

**ANALYTICAL STUDY OF SPORTS INJURIES IN THE BASKETBALL****Mahmoud Youssef Mohammed**

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*Original scientific paper***Abstract**

*That the incidence of sports injuries in high growing between athletes and this phenomenon is the alarm that threatens the lives of athletes alike and this tells us the need to provide more prevention methods to determine the best methods of treatment and rehabilitation of patients in order to quickly restore recovery and return to action in the shortest possible time. In the context of trying to promote the Union basketball skills and focus on the training centers of the Union and skilled education to reach the highest level of technical and Mhary and my plans, exposing players to injury during training or matches as a result of the difficulty of performance or friction between the players. In that sense, interested researcher to study the phenomenon of sports injuries among basketball players in the Kingdom of Saudi Arabia in the contests first division to reach the controls of the injuries sporting types and locations and causes of injuries to the Centers for various basketball players to utilize a specialist rehabilitation sports, coaches and officials in the clubs to reduce the incidence of injury and avoid them and it is which prompted the researcher to try to find out the sports injuries suffered by players of different centers of basketball. The study aimed to identify the types and locations and causes of differences in the centers of the player sports injuries suffered by basketball players and the use of researcher descriptive method for basketball players registered for season 2010/2011 the Federation of Basketball Saudi Arabia where the number of players (220) player. It was one of the most important results to be the maximum rate of infection with torsion followed by rupture, followed by breakage and less incidence of dislocation highest percentage of sites of injuries were in the knee, followed by the foot, followed by the thigh and lower proportion of the head the highest percentage of infected bone was of the shoulder night is rib cage, followed by the thigh, followed by the leg.*

**Key words:** basketball, centers, injuries

**Introduction**

That the incidence of sports injuries in high growing between athletes and this phenomenon is the alarm, which threatens the lives of athletes and both this shows the need to provide more prevention methods to determine the best methods of treatment and rehabilitation of patients in order to quickly restore recovery and return to action in the shortest possible time (Shata, 1981). According to Adel Hassan (1993) and Mc Carroll (1984) that the injury occur simultaneously with physical activity, called the incidence of sports.

Sport injury and are intended to any defect occurs in the muscles or joints or bones as a result of the exercise of some kind of sports activities, degree to prevent the individual athlete continued his involvement a regular basis (Hassan, 1993; Mc Carroll et al., 1984). Sports, which is characterized by friction and direct points of each of the license Lysens, Frank and Ekstrand et al., that most sports injuries are stationed in the lower limb and injuries sprains and tearing muscles and ligaments was one of the most prevalent from the rest of other injuries (Lysens, 1981; Franke, 1977; Ekstrand et al., 1999). As for sports, which is characterized by indirect contact, such as basketball, said Lunsford (Lunse Ford) injuries that basketball is the twisting of the knee joint Knee sprain, foot and tight muscle rupture and twin hand and bruises and dislocated joints and fractures in the bones of the hand. Wahidi (1995) shows that basketball occupies the second place after the handball between team

sports and more sports injuries common are tears ligaments and more places at risk are stop and over the reasons leading to the injuries in basketball was a non-implementation of the program clear (Ctnawy, 2002). In spite of increasing the means of prevention. Scientific, or process, we still observe a continuous increase in sports injuries came affects sporting achievement and hindered as a result of competing players with themselves or against an opponent, in order to break the world records or get a championship or victory in a match (Salem, 1987; Shata, 1981; Acommrany & Ibrahim, 1988). In an effort Union basketball skills basketball promotion and focus on the training centers and education of the Union highly skilled to reach the highest level of technical and plans for putting the players injured during training or matches as a result of the difficulty of performance or friction between the players.

In that sense, researcher was interested to study the phenomenon of sports injuries among not my game basketball, Saudi Arabia competed in the first division to reach the controls of the injuries sporting types and locations and causes of injuries to the Centers for various basketball players to utilize a specialist rehabilitation sports, coaches and officials of the clubs to reduce the incidence of injury and avoid them, which prompted the researcher to try to find out the sports injuries suffered by the different centers is not my game to basketball.

