

Effective Prevention: Identifying Those at Greatest Risk

Gary Wilkerson, EdD, ATC

THE UNIVERSITY OF TENNESSEE
CHATTANOOGA

Injury Definition?

- **Any injury**
 - Including concussion, contusion, and/or laceration
- **Any musculoskeletal injury**
 - Including fracture, dislocation, and/or overuse syndrome
- **Any acute joint sprain or muscle strain**
 - Including upper extremity, core, and/or lower extremity
 - Excluding wrist, hand, and finger injury
- **Any "time-loss" joint sprain or muscle strain**
 - Complete restriction of activity for 1 or more days

Injury Risk Screening

- | | |
|---|---|
| <p>Demographics (Potential Confounders)
Sport; Gender; Prior Injury; Game Exposure</p> <p>Movement Efficiency Ratings
Functional Movement Screen (FMS); Fusionetics</p> <p>Postural Balance
Y-Balance Test; BESS</p> <p>Core Muscle Endurance (Hold Time)
Back Extension; Prone Plank, Side Plank, Wall Sit</p> <p>Muscle Strength/Power (Asymmetry)
Dynamometry; Single-Leg Vertical/Broad Jump</p> <p>Dynamic Movement Tests
Landing Error Scoring System; Hop Tests; Closed Kinetic Chain Upper Extremity Stability (CKCUES)</p> | <p>Muscle Flexibility/Joint Mobility
Sit-Reach; Beighton Scale</p> <p>Anthropometric Measures
Height; Body Mass Index; Estimated Mass Moment of Inertia</p> <p>Neurocognitive/Visuomotor Tests
ImPACT; CogSport; Erikson Flanker Test; Dynavision</p> <p>Self-Reported Status (Surveys)
Life Events Survey for Collegiate Athletes; Sport Fitness Index; Center for Epidemiological Studies – Depression (CES-D); Pittsburgh Sleep Quality Index</p> <p>Wearable Sensors
Inertial Measurement Units; HR Monitors</p> |
|---|---|

Interrelationships Among Determinants of Risk for Injury, Re-injury, & Chronic Disability



Injury Prediction

- Not everyone believes it's possible –
 - Why screening tests to predict injury do not work – and probably never will....: a critical review.
 - Bahr R, 2016, *Br J Sports Med*
 - Return to play and physical performance tests: evidence-based, rough guess or charade?
 - Hegedus EJ & Cook CE, 2015, *Br J Sports Med*
 - Predicting future physical injury in sports: it's a complicated dynamic system.
 - Cook C, 2016, *Br J Sports Med*

Quantification of Injury Risk Level

- Considerations for interpretation of research findings:
 1. **Outcome (Injury Definition)**
 - Location (UE, Core, LE) – Severity – Type (Acute, Overuse)
 2. **Population (Injury Incidence – Pre-Test Probability)**
 - Gender – Age – Sport – Position – Level of Competition
 3. **Predictor (Single Risk Factor or Composite Indicator)**
 - Value derived from single test or a battery of screening tests?
 - Univariable vs. Multivariable Analysis (Adjusted Effect Estimates)
 4. **Duration of surveillance period**
 - Injury incidence progressively increases over time
- Prediction accuracy (validity) depends heavily on:
 - Number of criterion-positive (injured) cases within cohort
 - Minimum 10 positive cases per variable included in prediction model

Terminology

Correlation and Analysis of Variance:

- **Bivariate:** 2 continuous variables (X and Y)
- **Multivariate:** Multiple DVs (Ys) and IVs (Xs)

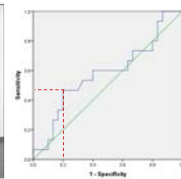
Exposure-Outcome Association:

- **Univariable:** 1 predictor (X) of binary outcome (Y)
 - Predictive variable may be continuous or binary
- **Multivariable:** ≥ 2 predictors of binary outcome (Y)
 - Predictive variables may be continuous or binary

Univariable 2 X 2 Cross-Tabulation

Receiver Operating Characteristic (ROC) Analysis

- Continuous variable converted to binary classification
- Cut-point selected to optimize overall prediction accuracy



RMS*	Injury	No Injury	Incidence
$\geq .06$	7	6	54%
$< .06$	8	24	25%
Total	15	30	

Sensitivity 47% Specificity 80%
 $\chi^2(1)=3.46$ **RR=2.15**
 1-Sided P=.067 90% CI: 1.12 – 4.16
OR=3.50
 90% CI: 1.13 – 10.89

* Root Mean Square of Instantaneous Change in Body Mass Acceleration (Jerk)

What is the level of injury risk?

