

# Sports Medicine Research at CHCO

**David R. Howell PhD, ATC**

Lead Researcher, CHCO Sports Medicine Center

Assistant Professor & Director of Clinical Research, CU Orthopedics



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# Research Mission

Through the research program at the Sports Medicine Center at Children's Hospital Colorado, we seek to positively influence clinical practice through high quality scientific work with clinical relevance.

Through this work, we strive to be an established center of excellence for research in pediatric sports medicine



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# Research Team Members

**Lead Researcher:** David Howell

**Physician Researchers:** Jay Albright, Curt Vandenberg, Aubrey Armento, Julie Wilson, Greg Walker, Emily Sweeney

## Research Assistants



Hannah Rossing



Claire Giachino



Savannah Troyer

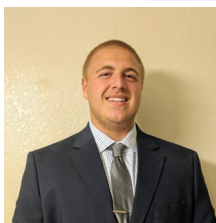


Madi Brna



Samantha Magliato

## PhD Students



Mathew Wingerson



Kate Smulligan

# Objectives

1. To describe the growth in research productivity in the past five years.
2. To describe the several active areas of research among our sports medicine research group.



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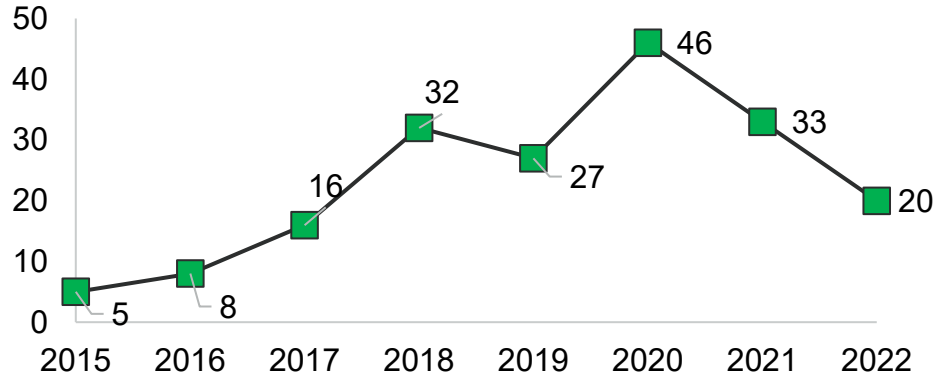
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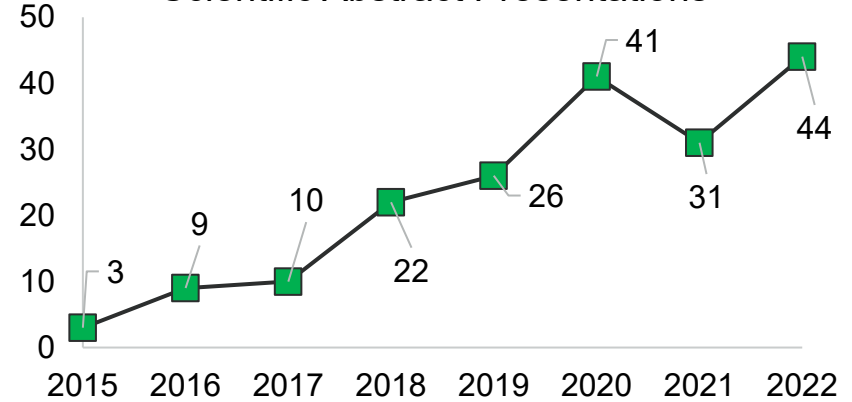
# Research Productivity

## Manuscripts



Total = 174 (Past 5 years)

## Scientific Abstract Presentations



Total = 200 (Past 5 years)



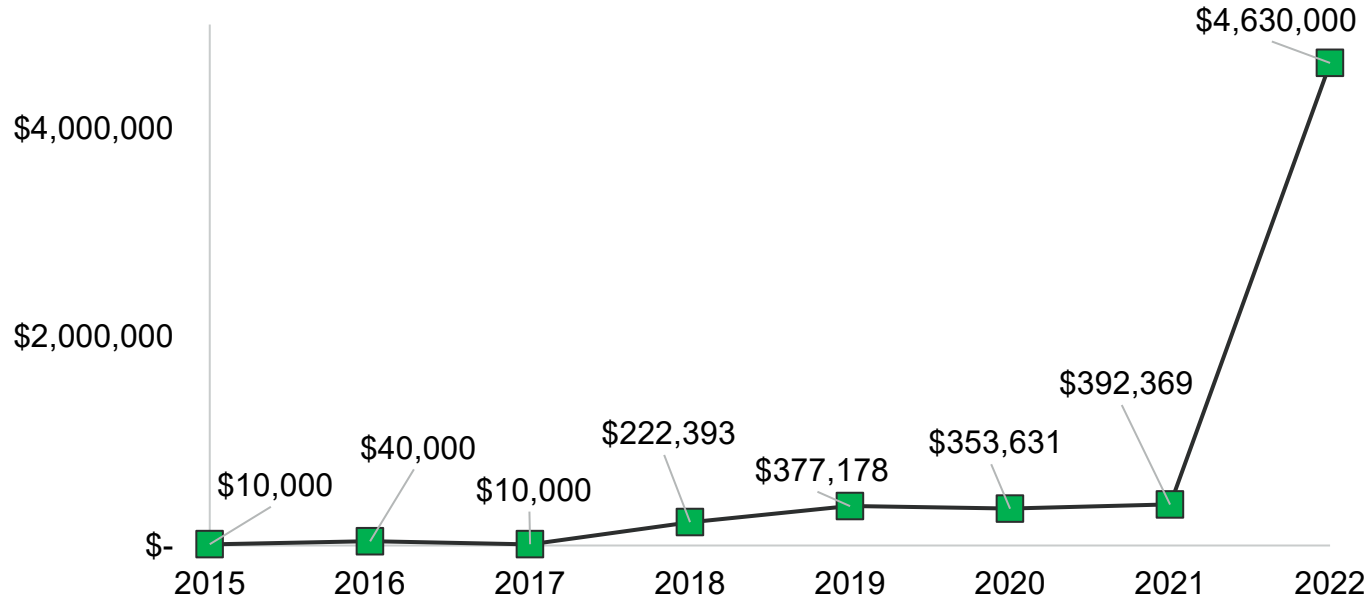
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# Extramural Grant Support