**Objectives of the research**

The research aims: 1 - identify the types of sports injuries suffered by basketball players; 2 - Identify the places of sports injuries suffered by basketball players; 3 - Understand the differences Binmrakz play for the basketball players; 4 - Identifying the causes of sports injuries for basketball players of sports; Find questions: 1 - What are the types of sports injuries suffered by basketball players? 2 - What are the places of sports injuries suffered by basketball players? 3 - What are the differences between the centers of the players play basketball? 4 - What are the causes of sports injuries for basketball players of sports?

Table 1 Percentages of the types of sports injuries

Type of injury	line of defense ك %		line of midfield ك %		line of d attack ك %		Total ك %	
1 Contusion	24	4.73	45	8.88	63	12.43	132	26.04
2 Ruptures	12	2.37	42	8.28	33	6.51	87	17.16
3 Fractures	21	4.14	21	4.14	6	1.18	48	9.47
4 Sprain	33	6.51	54	10.65	66	13.02	153	30.18
5 Dislocated	12	2.37	18	3.55	12	2.37	42	8.28
6 Dislocated	9	1.78	21	4.14	15	2.96	45	8.88
Total	111	21.89	201	39.64	195	38.46	507	100

Table 2. the presence of the highest injury rate, followed by sprains Alkdm followed by fracture and fragmentation, followed by lower rate of injury to take off.

Discuss the first question. Table 2 shows that the presence of the highest rate of injury for the twisting, where he received a percentage (30.18%), followed by Alkdm where he received a percentage (26.04%), followed by disintegration, where he received a percentage (17.16%) and lowest injury dislocation where he obtained a ratio (8.28 %) researcher finds that the injury and sprains and tear due to friction between the players during the extraction ball joint friction, whether on land or in the air or while trying to pass deception of rival or prevent him from voting or deflect the ball to the basket ring.

And is in line with what indicated by Al-Wahidi (1996) that the highest percentage of the types of sports injuries for basketball players were sprains and bruises, and then rip Almkh then fractures and dislocation (Al-Wahidi, 1996). And refers both Makarov (2004) and Barroff (1998) in that the diversity of injuries may be the result of vehicle movements in the air or on the ground or a fall and impact the basket and tower friction and collision may lead to the occurrence of lacerations and bruises (Makarov, 2004; Barroff, 1998).

Through presentation and discussion of the previous tables have been to answer the first question, which provides on what types of sports injuries suffered by basketball players. The presence of the highest percentage of places in the knee injuries were followed by foot, followed by the thigh and lower proportion of the head. Discuss the second question.

Table 2. Percentages of the places of sports injuries to the players

Type of injury	line of defense		line of midfield		line of d attack		Total	
1	9	2.29	9	2.29	9	2.29	27	6.87
2	0	0	3	0.76	6	1.53	9	2.29
3	9	2.29	12	3.05	15	3.82	36	9.16
4	15	3.82	12	3.05	14	3.56	41	10.43
5	3	0.76	9	2.29	0	0	12	3.05
6	12	3.05	12	3.05	3	0.76	27	6.87
7	15	3.82	18	4.58	9	2.29	42	10.69
8	27	6.87	9	2.29	15	3.82	99	26.98
9	6	1.53	9	2.29	15	3.82	30	7.63
1	18	4.58	21	5.34	15	3.82	54	13.74
1	8	2.18	15	2.18	31	2.18	14	6.28
	132	33.59	129	32.82	132	33.59	393	100

