

Mechanisms of
Hamstring Injury in
Professional Soccer
Players: Video Analysis
and MRI Findings

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Disclosures:

We have no conflicts of interests to disclose.



Background

- Hamstring injuries are common in sports requiring sprinting, stretching, jumping and sudden turns.^{1,2}
- There is a paucity of information on the precise mechanisms of hamstring injuries in soccer players.^{3,4}
- The objective was to describe the injury mechanisms and magnetic resonance imaging (MRI) findings in acute hamstring injuries of male soccer players using a systematic video analysis.



Design and setting

- This is a descriptive case series study of consecutive acute hamstring injuries from September 2017 to January 2022.
- All subjects were patients of two specialized sports medicine hospitals.



Participants

 Professional male soccer players aged between 18-40 years, referred for injury assessment within 7 days after an acute hamstring injury, with an available video footage of the injury and positive finding on MRI.





Methods

- Two authors completed the specific hamstring questionnaire based on standardized scoring forms.
- Hamstring injury mechanisms and their relation to hamstring muscle injury MRI findings were analyzed.
- Main outcome measures were hamstring injury mechanism (playing situation, player/opponent behavior, movement, and biomechanics) and MRI injury location.



Results

- 14 videos of acute hamstring injuries in 13 professional male soccer players were analyzed.
- Three different injury mechanisms were seen:
 mixed-type (both sprint-related and stretch-related,
 43%), stretch-type (36%), and sprint-type (21%).
- Most common actions during injury moments were change of direction (29%), kicking (29%), and running (21%).





Sprint-type injuries: (A) Proximal BF injury; (B) Proximal BF injury:

(A) Froximal Br injury,(B) Proximal BF injury;(C) Proximal BF injury.





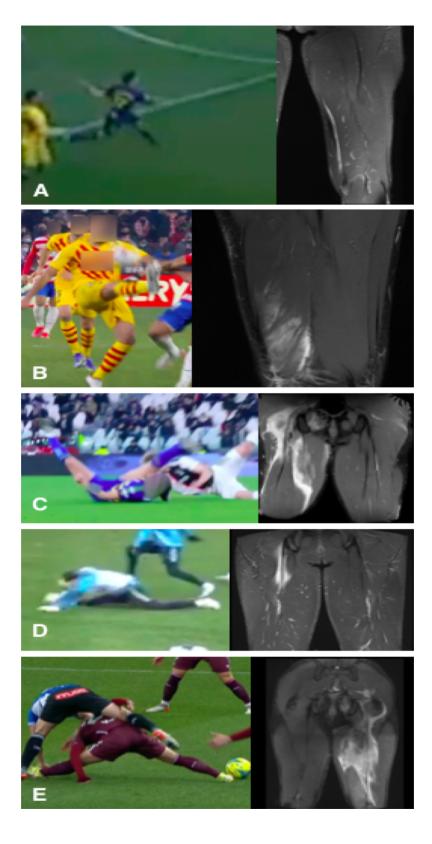




Stretch-type injuries:

(A) Distal semimembranosus
(SM) injury;
(B) Distal BF injury of the myotendinous junction (MTJ);
(C) Proximal BF + semitendinosus (ST) avulsion;
(D) Proximal SM injury;

(E) Proximal BF + ST avulsion.

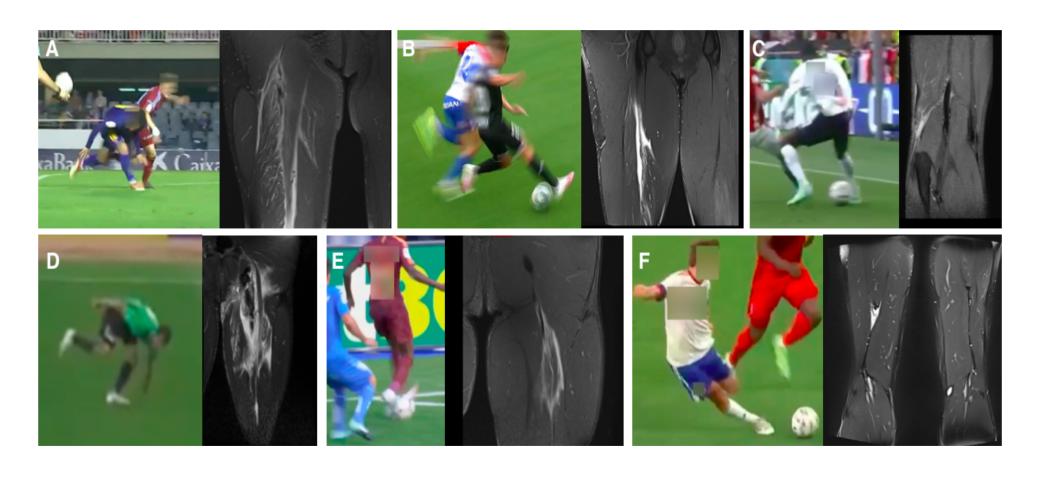


Results

- Most injuries occurred at high or very high horizontal speed (71%) and affected isolated proximal biceps femoris (36%).
- Most frequent body positions at defined injury moments were neutral trunk (43%), hip flexion 45°-90° (57%), and knee flexion <45° (93%).
- MRI findings showed that 79% were isolated singletendon injuries.



Mixed-type injuries: (A) Proximal BF injury; (B) Mid-thigh SM injury; (C) Distal BF avulsion; (D) Proximal BF + ST avulsion; (E) Proximal BF injury; (F) Distal ST injury of the MTJ.





Conclusions

- According to video analysis, most hamstring injuries in soccer occur during high-speed movements.
- Physicians should suspect proximal and isolated single-tendon – most often biceps femoris hamstring injury, if represented injury mechanisms are seen during game play.
- In addition to sprinting and stretching, also mixedtype injury mechanisms occur.





References

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