

THE DISABLED PAEDIATRIC ATHLETE



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DISABILITY

A disability is any restriction or lack of ability to perform an activity in the manner or within the range considered normal for a human being

A disability results from an impairment

WHO International Classification 1980



IMPAIRMENT

- Loss or abnormality of psychological, physiological or anatomical structure or function



- WHO International Classification
1980

TYPES OF HANDICAPS

- Developmental
 - Self Help
 - Mobility/Physical
 - Behavioural
 - Communication (Speech, Hearing and Vision)
 - Education/Cognitive
 - Mental
 - Social
 - Employment/Economical
 - Environmental (e.g. Accessibility)
-
- WHO International Classification 1980





THE PARALYMPIC ATHLETE

EVOLUTION OF THE PARALYMPIC ATHLETE

- Sports have always been an integral part of rehabilitation of the disabled
- Sport and recreation are vital for socio-cultural integration and equity, harmony and cohesion, particularly among persons with a disability



EVOLUTION OF THE PARALYMPIC ATHLETE

In 1948, Sir Ludwig Guttmann organized a sports competition involving World War II veterans with a spinal cord injury in Stoke Mandeville, England. (first modern olympic games were held in 1896 Athens)



Four years later, competitors from the Netherlands joined the games and an international movement was born.

First Olympic style games in Rome 1960, now called Paralympics. In Toronto 1976, other disability groups were added . In the same year, the first Paralympic Winter Games took place in Sweden.

The number of athletes participating in Summer Paralympic Games has increased from 400 athletes from 23 countries in Rome in 1960 to over 4000 athletes from 170 countries



EVENTS

- Archery
 - Athletics
 - Boccia
 - Cycling
 - Equestrian
 - Football
 - Goalball
 - Judo
 - Power lifting
 - Rowing
 - Sailing
- Shooting
- Swimming
- Table Tennis
- Volley Ball
- Wheel Chair basketball
- Wheel Chair Dance
- Wheel Chair Fencing
- Wheel Chair Rugby
- Alpine Skiing
- Ice Sledge Hockey
- Nordic Skiing
- Curling (Chair)



ATHLETICS

- Hypertonia
- Ataxia
- Athetosis
- Limb deficiency
- Impaired range of motion
- Impaired muscle power
- Leg length discrepancy
- Short stature
- Visually , Hearing, Intellectually Impaired

CLASSIFICATION

- Classification is simply a structure for competition. Not unlike wrestling, boxing and weightlifting, where athletes are categorized by weight classes, athletes with disabilities are grouped in classes defined by the degree of function presented by the disability



CLASSIFICATION

- Occurs before the games and during competition
- Can change
- Grouping of different classes may affect the expected performance of the athlete



ELIGIBILITY

Medical
Diagnostic Criteria

Minimal Disability
Criteria



SPORTS CLASS STATUS

For the paediatric athlete sports class status cannot be confirmed in many groups as the measurements used for classification will change as the athlete matures

As a result, many athletes are placed under review (R) , or given a fixed date review (FDR)

REVIEW GROUP

- Limb deficiencies
- Incomplete neurological deficits
- Short stature F/T 40/41
- Visually impaired T/F 11/12/13
- After surgical intervention



T47

- Acromiale to radial styloid on normal side
- vs
- Acromiale to tip of distal most finger on affected side



T47



JAMAICA PARALYMPIC MOVEMENT

PAEDIATRIC RECRUITMENT

- Upper limb amputees/dysmelia
- cerebral palsy
- visual impairment
- spinal cord injuries
- Short stature

Jamaica fielded two teams in 2017 to Sao Paulo Juvenile Athletics in March, and World Junior Athletics Switzerland in July



NOTWILL 2017



TRAINING

- Specification of equipment/ chairs
- Screening of all supplements and medications.
- Current knowledge of WADA prohibition list
- Nutritional needs
- Injury prevention and early detection