Table (3) that the highest percentage of sites of injuries were in the knee where she earned a percentage (26.98%), followed by foot where she earned a percentage (13.74%), followed by the thigh where she earned a percentage (10.69%) and lowest injury to the head where I got on the ratio (2.29%) attribute the researcher the spread of injured knee of basketball players to perform skills that require moving at high speed in different directions to try to pass opposing and changing the conditions of the body from rest to movement and vice versa at full speed. indicates both Samir, Riyadh (1987) and Al-Zoghbi (1995) that the effort aspirated for basketball players put a great burden on the joints, especially the knee joint, leading to an injured knee (Samir et al., 1987; Al-Zoghbi, 1995) suggests that the injuries of the knee obtained the ratio (0.5 %) and the ankle received a percentage (0.41%) and got a hip ratio (0.35%) (Al-Wahidi, 1996). Through presentation and discussion of the previous tables have been the answer to the second question, which reads as sports injuries are the places that are exposed to basketball players. Table 3 shows that the existence of significant differences in Alkdm where he received a percentage (26.04) in favor of the line of attack, and in the rupture, where he received a percentage (17.16%) in favor of the middle center, and in the fracture, where he received a percentage (9.47%) in favor of the line of the back and center, and in torsion, where he received a percentage (30.18) in favor of the attack line, and in the dislocation, where he received a percentage (8.28%) in favor of the midfield, and in the contraction, where he received a percentage (8.88%).

Table 3. Differences and percentages of the types of sports injuries to players

	Total		line of d attack		line of midfield		line of defense		Type of injury	
	%	ك	%	ك	%	ك	%	ك		
131	26.04	132	12.43	63	8.88	45	4.73	24	Contusion	1
86	17.16	87	6.51	33	8.28	42	2.37	12	Ruptures	2
47	9.47	48	1.18	6	4.14	21	4.14	21	Fractures	3
33	30.18	153	13.02	66	10.65	54	6.51	33	Sprain	4
41	8.28	42	2.37	12	3.55	18	2.37	12	Dislocated	5
44	8.88	45	2.96	15	4.14	21	1.78	9	Dislocated	6
	100.00	507	38.46	195	39.64	201	21.89	111	Total	

Table 4. Differences and percentages to places of sports injuries to players

Type of injury	line of defense		line of midfield		line of d attack		Total		2س
	ك	%	ك	%	ك	%	ك	%	
1	9	2.29	9	2.29	9	2.29	27	6.87	0
2	0	0	3	0.76	6	1.53	9	2.29	9
3	9	2.29	12	3.05	15	3.82	36	9.16	35
4	15	3.82	12	3.05	14	3.56	41	10.43	40
5	3	0.76	9	2.29	0	0	12	3.05	11
6	12	3.05	12	3.05	3	0.76	27	6.87	26
7	15	3.82	18	4.58	9	2.29	42	10.69	41
8	27	6.87	9	2.29	15	3.82	99	0.9812	50
9	6	1.53	9	2.29	15	3.82	30	7.63	29
10	18	4.58	21	5.34	15	3.82	54	13.74	7
11	81	2.18	15	2.18	31	2.18	64	6.281	63
	132	33.59	129	32.82	132	33.59	393	100	

Table 5. Differences and percentages of bone injury

type of injury	line of defense		line of midfield		line of d attack		Total		2س
	ك	%	ك	%	ك	%	ك	%	
1	6	7.69	0	0	0	0	6	7.69	0
2	9	11.54	3	3.85	6	7.69	18	23.08	17
3	3	3.85	12	15.38	3	3.85	18	23.08	17
4	3	3.85	6	7.69	6	7.69	15	19.23	14
5	9	11.54	3	3.85	3	3.85	15	19.23	14
6	0	0	3	3.85	3	3.85	6	7.69	6
	30	38.46	27	34.62	21	26.92	78	100	

Table 6. Differences and percentages of muscle injury to players

Type of injury	line of defense		line of midfield		line of d attack		Total		س
	ك	%	ك	%	ك	%	ك	%	
1	0	0	3	1.03	0	0	3	1.03	3
2	9	3.08	6	2.05	9	3.08	24	8.22	23
3	18	6.16	28	9.59	18	6.16	64	21.92	63
4	21	7.19	36	12.33	24	8.22	81	27.74	80
5	12	4.11	9	3.08	9	3.08	30	10.27	29
6	6	2.05	3	1.03	12	4.11	21	7.19	20
7	24	8.22	21	7.19	24	8.22	69	23.63	68
	90	30.82	106	36.3	96	32.88	292	100	