- **Risk Ratio (RR):** Comparison of Injury Incidence
 - Hi-Risk Proportion Injured / Lo-Risk Proportion Injured
- **Odds Ratio (OR):** Comparison of Occurrence vs. Non-Occurrence
 - Hi-Risk Injury Odds / Lo-Risk Injury Odds
- **Hazard Ratio (HR):** Comparison of Instantaneous Injury Rates
 - Hi-Risk Slope / Lo-Risk Slope (Injuries per athlete per unit of time)

Association	RR	HR	OR
Small	≥ 1.1	≥ 1.3	≥ 1.5
Moderate	≥ 1.4	≥ 2.0	≥ 3.4
Large	≥ 2.0	≥ 4.0	≥ 9.0
Very Large	≥ 3.3	≥ 10.0	≥ 32.0

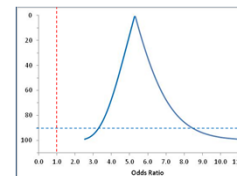
Hopkins WG. Sportsmedicine. 2010;14:49-58 (sportssci.org/2010/wghlinmod.htm).
 Hopkins WG. In: Verhaegen E, van Mechelen W (eds.). Sports Injury Research. 2010.

Assessment of Predictive Validity

1. Magnitude of Effect Size Ratio (RR, HR, and/or OR)

2. Confidence Interval Lower Limit > vs. ≤ 1.0

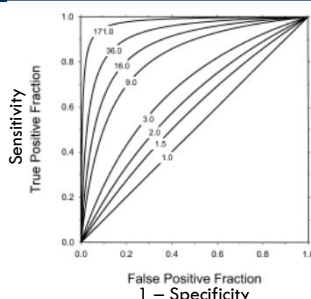
- 90% CI: 5% expected frequency of values $\leq$ LL
- Equivalent to one-sided test of statistical significance



Odds Ratio = 5.28 (90% CI: 3.31 – 8.44)

Limitations of the Odds Ratio

A given value for an Odds Ratio can be derived from many different combinations of values for Sensitivity and 1 – Specificity



Pepe MS, et al. Limitations of the odds ratio in gauging the performance of a diagnostic, prognostic, or screening marker. Am J Epidemiol. 2004;159(9):882-890.

Univariable 2 X 2 Cross-Tabulation

Sensitivity and Specificity

- Probability that outcome status will be correctly classified by test result

Positive and Negative Predictive Value (PPV and NPV)

- Probability that a test will correctly classify an individual as having high-risk vs. low-risk status

Positive and Negative Likelihood Ratio (+LR and -LR)

- Magnitude of increase (+) or decrease (–) in odds for injury occurrence on the basis of classification as high-risk vs. low-risk status

RMS*	Injury	No Injury	Incidence		
$\geq .06$	7	6	54%	PPV=54%	+LR=2.33
$< .06$	8	24	25%	NPV=75%	-LR=0.67
Total	15	30			

Sensitivity 47% Specificity 80%

Univariable Cross-Tabulation Analysis

	Outcome Positive	Outcome Negative	Total	Incidence (Post-Test Prob)		
Predict Positive	True Positive	False Positive	TP+FP	TP/(TP+FP)	+LR = Sens/1-Spec	PPV = TP/(TP+FP)
Predict Negative	False Negative	True Negative	FN+TN	FN/(FN+TN)	-LR = 1-Sens/Spec	NPV = TN/(FN+TN)
Total	TP+FN	FP+TN	TP+TN+FP+FN	Risk Ratio = Incidence/Incidence	Odds Ratio = +LR/-LR	
Pre-Test Prob = Outcome(+)/Total	Sensitivity = TP/(TP+FN)	Specificity = TN/(TN+FP)				

