Review On Kabaddi Players Injuries With Special Reference To Minimization Of The Injuries

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ABSTRACT:
The sport of Kabaddi is predominantly played in India, where it is very well-liked. There are several regional varieties of the games in India, including Hu-Tu-Tu in western India, Ha-Do-Do in eastern India and Bangladesh, Chedugudu in southern India, and Kaunbada in northern India. Modern Kabaddi is a hybrid of the game, which has been played under several names and in a variety of formats. The essential skills required to achieve power are breath control, raiding, evasion, and hand- and foot-movement. Athletes might experience a range of physical ailments and wounds. Here, this article highlighted about the Kabaddi players' injuries with special reference to the minimization of the injuries.

Keywords: Kabaddi, Players, West Bengal, Bengal Warriors.

INTRODUCTION:
Yoga is an Indian science that shows people how to control their thoughts and bodies via self-discipline and meditation. Without it, kabaddi is insufficient. The raider must repeat the phrase "Kabaddi," enter the opposing team's court while holding his breath, and continue doing so until he returns to his own court. This is known as "kant," which is connected to "pranayama" in yoga. On the other hand, pranayama is connected to intense physical activity. This is one of the few sports that combines physical exertion and yoga.

In order to succeed in this game, you must have agility, great lung capacity, muscle coordination, mental focus, and quick reactions. It requires guts, concentration, and the capacity to anticipate the opponent’s actions to take on seven opponents as a single player.

With the intention of popularising Kabaddi as a sport in India, the All-India Kabaddi Federation (AIKF) was established in 1950. Since the beginning of the organisation, the AIKF has worked to raise the level of competition. To achieve this goal, it has held national level Kabaddi tournaments on a regular basis since 1952 in compliance with the established rules.
and regulations (for the game). While the inaugural women's nationals were held in Calcutta in 1956, the first men's national competition was staged in Madras (now Chennai) in 1955. (The current Kolkata.) In order to promote the sport in India's neighbouring nations and host national-level competitions, the Amateur Kabaddi Federation of India (AKFI) was established in 1973 [1].

In 1961, Kabaddi was included to the curriculum of the Indian University Sports Control Board (USCB) as a main sport for students. This also enhanced Kabaddi's standing as a sport in India. The game was named as one of the most important games in the school in 1962 by the School Games Federation of India (SGFI). This choice was important in encouraging school-aged children to participate in the game's state and national championships, which were run by the SGFI. In 1971, the National Institute of Sports (NIS) agreed to include Kabaddi in the curriculum of regular diploma courses, marking another significant turning point in the history of the sport in India [2].

A variety of games with various names and formats have been combined to create modern kabaddi. International attention was drawn to the Kabaddi demonstration during the 1936 Berlin Olympics by Hanuman Vyayam Prasarak Mandal from Amravati, Maharashtra. The first time the game was played was at the Indian Olympic Games in Calcutta in 1938. The All-India Kabaddi Federation was established in 1950, and standard rules were created. The amateur Kabaddi Federation of India was founded in 1973. Following the establishment of the Amateur Kabaddi Federation of India, the first men's nationals were conducted in Madras and the first women's nationals in Calcutta in 1955. The AKFI has the power to modify the regulations and has given them new forms. The Asian Kabaddi Federation was presided over by Mr. Janardan Singh Gehlot.

The first men's Kabaddi national championship was held in a stadium and on a mat in Pune, and it was run by the Badami Haud Sangh. In 1979, Kabaddi was introduced to Japan for the first time. Indian Sundar Ram was dispatched on a two-month tour of Japan by the Asian Amateur Kabaddi Federation to promote the game.

**REVIEW ON KABBADI PLAYERS' INJURIES:**

Amol Datar and Sinku Kumar Singh (2021) claim that the main objectives of this study were to assess the prevalence of common injuries in Kabaddi. 250 Kabaddi competitors from the Marathwada district of Maharashtra who were taking part in intercollegiate state and interuniversity competitions were questioned about their injuries. Out of 250 Kabaddi players, 94 have reported injuries in the past 12 months. In total, 146 injuries occurred, with 28% of those being repeat injuries. The age range of the players was 16 to 30, with 68 percent
of them falling between 20 and 25. Injury to the lower limbs predominated, with the most typical injuries occurring to the knees and ankles of Kabaddi players [3]. Kabaddi is a well-known, traditional national game with Indian roots, according to Sajjan Pal et al. (2020). Speed, strength, endurance, and agility are necessary for the sport of kabaddi. Due to its combative nature, Kabaddi has a high rate of injuries. The purpose of the study is to provide a thorough evaluation of the literature on typical Kabaddi injuries and recommendations for prevention. In order to conduct a literature review, the following databases were used: MEDLINE, Science Direct, The Web of Science, PubMed, SPORT Discus, and Google Scholar. The following keywords were combined in each database: Injury, epidemiology, causes, and preventative measures in kabaddi and kabaddi competition. Thirteen studies on Kabaddi were evaluated based on typical injuries and treatment options. This evaluation looked at studies that were released between March of 2020 and the year 2000. Kabaddi is a dangerous game, according to the most recent information. Injuries to the knee and ankle are the two most frequent among Kabaddi players. It has been demonstrated that mouthguards and better playing technique have a major impact on injury prevention. Epidemiology research and prevention strategies are sparse in this sport in the Indian context. Injury prevention strategies must be developed and put into use for a good sports safety framework. In order to better understand injury processes, risk factors, optimum prevention strategies, thorough and effective treatment, and long-term effects of injury in child sports, more epidemiological research are required [4].