Table 7. Differences and percentages of the ligaments of the infected players

Type of injury	line of defense		line of midfield		line of d attack		Total		س
	ك	%	ك	%	ك	%	ك	%	
1	9	3.95	3	1.32	9	3.95	21	8.33	20
2	0	0	6	2.63	3	1.32	9	3.57	9
3	12	5.26	5	2.19	6	2.63	23	9.13	33
4	6	2.63	6	2.63	6	2.63	18	7.14	0
5	6	2.63	6	2.63	6	2.63	18	7.14	0
6	6	2.63	9	3.95	9	3.95	24	9.52	23
7	0	0	0	0	9	3.95	9	3.57	9
8	30	13.16	43	18.86	57	25	130	51.59	129
	69	30.26	78	34.21	105	46.05	252	100	

Table 8. Differences and the percentage of infected joints of the players

Type of injury	line of defense		line of midfield		line of d attack		Total		س
	ك	%	ك	%	ك	%	ك	%	
1	6	2.25	9	3.37	9	3.37	24	8.99	23
2	6	2.25	29	10.86	6	2.25	41	15.36	40
3	6	2.25	3	1.12	6	2.25	15	5.62	14
4	9	3.37	3	1.12	0	0	12	4.49	11
5	15	5.62	18	6.74	6	2.25	39	14.61	38
6	36	13.48	42	15.73	58	21.72	136	50.94	135
	78	29.21	104	38.95	85	31.84	267	100	

For the midfield. This is consistent with that indicated by the Makarov (2004), Barroff (1998) in that the diversity of movements may be vehicle movements in the air or on the ground or falling crash tower and basketball, friction and collision may lead to the occurrence of lacerations and bruises (Barroff, 1998; Makarov, 2004). Table 4 shows the existence of significant differences in Aaketv. where he received a percentage (9.16%) in favor of the line of attack, and in the hand where he received a percentage (10.43%) in favor of the line of defense, and in the chest where he received a percentage (3.05%) in favor of the line center, and in the annex where he obtained a ratio (6.87) in favor of the midfield, and in the groin, where he received a percentage (10.69%) in favor of the midfield, and in the knee where he received a percentage (12.98%). For the line of defense. , And in the leg where he obtained a ratio (7.63) in favor of the line of attack, and in football where he earned a percentage (13.74%) in favor of the midfield, and in the afternoon where he received a percentage (16.28%). For the attack. This is because the researcher that the highest percentage of injury of the knee as a result of performance of the skill and requirements of tactical movements and camouflage and deception coming from the joints in addition to the weight of the body is a load heavily on Aalrkph and leads to an imbalance in the balance, the gymnast's body as a result of Saddam's rival body of the other player or subscribe to the wrong way which affects the joints of the knee, foot and thigh. Table 5 shows the existence of significant differences in the bones of the shoulder where he earned a percentage (23.08%) in favor of the line of defense, and in the bones of the rib cage where he earned a percentage (23.08%) in favor of the center of defense, and in the femurs, where he received a percentage (19.23% ) in favor of the midfield and attack, and in the bones of the leg where he obtained a ratio (19.23) for the line of defense, and in the bones of the foot, where he received a percentage (7.69%) in favor of the midfield and attack. indicates Majid sink and Abdul-Hamid (1996) to that of the most important injuries bone Trauma where she earned a percentage (0.34%) of total injuries and fractures, where she earned a percentage (0.40%) of the total injuries Aleraadih (Al-Wahidi, 1996) suggests Mahmoud (2002) to that of the most important injuries, bone fractures, where she earned a rate (1.65 %) of the total injuries (Salem, 1987). Table 6 shows statistically significant differences in the muscles of the chest where he received a percentage (1.03%) in favor of the midfield, and in the muscles where he received a percentage (8.22%) in favor of the center of defense and attack, and in the muscles of the thigh front, where he received a percentage (21.92 %) in favor of the midfield, and in the muscles of the thigh Aalkhalafah where he received a percentage (27.74%) in favor of the midfield, and in the muscles of the leg where he obtained a ratio (10.27) for the line of defense, and in the muscles of the abdomen, where he received a percentage (7.19%) in favor of the line of attack.

Table 7 shows statistically significant differences in the ligaments of the shoulder, where he received a percentage (8.33%) for the line of defense and attack, and in the ligaments of the facility where he received a percentage (3.57%) in favor of the midfield, and in the ligaments of the thigh where he received a percentage (9.13% ) for the line of defense, and in the anterior cruciate ligament where he obtained a ratio (9.52) in favor of the midfield and attack, and in the Crusader Alrlebat the rear, where he received a percentage (3.75%) in favor of the line of attack. In the ligaments of the ankle where he received a percentage (51.59%) in favor of the line of attack. Results agree with the findings of Abdul-Hamid and Al-Wahidi (1996) that the ligament ruptures were more common in basketball, and that this injury from injuries distinctive in this game may be the result of poor physical and technical preparation.

Table 8 shows the existence of significant differences in the shoulder joint, where he received a percentage (8.99%) in favor of the midfield and attack, and in the detailed wrist where he earned a percentage (15.36%) in favor of the midfield, and in the elbow joint where he obtained a ratio (5.62 %) in favor of the line of defense and attack, and in the hip, where he received a percentage (4.49%) for the line of defense, and in the knee joint where he received a percentage (14.61%) in favor of midfield. At the ankle, where he received a percentage (50.94%) in favor of midfield. This is because the researcher that the high incidence of violent physical effort to the effort to extract the ball from the opponent or passing or dribbling of rival movements that require the same power and speed to perform its functions and physical skills and appropriate implementation of the plan of the positions in the game.

And refers both Samir, Riyadh (1987) and Al-Zoghbi (1995) that the injury ankle for basketball players to perform skills that require moving at high speed in different directions to try to pass opposing and changing the conditions of the body from sleep to the movement as quickly as and sleep on the floor to jump up high to correct the ball or to cut the ball on the ring, basketball and Performance of these skills puts a great burden on the joints, especially the ankle and knee, leading to an injured foot and knee (Samir et al., 1987; Al-Zoghbi, 1995). Through presentation and discussion of the previous tables have been the answer to the third question, which provides for the What are the differences between the centers of the players play basketball. Table 10 shows that a higher proportion of the causes of sports injuries in the match, followed by a period of physical preparation, followed by overload, followed by violation of the laws and decisions of the referee, followed by lack of attention to physical fitness, followed by friction induced between the players and found a lower rate of occurrence of injury is the lighting is adequate, followed by play with the school term

Table 9 Proportions

	line of defense	line of midfield	line of attack	Total
1	2.10	3.73	2.49	8.31
2	3.73	4.90	4.90	13.52
3	0.70	0.93	1.63	3.26
4	1.40	2.10	2.33	5.83
5	1.17	2.33	3.03	6.53
6	1.55	1.86	2.10	5.52
7	0.47	1.63	0.93	3.03
8	2.87	1.63	1.63	6.14
9	0.23	0.78	0.23	1.24
10	0.47	0.70	0.23	1.40
11	0.93	1.17	1.40	3.50
12	0.23	1.63	1.86	3.73
13	0.70	1.71	1.63	4.04
14	1.40	0.93	1.40	3.73
15	0.47	0.70	1.40	2.56
16	0.00	0.47	0.08	0.54
17	0.23	0.47	0.23	0.93
18	1.63	1.86	2.10	5.59
19	1.71	1.17	2.33	5.21
20	0.70	0.23	0.70	1.63
21	0.70	0.23	1.40	2.33
22	0.47	1.17	1.63	3.26
23	0.47	0.70	1.40	2.56
24	0.23	0.47	1.17	1.86
25	0.93	0.23	1.63	2.80
26	0.00	0.00	0.93	0.93
27	25.49	33.72	40.79	100.

Discuss the results of the third question. From the agenda (10) found that the highest percentage of the causes of sports injuries are the injuries occurring in the period of games hitting percentage (13.52%), followed during the run (Shata, 1981), followed by overload training and attribute the researcher that the spread of infections in the game of basketball in the period matches and during the run and overload due to poor planning of the. Altdrbh which indicates the lack of rehabilitation educators in program development and training plans. Followed by a violation of the laws and resolutions of the rule 05.59%) and the sees Al-Aboud (2000) that the injuries may occur as a result of conduct non-athletes may occur as a result indulgence rulers or low level (Aboud, 2000) and indicates Alawadly (1999) that the ruling an important role in reducing incidence, as it should be quick and firm decisions and must call medical team speed or stop the game or cancel the match in cases that require in order to preserve the integrity of the players (Alawadly, 1999). Followed by lack of attention to physical fitness (5.52%), followed by friction induced between players (5.21%) and the sees Aboud (2000) that many of the injuries that occur in competition caused by

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roughness deliberate between the players (Aboud, 2000) as suggests Fathi (1982) that increases the likelihood of injuries in sports activities, which is characterized by direct friction between the players or the tool or device used (Abdel-Rahman, 1991). Through presentation and discussion of the previous tables have been the answer to the question the fourth, which provides for what are the causes of sports injuries for basketball players?

## Conclusions

### General:

- 1) the highest rate of injury, followed by sprains Alkdm followed by fracture and fragmentation, followed by lower rate of injury to take off
- 2) the highest percentage of places in the knee injuries were followed by foot, followed by the thigh and lower proportion of the head
- 3) the highest rate of injury of the shoulder bone was night is followed by the rib cage, followed by thigh leg
- 4) the highest percentage of injured muscles was followed by the thigh muscles of the back, followed by the front leg
- 5) the highest rate of injury to the ligaments of the ankle ligaments, followed by the thigh, followed by shoulder ligament
- 6) the highest rate of injury to the joints of the ankle, followed by wrist, followed by the knee, followed by shoulder
- 7) the highest proportion of the causes of sports injuries in the match, followed by the run, followed by physical overload, followed by violation of the laws and decisions of the referee, followed by lack of attention to physical fitness, followed by deliberate friction between the players

### Recommendations:

- 1) a comparative study between the centers of the different players playing basketball,
- 2) a comparative study between Alaibn and Alaabat first division in basketball,
- 3) a comparative study between Alaibn and Alaabat in junior basketball,
- 4) the need to rely on trained Mohlin and graduates of Physical Education with experience in the field of basketball,
- 5) the need to develop the field of sports medicine doctors, specialist rehabilitation and physical therapy and the participation of the Federation of Sports Medicine to perform his duties.
- 6) rehabilitation of the weight of intense sessions of the rulers of the high level of arbitration.

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## ANALITIČKA STUDIJA SPORTSKIH POVREDA U KOŠARCI

### Sažetak

Čini se da incidencija sportskih povreda među sportašima raste i ta pojava predstavlja alarm koji pokazuje ugroženost čivota sportaša i govori nam o potrebi primjene više preventivnih metoda radi utvrđivanja najboljih načina tretmana i rehabilitacije pacijenata u skladu s namjerom brzog oporavka i povratka na teren u najkraćem mogućem vremenu. U kontekstu namjere pokušaja promidžbe projekta Unije basketball skills i fokusiranja na trening centara u Uniji, i obuke vještina kako bi se premostila najviša razina tehnike, igrači su praćeni u akcijama pa time i povredama za vrijeme treninga i utakmica kao rezultata težine izvedbe ili kontakta između igrača. U tom smislu istraživača je u studiji zanimao fenomen sportskih povreda košarkaša Kraljevstva Saudijske Arabije u kontekstu Prve lige radi postizanja nadzora povreda, vrsta povreda, lokacije i uzroka kod centara za različite igrače kako bi se utilizirala specijalistička rehabilitacija, upoznao trenera i druge u klubu radi redukcije incidencije i izbjegavanja povreda, i to kod centara različitih sredina. Studija je ciljana na identifikaciju tipova i lokacija povreda i različite uzroke, te je korištena deskriptivna metoda za igrače registrirane u sezoni 2010/2011 u Košarkaškoj Federaciji Saudijske Arabije sa ukupno 220 igrača. Jedan od najvažnijih rezultata je da je najviše bilo incidencije torzije koje prate rupture, koje opet prate lomovi i manje incidencije dislokacije, nadalje manja proporcija povreda ramena, te noge.

**Ključne riječi:** košarka, centri, povrede

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