Advantage of Likelihood Ratios

Example: N=100; 80% Sensitivity; 80% Specificity

$$+LR = \text{Sensitivity} / (1 - \text{Specificity})$$

$$-LR = (1 - \text{Sensitivity}) / \text{Specificity}$$

$$+LR = .80 / .20 = 4.00$$

$$-LR = .20 / .80 = 0.25$$

$$OR = +LR / -LR$$

$$OR = 4.00 / 0.25 = 16.00$$

Incidence	Injury	No Injury	
10%	8	18	PPV=31%
	2	72	NPV=97%
30%	24	14	PPV=63%
	6	56	NPV=90%
50%	40	10	PPV=80%
	10	40	NPV=80%
70%	56	6	PPV=90%
	14	24	NPV=63%
90%	72	2	PPV=97%
	18	8	NPV=31%

Key Concepts

“Exposure”

- Volume of participation in activity presenting injury risk
 - Athlete-Exposures (AEs): Number of practices and games
- Any factor associated with outcome (predictive variable)

“Confounding”

- Unequal “exposure” within groups that are compared
 - Gender, Sport, Position, Experience, Injury History, Starter Status
- Example: High performance on screening test of agility associated with injury occurrence
 - Starters possess good agility + exposed to greater injury risk

Key Concepts

“Interaction”

- Observed effect between 2 or more predictive factors that is > or < than either one acting independently

Identification of confounding and interactions:

- Stratified univariable analyses – comparison of odds ratios
 - Breslow-Day test for homogeneity of odds ratios ($P > .10$)
- Multivariable analysis (Logistic Regression; Cox Regression)
 - Effect of a given predictor adjusted for the effects of one or more other predictors (confounding factors must be included)
 - Interaction term (Factor A X Factor B) must be included to quantify its effect

Development of a Prediction Model

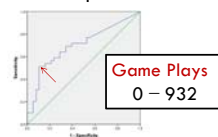
- Process begins with univariable analyses
 - Selection of factors to include in multivariable analysis
 - One-sided test appropriate when focus is whether or not a point estimate exceeds a specified value (e.g., ratio > 1.0)
 - Screening criterion as large as one-sided $P < .20$ or .25
- Multivariable analysis identifies best set of predictors
 - Entry of binary variables permits comparison of univariable ORs to “adjusted” multivariable ORs
 - Logistic regression output: $\text{EXP}(B)$ = Adjusted OR
- Prediction accuracy assessed by univariable analysis
 - Multivariable model converted to binary classification
 - High-Risk vs. Low-Risk status

Continuous Variables vs. Binary Categories (Risk Factor + or -)

Binary Categories: High Risk vs. Low Risk

- Cut-point determined by ROC analysis

N=77
Core or LE Injury
39 Injured; 51%



Game Plays
0 – 932

	Injury	No Injury	Incidence
≥ 289	20	4	83%
< 289	19	34	36%
Total	39	38	

Sensitivity= 51% Specificity= 90%

+LR = 5.30 -LR = 0.49 OR = 8.95



2-Leg Squat
0 – 100

	Injury	No Injury	Incidence
≤ 83	34	23	60%
> 83	5	15	25%
Total	39	38	

Sensitivity= 87% Specificity= 40%

+LR = 1.44 -LR = 0.33 OR = 4.44

Logistic Regression

- Natural log (ln) of "odds" for event occurrence
 - Odds = Probability / 1 - Probability
 - Probability = Odds / 1 + Odds
- $\ln(P/1 - P) = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \dots$
 - ln base e = 2.718
 - $e^1 = e$; $\ln(e) = 1$
 - $e^B = \text{EXP}(B)$ = change in odds for 1-unit increase in X
- For a binary predictive variable (0, 1):
 - $\text{EXP}(B)$ = "Adjusted" Odds Ratio
 - Adjusted for the effects of other predictors included in model

Continuous Variables vs. Binary Categories (Risk Factor + or -)

- Entry as continuous variables:

Variables in the Equation									
	B	S.E.	Wald	df	Sig.	Exp(B)	95% C.I. for EXP(B)		
Step 1 ^a ScoreZLS	-.048	.019	5.844	1	.016	.955	.825	.989	
Plays	.003	.001	7.813	1	.005	1.003	1.001	1.005	
Constant	2.750	1.597	3.876	1	.049	15.639			

a. Variable(s) entered on step 1: ScoreZLS, Plays.