According to Yallappa M (2020), the purpose of this article is to review recent studies on the contribution of biomechanics to the prevention of sports injuries and to provide biomechanics applications related to Kabaddi technique, Kabaddi play, and injury prevention concepts. Directors of physical education and coaches can use biomechanics to help athletes correct their actions and improve their skill. Additionally, biomechanics experts might create fresh, superior methods for improving the execution of a sport motion. The main traits of typical Kabaddi injuries are described, along with how biomechanics may be able to assist prevent them. Conclusions are drawn using the qualitative analysis [5].

**SIGNIFICANCE OF THE INJURIES:**

In addition to increasing the risk of death and physical harm, any form of trauma exposure, especially during childhood, can also raise the risk of mental illness and suicide, smoking, alcoholism, drug abuse, chronic illnesses like heart disease, diabetes, and cancer, as well as social issues like homelessness, crime, and violence. Because of these factors, reducing injuries and violence, including through severing intergenerational patterns of violence, goes beyond only preventing physical harm and instead makes a significant positive impact on one’s health, society, and economy.
However, they are not equally distributed between or within countries; some people are more vulnerable than others depending on the circumstances surrounding their birth, development, employment, living situation, and ageing. Injuries and violence are a significant cause of death and a significant burden of disease in all countries. For instance, having a poor socioeconomic standing, being a man, and being young all raise the chance of injury and being either a victim or an offender of significant physical violence. As people age, their risk of suffering injuries from falls rises.

On the field of play, injuries frequently happen. While it cannot be entirely prevented, it can be avoided in order to increase the excitement and delight of play. Injuries are less likely to happen if players and athletes are aware that they are on the ground during competition in the coaching camp. Injury prevention on the field is the responsibility of coaches, officials, managers, and other officials. You can construct a healthy standard and competitive programme if you wish to play at all costs by utilizing cutting-edge technique and modern equipment to avoid negatively affecting the player’s life [6].

MINIMIZATION OF INJURIES TO THE PLAYERS:
The main concerns for team doctors caring for and treating athletes are load, overload, and recovery. Athletic conditioning, training, and competition inevitably result in load. A stimulus that a person experiences and reacts to before, during, or after an action can be referred to as load. Load comprises both internal and external components and causes demands or stress (both physiological and psychological). Safely managed loads may lead to increased athletic ability and performance as well as decreased risk of illness and injury. As used in this article, overload is defined as load that is excessive or poorly handled. Anatomical, physiological, and/or psychological problems will develop as a result, altering performance and increasing the risk of injury and sickness. Optimal performance, injury and sickness avoidance, and load identification and reduction have all been promoted as key components of these techniques.

If the coaches have a thorough understanding of the corresponding circumstances, all injuries can be decreased. It must be kept in mind at all times in order to perfect the coaching process, and instruction should always be preceded by careful observation of the players’ behaviour [7]. The right warm-up exercises, the right gear used by the players, the right techniques and occasional coaching, and the right clothes and equipment for the game should all be used by coaches to conduct practises in accordance with the surroundings and to comprehend the psychology and attitude of the players. That person should be aware of the coach and start coaching sessions that have a good chance of succeeding. Coaching and player demonstrations on the playing field shouldn’t be interfered with if the players are hurt, and adequate medical care should be given. The coaches will be able to obtain good
results and successfully complete the coaching process if they adhere to all of the guidelines [8,9].
The time and process during which the body adapts to load is called recovery. For athletic ability, performance, and injury and disease risk, good recovery may lead to positive adaptations, whereas poor recovery may lead to negative adaptations for these factors.

CONCLUSION:
Most injuries are caused by a variety of circumstances, which can be lessened if the coaches have in-depth understanding of the corresponding elements. It should be kept in mind at all times so that the coaching process may be worked out. Before beginning coaching, it is important to constantly monitor the players' behaviour. The right warm-up exercises, the right gear used by the players, the right techniques and occasional coaching, and the right clothes and equipment for the game should all be used by coaches. to conduct practices in accordance with the surroundings and to comprehend the psychology and attitude of the players. That person should be aware of the coach and start coaching sessions that have a good chance of succeeding. Coaching and player demonstrations on the playing field shouldn’t be interfered with if the players are hurt, and adequate medical care should be given. The coaches will be able to obtain good results and successfully complete the coaching procedure if they adhere to all of the guidelines.

REFERENCES: