

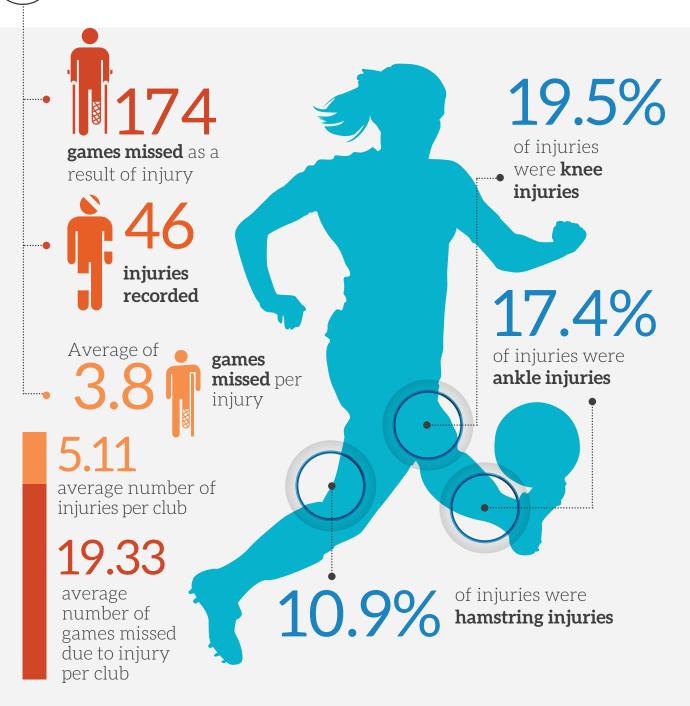
CONTENTS

Executive Summary	3
About the PFA W-League Injury Report	1
The 2015/16 Season Overview	ó
Location Of Injuries	3
Knee Injuries in the W-League1	LC
Comparison with Previous Seasons1	2
Future Directions1	.3
Proposed W-League Minimum Medical Standards	L4



SUPPORTING THE PLAYERS. BUILDING THE GAME.

1 EXECUTIVE SUMMARY



2 ABOUT THE PFA W-LEAGUE INJURY REPORT

Background

The W-League was introduced in 2008.

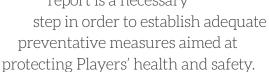
The 2015/16 season saw the competition expand from 8 teams and 12 rounds to 9 teams that played a total of 14 rounds

(exclusive of the Finals Series games).



The monitoring of the occurrence of musculoskeletal

injuries (bones, joints, ligament, muscles, tendons) as described in this report is a necessary



By utilising the information described in this report, the PFA endeavoured to describe the trend of injury occurrence in the W-League and to identify potential injury patterns.



Methodology

During the 2015/16 W-League Season, the PFA collected and recorded the occurrence of (time-loss) injuries for all Players.

The PFA W-League Injury Report was formulated from publicly available injury data accessible through the following key sources:



Football Federation Australia (FFA) weekly W-League match previews



Official W-League Club match previews/reviews



Official media releases



Official websites



Player feedback

All W-League Clubs and Players were monitored over the whole season. In order for the PFA W-League Injury Report to be as balanced as possible, the games that made up the W-League Finals Series are not included in the report.

Data collection involved for each club included:

number of injuries

injury location official games missed due to injury

In this report, the definition of injury is slightly adapted from the accepted consensus statement. The PFA W-League Injury Report defines injury as any physical complaint which was sustained during a competitive game or training that resulted in a Player being unable to take part in, at a minimum, the Player's next official game. Based on the data collected, descriptive analyses were conducted.

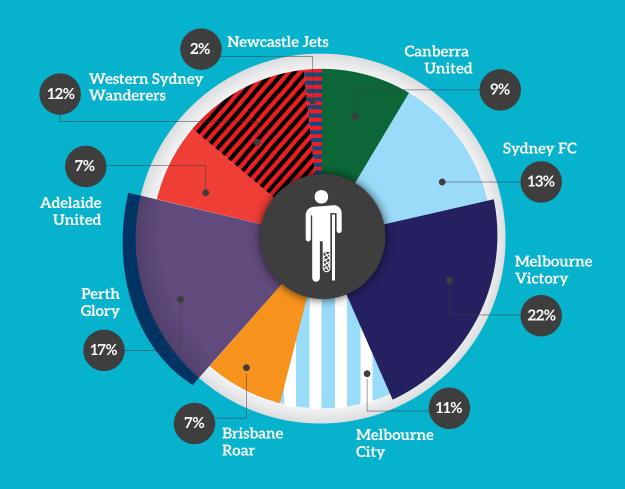


Important
Note: The
accuracy
of the PFA
W-League Injury
Report's results
and analysis relied
on the accuracy of the
sources of information
from which it was derived.
Accordingly, the PFA does
not warrant that the results
are an exact and complete
record of Player injuries. They are,
however, an accurate summation
of the publicly available information
rovided by the FFA and club sources.
Is report does not include injuries
restricted whilst playing for the