- Model $\chi^2(2) = 16.98$; $P < .001$; Nagelkerke $R^2 = .264$

- Entry as categorical variables:

Variables in the Equation									
	B	S.E.	Wald	df	Sig.	Exp(B)	95% C.I. for EXP(B)		
Step 1 ^a HGameExp(1)	1.985	.631	9.891	1	.002	7.278	2.577	20.550	
LnZLS_B3_33(1)	1.482	.623	5.731	1	.022	4.400	1.881	8.379	
Constant	-1.354	.550	6.066	1	.014	.255			

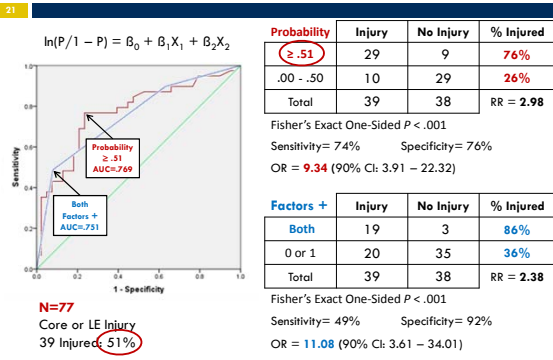
a. Variable(s) entered on step 1: HGameExp, LnZLS_B3_33.

- Model $\chi^2(2) = 9.77$; $P = .008$; Nagelkerke $R^2 = .285$

N=77
Core or LE Injury
39 Injured: 51%

Univariable ORs
8.95
4.44

Continuous Variables vs. Binary Categories (Risk Factor + or -)



Inertial Measurement Unit (IMU)



UTILIZATION OF PRACTICE SESSION AVERAGE INERTIAL LOAD TO QUANTIFY COLLEGE FOOTBALL INJURY RISK

GARY B. WILKINSON,¹ AMRISH GUPTA,² JEFF R. ALLEN,³ CLAY M. KETTLER,⁴ AND MARISA A. COLANTON⁴

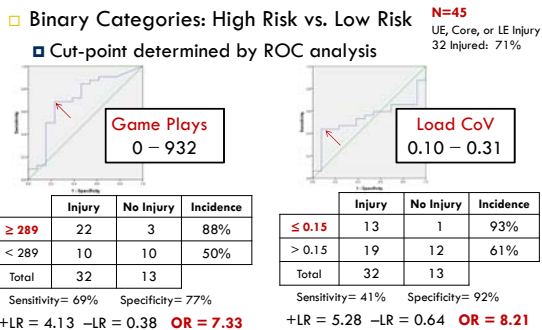
$$\text{Player Load} = \sqrt{((fwd_{i+1} - fwd_{i-1}))^2 + (side_{i+1} - side_{i-1})^2 + (up_{i+1} - up_{i-1})^2}$$

fwd: forward acceleration
side: sideways acceleration
up: upwards acceleration
i: time



- High Player Load value =
High Rate of Change in Acceleration
- Forward - Backward
 - Right - Left
 - Up - Down

Continuous Variables vs. Binary Categories (Risk Factor + or -)



Continuous Variables vs. Binary Categories (Risk Factor + or -)

- Entry as continuous variables:

Variables in the Equation									
	B	S.E.	Wald	df	Sig.	Exp(B)	95% C.I. for EXP(B)		
Step 1 ^a LoadCoV	1.987	7.210	.076	1	.783	7.295	.000	1031842.600	
Plays	.003	.001	3.672	1	.055	1.003	1.000	1.005	
Constant	-.339	1.440	.055	1	.814	.712			

a. Variable(s) entered on step 1: LoadCoV, Plays.

