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HEALTH NEWS

Spring sports can lead to injuries

Once it's nice outside, people tend to exert too much initially instead of working up gradually

By Matt Garton
Oregon Daily Emerald

Some say you can never have too much of a good thing.

If that good thing is exercise, however, you could be in for more than you bargained for — including injuries and pain that could keep you out of the sports scene for a while.

"Spring injuries follow a pattern of too much, too soon," said Dr. Donna Scurlock of the University Health Center. Many sports injuries come from students exercising a lot as soon as it's nice outside and not working up to it gradually.

On the first real day of sunshine, for example, a student might work out in the morning, play basketball with some friends, go in-line skating in the afternoon and then finish the day with frisbee football, she said. The common result of such activity is over-use injuries.

Over-use injuries occur when muscles and joints in the body become sore or damaged from doing too much in a short amount of time.

"Just because you ran well in

the fall but haven't run for months doesn't mean you can start where you left off," Scurlock said. "It's important to start, in the example of running, with low mileage and low intensity and gradually build up."

Good conditioning is sport-specific, Scurlock said. If a student is a conditioned swimmer, that doesn't mean he or she can go out and run a marathon.

The health center sees the usual assortment of sports injuries from biking, outdoor basketball, running and club sports that are related to increased outdoor activity, Scurlock said.

One common sports ailment is a case of the stitches — sharp, spasmodic pain in the right upper abdomen. They may disappear once you discontinue activity, Scurlock said. Stitches are also less likely to happen once your body is more in shape for the activity.

Another situation that can arise is a muscle cramp. Muscle cramps can be caused by abnormal muscle contraction or the over-stretching of muscles. They are also associated with the loss of fluid due to excessive sweating. The tell-tale sign is pain in the affected muscle, tenderness, loss of power and stiffening or spasms.

Many sports injuries require only minor medical treatment; other injuries are chronic and re-

cur on a regular basis. This varies from person to person and occurrences can be reduced with proper, regular training and strength conditioning or other therapy.

There are ways students can prevent such injuries. "Stretching is very important to many sports to help prevent injuries," Scurlock said.

Another measure students can take is to always wear the proper protective equipment for an activity and make sure items such as hiking boots are properly worn-in before attempting that 20-mile hike.

It is also important to wear a bike helmet, even for short trips. "Medical science is notoriously inept at healing severe head injuries," said Scurlock. "Even for students just traveling across campus, we see bike accidents quite often. It's a good idea to wear a helmet for other high-risk activities, like in-line skating."

The health center has athletic trainers, physical therapists, dietitians and other professionals there who can help students get into their desired condition. With proper equipment, stretching and training, students can lower the risk of injury. Taking a moment to properly prepare for an activity, both physically and mentally, may also help to ensure a safe and enjoyable time.

Study promotes routine prostate testing

The controversial study found routine testing reduced prostate-cancer deaths by 69 percent

By Daniel Q. Haney
The Associated Press

LOS ANGELES — Offering the first evidence that prostate blood-screening truly saves lives, a large new study concludes that routine use of the prostate-specific antigen test could prevent 27,000 of the 39,000 prostate-cancer deaths in the United States each year.

The study, released Monday, found that over an eight-year period, the test reduced deaths from prostate cancer by 69 percent by catching the disease early — while it was still treatable with surgery or radiation.

The researchers predicted that if men started testing at age 50, when their risk of advanced disease is still low, it could practically eliminate the development of prostate cancer that reaches the deadly spreading stage.

The study was done by Dr. Fernand Labrie of Laval University in Quebec, who pioneered the use of hormone-blocking drugs as an alternative to castration in advanced prostate cancer. He presented the results at the annual scientific meeting of the American Society for Clinical Oncology.

Few tests are as controversial as the PSA test, and the new study is unlikely to settle this, however.

The test looks for elevated levels in the blood of PSA, a protein that is high in number in cases of prostate cancer.

Although PSA testing has become a standard part of check-ups for men over age 50, some cancer experts question whether this is always a good idea, especially for men in their 70s and beyond.

The critics contend there is no good evidence that removing cancerous prostate glands reliably catches the disease before it spreads. And even if it does catch prostate cancer early, many older men with slow-growing tumors would surely die of something else first. Furthermore, surgery and radiation for this cancer can leave men impotent and unable to control their bladders.

The cancer conference, the world's largest, gave Labrie's study center stage as a plenary presentation, implying it considered this to be one of the most important on the program. At the same time, however, conference officials went out of their way to downplay it.

"I'm not yet convinced," said Dr. Derek Raghaven of the University of Southern California, who moderated a news briefing on Labrie's work.

At issue were technical questions about how the study was conducted.

The study was launched in 1988, well before PSA testing became routine.

Labrie's team randomly divided all 46,193 men in the Quebec

City area between ages 45 and 80 into two groups. Half were invited by letter to have prostate cancer screening.

However, only 8,137 actually agreed to be tested. So the researchers compared those subjects' risk of dying with that of the 38,056 who were not screened.

Raghaven and others questioned whether those who actually showed up for screening — and those who stayed home — might have been influenced by factors such as whether they had a family history of the disease. If so, their cancer risks might be different. Thus, a comparison would be invalid.

Labrie countered that the cancer death rate was the same in those randomly assigned to the comparison group and those who turned down screening.

Over eight years of follow-up, there were five prostate cancer deaths among the men getting regular PSA tests, compared with 137 in the larger, non-screened group. This works out to a three-fold greater risk in the men with no screening.

When applied to the entire U.S. population, Labrie calculated that regular PSA screening would save 27,050 lives a year.

"If the screening is started, as suggested by the American Cancer Society and by us, at the age of 50 years, diagnosis of metastatic [spreading] prostate cancer should practically disappear," Labrie said.

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