

Relationship between shoulder pain assessments and wheelchair basketball performance

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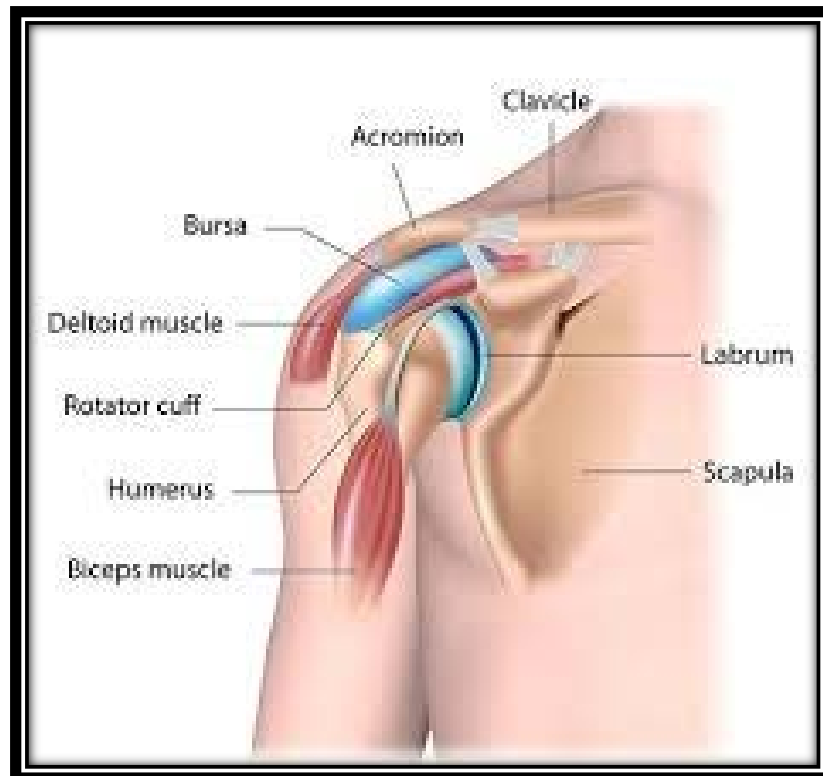
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1. Introduction (1/3)

- **Wheelchair Basketball (WB) players:** spinal cord injury (SCI), congenital deformities, post – polio síndrome, lower limb amputation and orthopedics deformities
- Not all players who participate in WB use a wheelchair for activities of daily living (Pérez-Tejero & Castellanos; 2009)



Shoulder Pain (SP)

Age and SP

WB propulsion technique = Range of Motion (ROM)

ROM = presence or absence of injure

➤ **Shoulder Pain Index in Wheelchair Basketball player (SPI-WB)**

1. Demographic data
2. Transfers
3. Pain related ADLs, distinguishing between wheelchair users and all participants
4. **SP perception** when performing sport skills (SS): shooting, pushing, rebounding or one-handed long pass, and other game situations



1. Introduction (2/3)

➤ WB Performance through game-related statistics (GRS)

1. **Functional class** (Pérez-Tejero & Pinilla, 2015; Vanlandewijck, Verellen, y Tweedy, 2011)
2. **Winning and losing teams** (Gómez, Pérez, Molik, Szyman, y Sampaio; 2014)



Rival	1º CUARTO	2º CUARTO	3º CUARTO	4º CUARTO	Total
Equipo A	10	15	12	18	55
Equipo B	12	18	15	10	55
Total	22	33	27	28	110

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Equipo A	10	15	12	18	55
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Total	22	33	27	28	110

Objective

To analyze the relationship between shoulder pain assessments and wheelchair basketball performance through game-related statistics



2. Method

WB PLAYERS

- 12 WB players from the elite Spanish selection male
- Age between 18 to 42 years (29.9 ± 7.05)

- **Shoulder Pain Index for Wheelchair Basketball (SPI-WB)** (Curtis et al; 1995 and García-Gómez et al., 2019)
- **4 items** related to SP perception when performing specific **WB skills**: shooting, pushing, rebounding or one-handed long pass during game situation

- **Performance through GRS**: total shoots, offensive and defensive rebounds, total rebounds, assists, blocks and total points
- European Championships (Frankfurt, Germany): 8 games
- Variables were relativized per 40 minutes

- **Sperman test**: correlations between SP and GRS
- **r-value (effect size)**: ($r > 0.1$ = small, $r > 0.3$ = medium and $r > 0.5$ = large) (Hopkins, 2002)
- PASW statistics 20 (SPSS Inc., Chicago, IL, USA).
- $P < 0.05$

3. Results



Total shoots ($r = -0.619, p < 0.05$)
Assists ($r = -0.684, p < 0.05$)
Total points per players during the game ($r = -0.582, p < 0.05$)



Total shoots ($r = -0.760, p < 0.05$)
Total points per players during the game ($r = -0.760, p < 0.05$)

More SP = less performance

5. Discussion and practical implications

- Similar with previous studies, these results shows how SP could have a negative relationship with WB sport skill (García-Gómez & Pérez-Tejero, 2017), specifically WB performance
- How an adequate strategy to screen shoulder condition could have a correlation with the WB performance (Dutton, 2019)
- According to this results and other studies (García-Gómez and Pérez-Tejero, 2016; Wessels et al., 2013) the correlation between SP and joint mobility could affect WB skills performance.
- Preventive shoulder health programs must be implemented along preparation period together with specific strength training (García-Gómez et al., 2019)

5. Conclusion



- The findings of this study provide a first step of the relationship between shoulder pain and WB performance.
- Gender issues and more sample are needed in the future to address this topic, and also to guide training advice.

Thank you for your attention

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