THE 2015/16 SEASON OVERVIEW



Percentage of games missed through injury





19.33 Averagame injury

Average number of games missed due to injury per club



Melbourne City

No. of injuries: 2 Games missed: 19 Injury rank: 6 Table position: 1



Newcastle Jets

No. of injuries: 3 Games missed: 3 Injury rank: 1 Table position: 6



Canberra United

No. of Injuries: 5 Games missed: 15 Injury rank: 3 Table position: 2



Western Sydney Wanderers

No. of injuries: 7 Games missed: 21 Injury rank: 5 Table position: 7



Sydney FC

No. of injuries: 5 Games missed: 23 Injury rank: 7 Table position: 3



Perth Glory

No. of injuries: 11 Games missed: 30 Injury rank: 8 Table position: 8



Brisbane Roar

No. of injuries: 2 Games missed: 13 Injury rank: 4 Table position: 4



Melbourne Victory

No. of injuries: 7 Games missed: 37 Injury rank: 9 Table position: 9



Adelaide United

No. of injuries: 4 Games missed: 13 Injury rank: 2 Table position: 5

LOCATION OF INJURIES



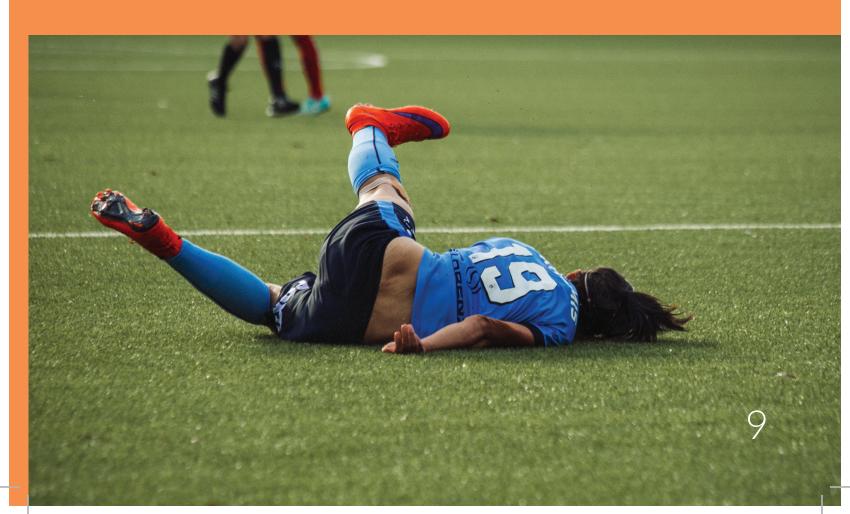
% of overall injuries

Hand:



% of games missed

Knee:	40.8
Groin:	1.72
Ankle:	13.8
Quad:	2.9
Hamstring:	4.6
Calf:	4.02
Hip:	0.57
Toe:	4.02
Back:	0.57
Glute:	0.57
Hand:	0.57
Foot:	8.62
Leg:	1.15
Shoulder:	3.45
Concussion:	8.05
Achilles:	2.3
Eye:	1.72
Nose:	0.57

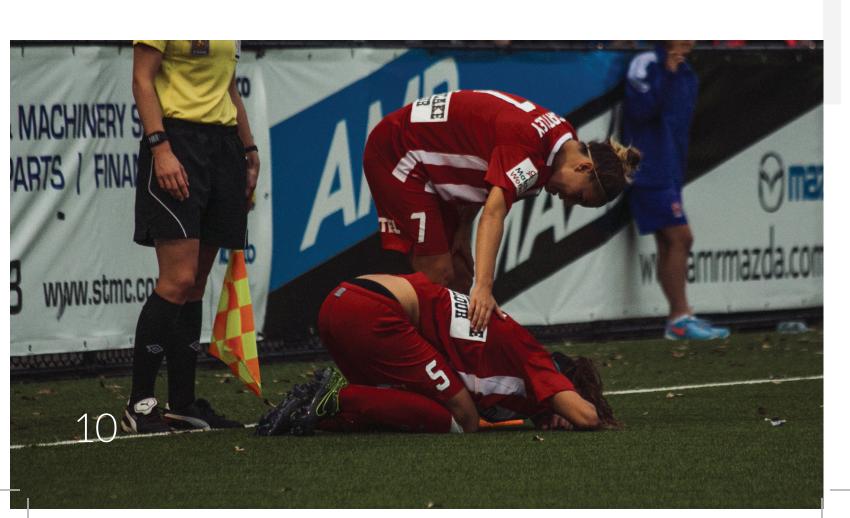


5 KNEE INJURIES IN THE W-LEAGUE

According to the latest scientific literature, female Players are especially at risk of knee injuries,

being **2 to 10 times more likely than men** to suffer from an anterior cruciate ligament (ACL) injury. With regard to the long lasting absence in training / competition, potential surgery and rehabilitation, an ACL injury is seen as one of the most severe in football. The highest risk for ACL injury in female Players is due to three main reasons:

