23.40 | | 30 | 17 | | |
| Body height (cm) | 168.08 | 6.25 | 185.50 | 157.40 | | |
| Body weight (kg) | 66.45 | 8.15 | 84.80 | 51.90 | | |
| | Left s | Left side | | Right side | | |
| | Mean | SD | Mean | SD | t | Sig. |
| Wrist diameter (cm) | 6.04 | 0.36 | 6.08 | 0.37 | -1.706 | .096 |
| Elbow diameter (cm) | 6.79 | 0.41 | 6.86 | 0.43 | -2.808 | .008* |
| Knee diameter (cm) | 8.79 | 0.54 | 8.78 | 0.54 | .333 | .741 |
| Ankle diameter (cm) | 6.94 | 0.59 | 6.90 | 0.65 | 1.397 | .170 |
| Circumference of thigh (cm) | 54.07 | 2.84 | 54.02 | 2.85 | 640 | .526 |
| Circumference of calf (cm) | 35.50 | 1.87 | 35.55 | 1.88 | 339 | .736 |
| Circumference of forearm (cm) | 27.78 | 1.49 | 28.09 | 1.53 | -3.069 | .004* |
| Circumference of relaxed upper arm (cm) | 33.15 | 2.12 | 33.26 | 2.16 | 896 | .376 |
| Skinfold thickness of thigh - ventral (mm) | 7.22 | 2.04 | 7.03 | 1.74 | 1.143 | .260 |
| Skinfold thickness of calf (mm) | 5.01 | 1.31 | 4.88 | 1.27 | 1.261 | .215 |
| Skinfold thickness of biceps brachii (mm) | 3.26 | 0.51 | 3.10 | 0.45 | 2.050 | .047* |
| Skinfold thickness of triceps brachii (mm) | 4.63 | 1.03 | 4.94 | 1.19 | -3.407 | .002* |
| Skinfold thickness of forearm - volar (mm) | 3.40 | 0.72 | 3.43 | 0.69 | 483 | .632 |

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*significant differences between left and right side.

| Measurement | X | SD | Max | Min |
|---|-------|-----|-------|-------|
| Body heigth (cm) | 167.0 | 6.3 | 183.8 | 153.2 |
| Body weight (kg) | 63.6 | 6.2 | 80.5 | 50.0 |
| Knee diameter (cm) | 9.2 | 0.4 | 11.0 | 8.2 |
| Circumference of thigh (cm) | 51.1 | 2.7 | 58.0 | 36.9 |
| Circumference of forearm (cm) | 27.5 | 1.2 | 30.1 | 24.0 |
| Circumference of relaxed upper arm (cm) | 31.2 | 1.7 | 36.5 | 26.3 |
| Circumference of calf (cm) | 34.7 | 1.7 | 40.0 | 31.0 |
| Skinfold thickness of calf (mm) | 4.7 | 1.2 | 10.2 | 2.8 |
| Skinfold thickness of biceps (mm) | 3.3 | 0.5 | 5.0 | 2.4 |
| Skinfold thickness of triceps (mm) | 5.4 | 1.1 | 10.2 | 3.7 |

Table II. Anthropometric characteristics of top gymnasts at World Championships in Rotterdam 1989 (N=165) (Claesens et al. 1991).

Comparison of measurements from 1989 WC and 2000 WC

| Table I. Descriptive statistics and t-test. | | | | | | |
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Types of asymmetries

- Muscle asymmetries (strength, Flexibility)
- Anthropometric asymmetries (shortened limb due to previous injury...)

Muscle asymmetries

• Due to strength:

- Left/right arm
- Antagonist/agonist muscle

- Lack of strength in larger muscle groups such as quadriceps or biceps...

- Due to flexibility:
- Left/right arm
- Antagonist/agonist muscle

- Lack of flexibility in larger muscle groups

Strength ratios of antagonist/agonist muscle

| Ankle | Plantar/Dorsal | 3:1 |
|------------------------|----------------------------|-----|
| Ankle | Pronation/supination | 1:1 |
| Knee | Extension/flexion | 3:2 |
| Нір | Extension/Flexion | 1:1 |
| Shoulder | Extension/flexion | 3:2 |
| Shoulder | Internal/external rotation | 3:2 |
| Elbow | Extension/Flexion | 1:1 |
| Abdominal/back muscles | Extension/Flexion | 1:1 |
| Whole body | Left/Right side | 1:1 |

Ankle injury

Weakness of the ankle stabilizer muscles often results in ankle injuries

Proprioception is the first to be lost after an ankle sprain

Possibility of weakened tendons and risk of further injuries

Prevention

https://www.youtube.com/watch?v=CzyfFfleRU0





Knee injury



Knee injuries are usually the result of excessive force and our muscles are no longer able to compensate

May happen in case of incorect knee positon in Valgus while landing a jump

Inhibition of inhibitory mechanisms (can be achieved with strength trainings)

Balance between muscle strength and flexibility should be maintained

Compensation between mass and strength



Shorter leg

Uncommon

May be a cause of dysplasia Rehabilitation and prevention programs







Prevention

https://www.youtube.com/watch?v=PVdgjHqAes8





Thank you for your attention!