# TACSM Abstract

# **Correlation Between Previous Diagnosed Ankle Injuries and the Rate of Diagnosed Osteoarthritis Within Athletic Trainers**

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#### ABSTRACT

While athletic trainers take care of many active individuals from prevention to rehabilitation of injury and illness, these healthcare professionals do not often apply the same concepts to their own health. After may years of standing along sidelines and other playing surfaces, they may often find themselves with osteoarthritis (OA) of various joints especially the ankle. PURPOSE: The purpose of this study is to expand the knowledge in certified or licensed athletic trainers regarding the rate of OA as it correlates to their own personal ankle injuries and to develop an understanding of how important it is as health care providers to care for the injuries that may be sustained on as well as off the job. METHODS: This study consisted of a of 133 anonymous participants. Out of the 133 participants, 13 were male and 120 were female. The study participants were recruited via social media posts and completed a 14-question survey. 8 out of the 14 questions were multiple choice including 1 multiple-choice question consisting of 7 answer choices. 4 questions were answered on a Likert scale question. The remaining question was open ended. **RESULTS**: The frequencies of answers for each question were compared. Select question were further analyzed by using an independent t-test or ANOVA. 91 of the participants answered "no" to "Have you been diagnosed with Osteoarthritis in your ankle?" 15 answered "yes", 7 were "unsure". There was a significant difference in comparing age and diagnosed OA in the ankle with those 36+ years of age reporting more incidences of the condition compared with their counterparts under 35. (p-value <.001). There was also a significant difference in comparing diagnosed OA in the ankle and the years of experience as a certified or licensed athletic trainer with those having more experience noting an increased rate of the condition. This was note with a p-value=.013. There was no significant difference when comparing how long it was between last ankle injury and diagnosis of OA in the ankle (p-value .847). Similar analysis of other paired questions demonstrated no significant statistical difference between previous ankle injuries and OA in the ankle. CONCLUSION: These results suggest that there is no correlation to previous ankle injuries and ankle osteoarthritis in the athletic training population. This study can lead to further investigation of joint pain within the ankle due to previous ankle injuries as well as potential relationship to work-related tasks of the certified or licensed athletic trainer.