- Biomechanical (unfavourable hipknee-ankle joints alignment when landing);
- ""• Neuromuscular (control and coordination of knee joint);
- -----• Hormonal.



Number of knee injuries per club



















Games missed as a result of knee injuries

has more than doubled on last season's

total, rising from 35 games for the 2014

season to 71 for the 2015/16 season.



Comparison with Previous Seasons

174
games missed
through injury

Type of Injuries

46
Injuries recorded

2014 Season

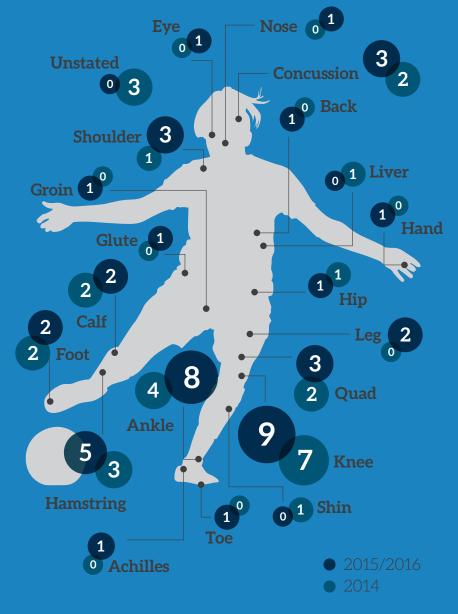
75
games missed
through injury

29 Injuries recorded

2013/14 Season

154
games missed
through injury

Injuries recorded



FUTURE DIRECTIONS

Even with the introduction of a new team, the total number of injuries and games missed as a result of injury has significantly increased from the 2014 season. Games missed as a result of knee injuries have doubled in comparison to last season and accounted for 40.8% of all games missed.

Based on the past three editions of the PFA W-League Injury Report, scientific knowledge and the PFA's experience gathered through a decade of A-League injury reporting, several recommendations must be considered in order to protect players' health and safety in future W-League seasons:

- A healthy and safe working (training and competition) environment should be prioritised in all Clubs, especially those where Players are not exposed to a consistent standard/type of training and playing surfaces;
- Introduction of Minimum Medical Standards through a W-League collective bargaining agreement, which has been shown effective in the A-League for the reduction of musculoskeletal injuries;
- Introduction of a pre-competition medical assessment for all Players.
 Assessments should be the same from one club to another;
- A more consistent approach to the number of pitches the Players are required to perform on; and
- A proper balance between the domestic competition schedule and the continental/international competition schedule in order to avoid game congestion and overload.

PROPOSED W-LEAGUE MINIMUM MEDICAL STANDARDS

The PFA proposes the introduction of the following W-League Minimum Medical Standards.



Medical Testing

Prior to the commencement of each season, each Club shall complete a Medical Assessment (incorporating the Lausanne Recommendations or equivalent) on all Players in their squad.



Club Physician

Each Club will have a certified specialist sports physician.



Club Trainers

All trainers shall hold a Sports Trainer Level 2 certification from Sports Medicine Australia or a tertiary qualification in Sports Conditioning.



Club Physiotherapists

Each Club shall have a registered physiotherapist available to Players immediately prior to and after training and at all matches.



Player Medical Records

Club doctors, physiotherapists, and trainers shall keep accurate records of Players' injuries, illnesses, physical complaints, diagnostic tests, medical advice provided and treatment.



Player's Right to a Surgeon of Her Choice

A Player will have the right to choose the surgeon who will perform surgery provided that: (a) if possible, the Player will consult with the Club physician, and (b) the Player will give due consideration to the Club physician's recommendations.



Player's Right to a Second Opinion

A Player will have the right to a second medical opinion by a medical practitioner of her choosing.

COURAGE WORLD CLASS INTELLIGENCE TRUST RESPECT



Professional Footballers Australia Inc.

221/757 Bourke Street, Victoria, 3008 Email: info@pfa.net.au Tel: 1300 650 497





@thepfa 📵 @thepfa