- Model $\chi^2(2) = 4.35$; $P = .114$; Nagelkerke $R^2 = .132$

- Entry as categorical variables:

Variables in the Equation									
	B	S.E.	Wald	df	Sig.	Exp(B)	95% C.I. for EXP(B)		
Step 1 ^a HPlays_289(1)	1.854	.789	5.520	1	.019	6.386	1.744	23.388	
LoadCoV_15(1)	1.906	1.145	2.774	1	.096	6.729	1.024	44.225	
Constant	-.331	.495	.448	1	.503	.719			

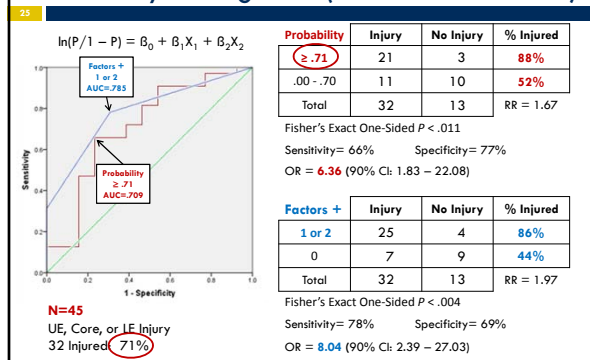
a. Variable(s) entered on step 1: HPlays_289, LoadCoV_15.

- Model $\chi^2(2) = 11.80$; $P = .003$; Nagelkerke $R^2 = .330$

N=45
UE, Core, or LE Injury
32 Injured: 71%

Univariable ORs
7.33
8.21

Continuous Variables vs. Binary Categories (Risk Factor + or -)



Univariable Results – Possible Interactions

26

Variable	Cut-Point	P*	OR	OR 90% CI
A Game Exposure (Plays)	≥ 289	< .001	8.46	2.78, 25.72
Movement Efficiency Score	≤ 82.75	.025	3.16	1.32, 7.58
B 2-Leg Squat	≤ 83.33	.014	3.71	1.51, 9.13
C 2-Leg Squat - Heel Lift	≤ 93.89	.060	2.63	1.07, 6.47
D 1-Leg Squat	≤ 79.16	.005	8.41	2.17, 32.59
E Concussion History	≥ 1	.074	2.84	1.01, 7.98
F Position Category (Back/Line)	†	.355	1.33	0.61, 2.90

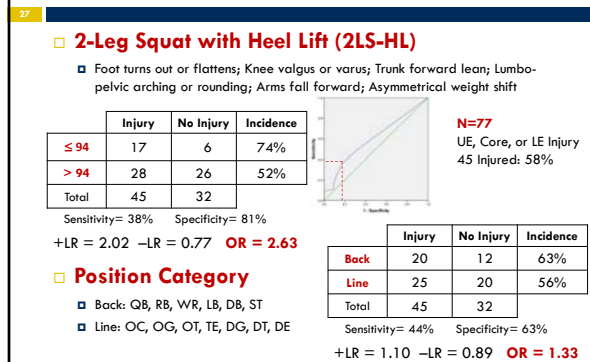
* Fisher's Exact One-Sided Test
† Reference Category = Offensive or Defensive Back Position

6 Factors =
15 2-Way Interactions

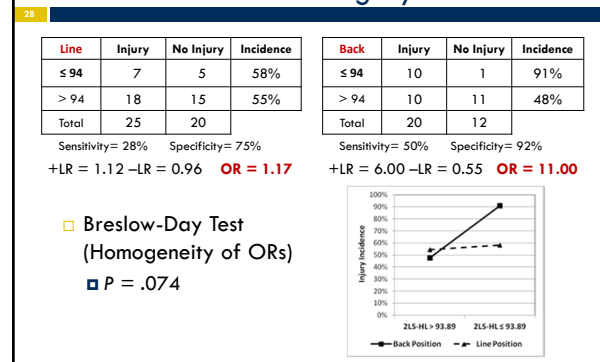
A X B B X C C X D D X E E X F
A X C B X D C X E D X F
A X D B X E C X F
A X E B X F
A X F

