Selected Sporting Injuries

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I wrote this article originally for Terry Ainsworth’s excellent website ‘Soccer nostalgia’ – sadly now defunct. It didn’t take me long to decide on the subject for my article. In my long career as an Orthopaedic surgeon I’ve come across some strange and incredible sports related injuries and I’ve raided my memory banks to record them here. Sadly, a few of them are my own. I dedicate this article to Terry and to all the sportsmen and sportswomen who have worked hard to recover from their injuries and return to the sport they love.

BLOODY ELBOWS!

Sadly my football career didn’t last as long as my surgical one. Like most boys born in the 60s I was mad about football and, growing up in West Yorkshire, became a Leeds United fan. My favourite player was also called Terry – the great Leeds and England full back Terry Cooper (whose own career was blighted by a serious injury) and I suppose that’s why I’ve always appreciated the defensive arts. Sadly I wasn’t good enough to play for my senior school team (Salt Grammar School) though I did become school badminton champion and featured in the tennis team a few times. Fortunately, when I became a medical student in London I got a second chance to play for a team when I was invited to play for the University College Hospital team. At that time (early 80s) about half of England’s medical schools were in London so there was a league within London where each medical school team would play each of the other London medical school teams home and away each season. Starting off at left back I soon realised that my preferred position was at the heart of the team in central midfield. The Saturdays when we would set off in our minibus with music blaring, and us singing and joking, to a pitch somewhere on the outskirts of London were some of the happiest days of my time at medical school.

One match is etched in my memory. We were playing away against Guy’s Hospital medical school and after about 10 minutes I was near the touchline behind one of their players watching the ball at his feet, waiting for an opportunity to tackle. Before I could react, he swung his left arm around catching my face with his elbow. I was furious because, though I couldn’t be sure that it was deliberate, it was reckless and dangerous. Blood was pouring down my face and our captain thought I had broken my nose and wanted to take me off. I was so angry I refused to come off, and with the adrenaline flowing, and some cotton wool plugs up the nostrils, I played one of my best matches for the team. We beat them 5 – 1 with our striker bagging 4 goals. Revenge of a sort? I remember going to see the ENT surgeon the next day and he confirmed the captain’s diagnosis. Because I had once previously broken my nose (accident with a playground swing) he couldn’t re-set it easily and suggested that I wait until my football playing was over and then have a corrective nose job. Now I’m approaching 60 I guess I’ll have to start thinking about it!

It left me with a dislike for elbows in football. I’m glad that the officials can use video replays to punish players that misuse their elbows during a football match – one of the few benefits of VAR! On the subject of pet-hates, the other thing I find very annoying and dangerous is a player pushing another running player off the edge of the pitch when they know there are cameramen or hoardings that the player could collide with.

THE WORLD CUP WINNER’S KNEE

I suppose my main claim to fame is that I once operated on a player in the famous 1966 World Cup winning team. He’s still alive so I can’t name him for confidentiality reasons but he was a brilliant player – I believe he even once scored a hat-trick against Leeds United! This is the story. I was a trainee surgeon at the time – a registrar. The operating list was due to start at 1.30 but I was running late from the morning clinic and decided that I would have to see the first patient in the anaesthetic room before he was anaesthetised rather than see him on the ward (not something that would be permitted now). Of course, he had finished playing many years before but as soon as I walked in I recognised him and became quite nervous. Fortunately he was having a simple operation on his knee: an arthroscopy. He told me that he was getting a bit of an ache towards the end of a round of golf so I wasn’t expecting to find a lot. During the operation I was shocked to find that one side of the knee joint looked normal but the other side was very badly eroded. I spent the next few days wondering if this had something to do with the way he ran or his position on the pitch but who can tell?

BUNGEE RUNNER’S BUM

Perhaps the most bizarre injury I’ve heard about involved a modification of the famous bungee jump. Bungee running involves tying an elastic bungee cord around the runner’s waist and the runner runs as far as he can before the tension in the cord pulls him backwards.

Some years ago I met a chap who had decided to have a go at this ‘sport’. As he was running he felt the cord tighten as expected. Then, as the cord tightened, he heard a snapping sound followed by a higher pitched sound and then smack! The cord hit him on his bottom. I can’t tell you the extent of his injuries but there’s a similar incident you can view on ‘Youtube’. Not a ‘sport’ I can recommend!

TECHNOLOGY PART 1 – THE MOBILE PHONE CAMERA

I have to admit that I have a bit of a love/hate relationship with new technology and ‘smart phones’ in particular.

The phone cameras can be very useful, though. There are some injuries e.g. kneecap dislocations where the dislocation can reduce spontaneously before the player gets to the hospital and when the x-ray is done it looks completely normal. A few years ago a young man arrived in my clinic and stated that he had dislocated his kneecap (patella) playing football. I explained that his x-ray was normal and that therefore I couldn’t say for certain what had happened to his knee in the injury. He said ‘I can prove it!’ and took his mobile phone out of his pocket. A friend of his had taken the photo on his mobile shortly after the
injury and before the kneecap had gone back to its correct position (see photo below).

Dislocated kneecap.

TECHNOLOGY PART 2 – DON’T WI ON THE SOFA!

Wii Sports is a video game played in your home and produced by Nintendo since 2006. Like most other video games it isn’t generally considered a dangerous activity but it all depends on how you do it! I once had a lady in my clinic who was playing the tennis game on her Wii Sports whilst standing on her sofa. Needless to say, she fell off the sofa and broke her wrist. The moral of this story – don’t Wii on the sofa!

TECHNOLOGY PART 3 – THE HOVERBOARD

I cannot recall seeing a patient that has been injured by a Segway machine though I am aware that this has been recorded. However, there is a new device dubbed the ‘hoverboard’ which is like a miniature version without the handlebars. I recently had a patient with a serious injury to her elbow sustained during her first attempt to ride such a device. It was her husband’s machine and she thought she would give it a go but fell off it! As a motorcycling orthopaedic surgeon my advice is: stick to 2 wheeled vehicles with handlebars.

BERT’S NECK

Bert Trautmann was a German who joined the Hitler youth and served in the Nazi army in both the Eastern Front and in France. He was captured and became a POW in England. In 1948, Trautmann and other German POWs were offered the choice of returning to Germany or staying in England under certain conditions. Those who were working in agricultural jobs were allowed to stay and about 15000 decided to do that (I had a patient who was one of them in my Morecambe clinic once). Trautmann was another who decided to stay in England and was part of a group at the Bela River POW camp near Milnthorpe. His biographers suggest that he began playing football in St. Helens but this is wrong. He played locally for 2 teams: Milnthorpe Corinthians and the Burton in Kendal/Holme team which became Burton Thistle. I live within a mile of the Burton Thistle ground and have been trying to find out how often he played for Burton. According to Terry he lived on a farm rather than in the Bela River camp and “a friend of mine, Ray Stephenson, played against him and Bert saved his penalty.” Perhaps it was these displays for Burton Thistle that made him realise he could make a successful career as a goalkeeper and after a spell at St Helens he joined Manchester City.

Of course, the famous match was the 1956 FA Cup final against Birmingham City. Man. City used their striker Don Revie in a deeper role termed the ‘Revie Plan’. Trautmann injured his neck in a collision with a Birmingham player but substitutes weren’t permitted and he chose to play on in severe pain contributing to the victory. Trautmann wrote about this in a Guardian article:

“I remember I was coming out to cut a cross and Peter Murphy, the Birmingham striker, came in to challenge me. When we collided it was like two trains hitting each other – neither of us could stop and we crashed into each other at high speed. His thigh caught me in the neck and I was knocked unconscious.

The physio came on with the magic sponge and I came round a few minutes later but I couldn’t recognise anybody or see properly. There were 15 minutes of the match remaining and, in those days, you were not allowed substitutions, so I had to continue playing.

It was such a strange sensation. I wasn’t seeing any colour – everything around me was grey and I couldn’t see any of the players properly. I could only see silhouettes. It was like walking around in fog and trying to find my way.

I can’t remember what happened during the rest of the match. I know now that I made one or two more good saves but it must just have been my subconscious taking over; everything was a blur of black and white.

I collapsed two or three more times in those last 15 minutes. I was in absolute agony and I was having to support my neck with my right hand. I couldn’t move my head at all – if I wanted to look at anything, I had to turn my whole body around with my hand on my neck.

The next day I was still in a lot of pain, so I went to a hospital in London and they told me that I just had a crack in my neck and sent me away. Three days later the pain was still there, so I went to see an osteopath in Manchester. He gave me an x-ray and told me I had dislocated five vertebrae in my neck. The doctors told me that I should have been paralysed and could have died.