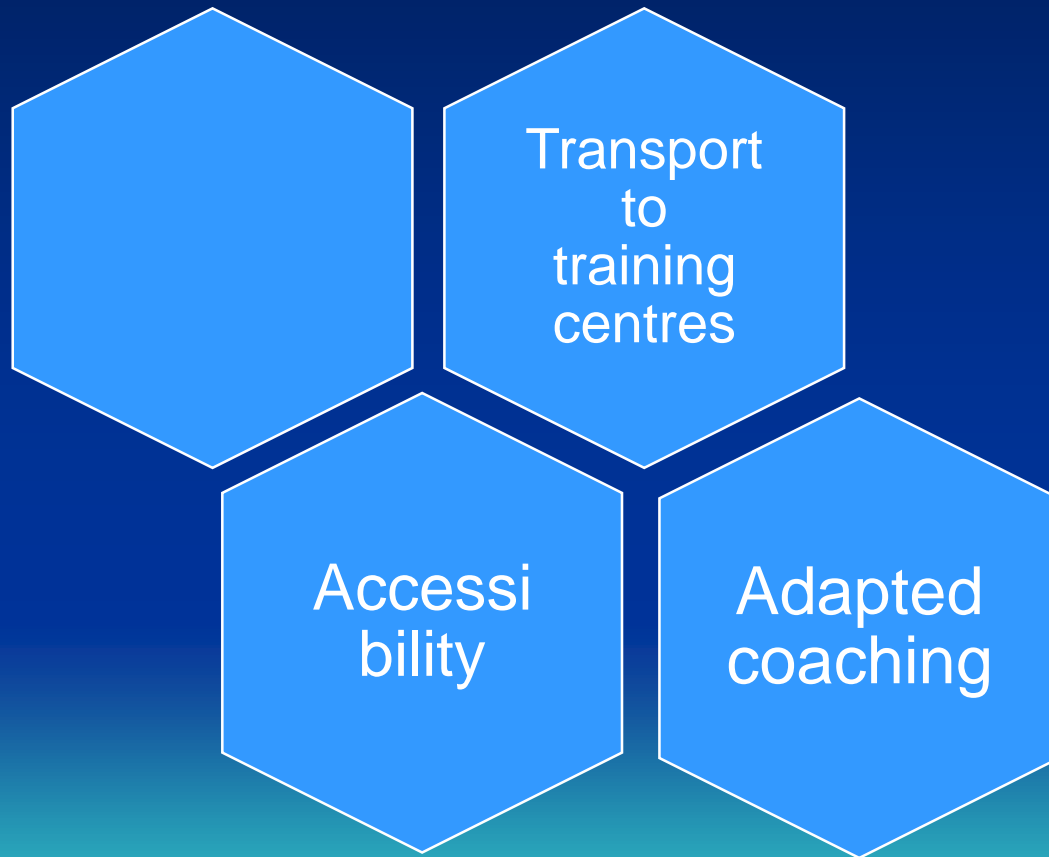


TRAINING

- **Athletes with spinal cord injury have an impaired thermoregulatory capacity**, because the compromised autonomic and somatic nervous system functions disrupt control of skin blood flow and sweating below the level of the lesion.
- As a result, they may be more susceptible to hyperthermia during distance wheelchair racing performance



TRAINING



TRAINING

- Cost of equipment
- Special chairs - racing chairs
 - throwing chairs
- Prosthetics



- Prosthetic Limbs
- US \$3000-\$12000



PARTICIPATION IN EVENTS

- Travelling logistics wrt hydration, temperature regulation, skin care, bowel and bladder care
- Management staff is responsible for welfare of each athlete
- Need for one able bodied attendant for every three wheelchair participants
- Need for a guide for each visually impaired athlete



INJURIES

- In general are similar to those in able bodied athletes
- Overuse injuries especially with wheelchair athletes (rotator cuff injuries, tendinitis about the elbow)
- Temperature regulation and Autonomic Dysreflexia in SCI athletes
- Are sport related





ATHLETICS

- Rounds of events are long because of time needed to adjust equipment e.g. throwing chair
- Performance is affected by the position of the chair





ATHLETICS

- Challenges faced by the visually impaired athlete



THE WAY FORWARD

- Provision made for training throughout the island
- Maximizing participation in low budget events
- Media support /increasing public awareness and acceptance



THE WAY FORWARD

- Integration of disabled athletes in the national sports program
- Dedicated involvement by NGO's



BOCCIA



VOLLEYBALL



GOAL BALL



THANK YOU

