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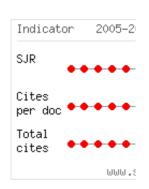
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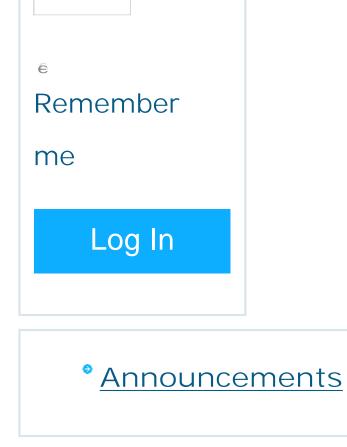




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Profile of dance aerobic instructors'

injuries, part l

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Abstract

Dance aerobic has been increasingly popular in the last years, engaging people of all ages, improving cardiovascular system and ameliorating psychological mood. Dance aerobic instructors guide, organize and entertain all classes suffering, thus, from a number of frequently appearing injuries. The purpose of this study was to investigate the incidence of muscular-skeletal injuries in female dance aerobic instructors in Greece. The sample of the study was constituted of 273 female aerobic instructors who were educated in public and state colleges of physical education and sports in Greece and were observed over a period of three years (2006-2009). For the statistical treatment of the data, the method used was the analysis of frequencies and the non-parametric test X^2 . According to the results, 57.1% of the instructors were injured, most of them (19.8%) were injured once, 69.2% twice and 11% three times. The injury rate was 0.18 injuries per aerobic instructor per year. Out of all injuries, 79.5% was overuse syndromes. The most frequent site of injury was the leg (33.7%) followed by the knee (27.5%) and the back (22.9%). Tendonitis (22.1%), compartment syndrome (15.6%), low back pain (13.4%), and sprain (16.3%), were the most common diagnoses. Further research is needed to correlate the injury rate in aerobic instructors to the external risk factors, in order to prevent the high injury rate that the present study has recorded. In conclusion lowering the risk of injuries still further will benefit both female dance aerobic instructors and participants by enabling a greater enjoyment of the sport, better fitness, and less cost to the individual and the community.

Key words: chronic injuries, anatomical area, female dance aerobic instructors,

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References

REFERENCES

Blessing, D.L., Tucker, L.A., Williford, H.N. (1987).Training factors and physical fitness among aerobic dance instructors. Perceptual and Motor Skills, 65, 47-52.

Brukner, P., Bradshaw, C., Khan, K.M., White, S., Crossley, K. (1996). Stress fractures: a

review of 180 cases. Clin J.

Sports Med, 6, 85-9.

Byhring, S., & Bo, K. (2002). Muscular skeletal injuries in the Norwegian National Ballet. Scand J. Med. Sci Sports, 12, 365-370.

Claxton, D.B., & Lacy, A.C. (1991). Pedagogy: The Missing Link in aerobic Dance. JOPERD, 8, 49- 52.

Du Toit, V., & Smith, R. (2001). Survey of Aerobic Dance injuries to the lower extremity in aerobic instructors. Journal of the American Podiatry Medicine Association, 91(10), 528-532.

Du Toit, V., Gilleard, W., & Smith, R. (1999).Lower extremity injuries in aerobic dance: Is low impact less harmful than high impact? Conference Proceedings. Fifth 10C World Congress on Sport Sciences, Sidney, New South Wales, p. 139.

Garnham, A., Finch, C. and Salmon J.(2001). An Overview of the Epidemiology of Aerobics Injuries. International Sport Medicine, 2(2): 1-11.

Gioftsidou, A., Ispirlidis, J.,

Malliou, P., Pafis, G., Beneka, A., Godolias, G. (2004). Injuries in soccer during the championship between adult and young players. Journal of Human Movement Studies, 46, 397- 406.

Goldberg, B., & Pecora, C.

(1994). Stress fractures: a risk

of increased training in

freshman. Physician Sports

Medicine, 22, 68-78.

Hart, L.E. (1994). Exercise and soft tissue injury. Bailliere's Clinical Rheumatology, 8(1), 137-148.

Iwamoto J., & Takeda T. (2003).

Stress fractures in athletes:

review of 196 cases. J. Orthop.

Sci., 8, 273-278.

Kirialanis, P., Malliou, P.,