A lot of people have said to me that if I hadn’t been such a good goalkeeper and been so commanding in the penalty box, I wouldn’t have broken my neck. I was very, very lucky.”

Trautmann made a successful recovery from his neck injury and continued playing professionally until 1963. In 1966 he returned to Milnthorpe to play in a star studded charity match in aid of the BLESSMA charity (British Limbless Ex-Serviceman’s Association). In 2004 he was awarded the OBE.
FROM CUMBRIA TO UMBRIA

I once had a patient who decided to cycle from Cumbria to Umbria! He then realised that it is a very long way! Still he went to the cycle shop and looked for equipment to help him succeed. He chose to buy some German handlebar attachments that were described as being specially designed to reduce the risk of nerve injuries in the hand. Nerves are sensitive structures prone to injury from persistent pressure. The patient was travelling across France when he started to get tingling and weakness in his hands. He did try to adjust his new handlebar attachments but decided to continue his journey. By the time he had returned to England he had evidence of a severe nerve injury in one hand and a moderate injury in the other hand. Fortunately both his hands subsequently recovered. When I looked at the handlebar attachments it was clear that they had actually been responsible for the problem. I did write to the German company to suggest they modify the design of their product but I didn’t get a reply!

THE JOCKEY’S COLLARBONE

I don’t think that there can be any doubt that currently the most dangerous sport is National Hunt horse racing. One study found that National Hunt jockeys had sustained 800 broken bones over a 9 year period. Jockeys develop the ability to roll away from danger when they fall from a horse but inevitably suffer injuries from falling whilst travelling at high speed. The collar bone is particularly vulnerable to such injuries and jockeys with long careers can often accumulate large numbers of fractures (broken bones). According to the Telegraph, British jockey Robert ‘Choc’ Thornton suffered over 40 serious injuries in his long career including a broken arm and torn ligaments and tendons in his right knee. Over the years he has broken every one of his 24 ribs, broken his left collar bone three times and his right collar bone six times! He has broken three teeth and lost two in the same fall and suffered three fractured vertebrae (spinal bones) after a fall at Leicester races. Sadly Robert had to retire after his injury at Chepstow in 2014 which involved a further injury to his spine. I’d like to wish Robert a happy and injury free retirement!

1916 – THE MOST DANGEROUS GAME OF FOOTBALL EVER?

July 1st 1916 has gone down in history as the worst day for casualties in the history of the British Army. Martin Middlebrook describes the events vividly in his excellent book ‘The first day of the Somme’. The Company of the 8th Battalion Royal East Surrey Regiment were stationed in their trenches at Carnoy opposite the German positions 300 yards away and were scheduled to be in the first wave of the attack. Their commanding officer, Captain William ‘Billie’ Nevill, was concerned about how his men would perform so whilst on leave he had purchased some footballs. Middlebrook suggests that four footballs were used but other sources state that there were just two. Nevill offered a prize for the platoon which was first in kicking their football onto the German lines. Private L.S. Price saw one of the balls being kicked “As the gunfire died away I saw an infantryman climb onto the parapet into no-man’s land, beckoning others to follow. As he did so he kicked off a football; a good kick, the ball rose and travelled well towards the German line. That seemed to be the signal to advance.”

Sadly Captain Nevill himself was killed close to the German lines but one of his footballs is now on display at the Princess of Wales Royal Regiment Museum at Dover Castle.

THE MOST DANGEROUS SPORT OF ALL

Some years ago my wife and I enjoyed a holiday in Cancun, Mexico. We had the opportunity to visit the Mayan site at Chichen Itza and it was definitely a highlight of our holiday. The site features the largest and best preserved Mayan stadium where an ancient ballgame was played (called ullamaliztli in the local language). The rules of this game aren’t known but stone carvings indicate that the losing team or captain paid a heavy price for failure! It appears that one or more players from the losing team were sacrificed at the end of the match. There is a modern version of the game called Ulama played with a rubber ball that is bounced from the side of a player’s hip (hard to describe but see YouTube for video) but I’m pleased to say that the human sacrifice has been phased out!

The Great Ballcourt at Chichen Itza measures 96.5 metres by 30 metres so close to the smallest football pitch size (90 x 45 metres).

One of the intriguing features of the stadium is a stone circle high up on the side of the playing area (see photo below). Perhaps this was used in the event of a draw and the players had to throw the ball through the centre of the circle to determine which team was victorious.

The Great Ball Court and Stone Circle.

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REFERENCES


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