N=77
UE, Core, or LE Injury
45 Injured: 58%

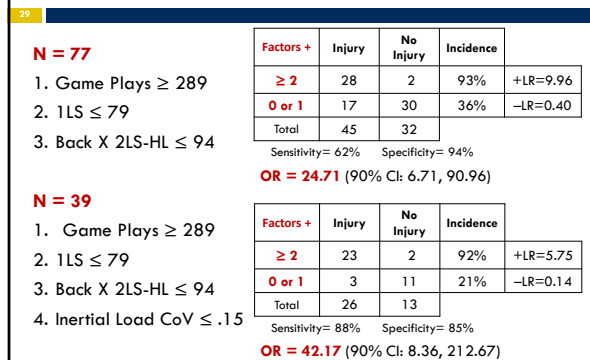
Interaction Effect



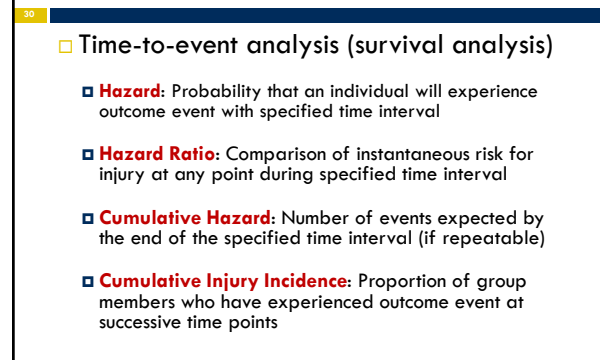
Interaction Effect: 2LS-HL X Position Category



Final Prediction Models



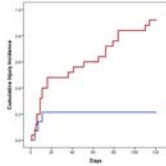
Cox Regression



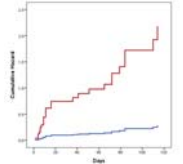
Cox Regression – Binary Prediction

N = 39 4-Factor Prediction Model
 ≥ 2 Positive Factors vs. 0 or 1 Positive Factor
 HR = 7.70 (90% CI: 2.75, 21.57)

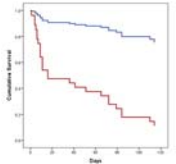
Cumulative Injury Incidence (Observed)



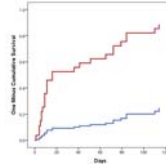
Cumulative Hazard (Predicted Injury Occurrences)



Cumulative Survival (Predicted Injury Avoidance)



1 - Cumulative Survival (Predicted Injury Incidence)



Bahr R, Br J Sports Med. 2016

Why screening tests to predict injury do not work – and probably never will.... a critical review.

At least 3 steps needed to validate a screening test:

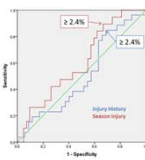
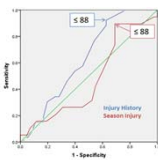
1. A strong relationship must be established between the test result (dichotomous categories) and injury risk
2. Validate the relationship in multiple cohorts (same criteria for high risk classification)
3. Document that an intervention is more beneficial for athletes with high risk than the general athletic population (high risk + low risk)

Retrospective-Pro prospective Analyses of Screening Test Results

- Retrospectively-derived cut-points used to prospectively classify high vs. low risk

High School Football Players N=61

3-Factor Model					
Factor	Cut	Previous Injury		Season Injury	
		OR	Exp(B)	OR	Exp(B)
SFI	≤ 88	4.53	4.42	2.39	1.82
Y-AR%Diff	≥ 2.4	2.52	1.40	3.81	2.92
HTH (s)	≤ 24	2.11	2.23	1.64	1.45
Factors +	≥ 2	3.67	-	5.23	-



Summary

- Model components and cut-points are highly specific to injury definition and cohort characteristics
- Persisting effects of prior injury and volume of exposure to high-risk conditions are potential confounders
- Any strong interactions between potential predictors should be identified and included in multivariable analysis
- Likelihood ratios are better indicators of screening test classification accuracy than PPV and NPV
- Time-to-event analysis of a binary risk classification model may augment evidence of its predictive validity
- Precision of an estimate of exposure-outcome association (RR, HR, or OR) is reflected by confidence interval limits

Gary-Wilkerson@utc.edu