Total = \$6 million (past 5 years)



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# Current Extramural Grant Support

## Smith+Nephew

**PI: Jay Albright, MD**

“Werewolf FLOW 50 During ACL Reconstruction: A Randomized Control Trial”



**PI: Emily Sweeney, MD**

“Back in the Game: An Immediate Functional Progression Program for Adolescent Athletes with Spondylolysis: A Multi-Center Randomized Pilot Trial”



**Ludeman Family Center for Women's Health Research**

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**PI: Aubrey Armento, MD**

“Menstrual profiles and cardiovascular disease risk among female adolescent athletes with and without menstrual irregularities”



*Eunice Kennedy Shriver* National Institute of Child Health and Human Development

**PI: David Howell, PhD | Co-I: Julie Wilson, MD**

“Modulating Exercise Dosage to Improve Concussion Rehabilitation: A Randomized Clinical Trial”



DEPARTMENT OF THE AIR FORCE  
59TH MEDICAL WING (AETC)  
JOINT BASE SAN ANTONIO - LACKLAND TEXAS



**PI: David Howell, PhD | Co-I: Julie Wilson, MD**

“Tele-Rehabilitation to Improve Mild Traumatic Brain Injury Recovery and Reduce Subsequent Injury Risk”



Colorado Clinical and Translational Sciences Institute (CCTSI)

UNIVERSITY OF COLORADO DENVER | ANSCHUTZ MEDICAL CAMPUS

**PI: David Howell, PhD | Co-I: Julie Wilson, MD**

“Understanding How Sleep Health Affects Recovery from Adolescent Concussion”

# Areas of Expertise

- Female athlete & bone health
- Gymnast health & low back pain
- ACL techniques and outcomes
- Early youth sports specialization
- Concussion assessment and intervention



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Aubrey Armento, MD

# Adolescent Female Athletes

**Table 3. Multivariable Regression Results for PROMIS Outcomes Among Female Adolescent Athletes With and Those Without Menstrual Dysfunction, Adjusted for Age and Body Mass Index**

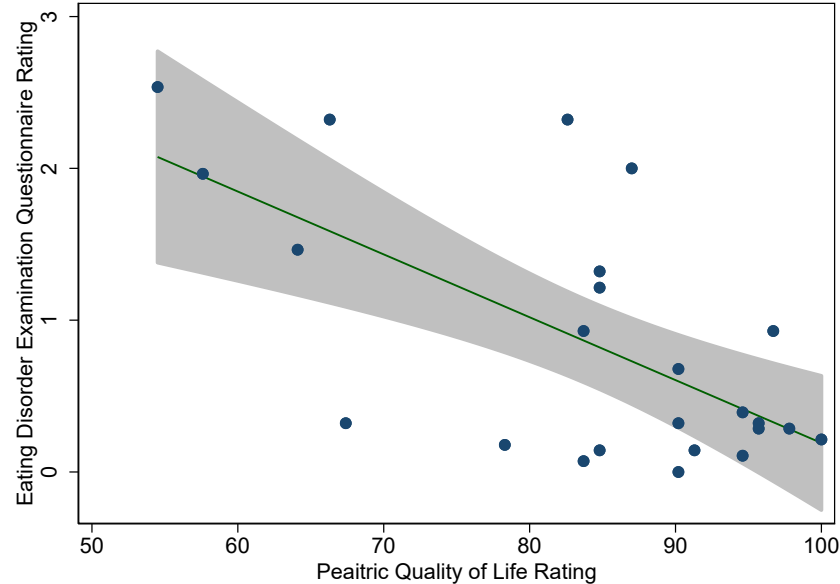
PROMIS Outcome	$\beta$ Coefficient	Standard Error	95% CI	<i>P</i> Value
Mobility	0.03	0.15	-0.26, 0.32	.84
Anxiety	1.72	0.80	0.13, 3.31	.034 <sup>a</sup>
Depressive symptoms	1.05	0.75	-0.44, 2.54	.16
Fatigue	2.41	0.59	1.25, 3.58	<.001 <sup>a</sup>
Peer relationships	0.15	1.04	-1.92, 2.22	.89
Pain interference	1.34	0.65	0.04, 2.64	.043 <sup>a</sup>

**Menstrual dysfunction was associated with impaired quality of life measures, including anxiety, fatigue, and pain interference**

# Disordered Eating Behavior



Aubrey Armento, MD



**More severe disordered eating behavior was strongly associated with lower quality-of-life ( $r = -0.65$ ;  $p < 0.001$ )**



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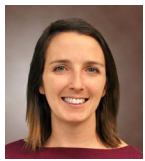
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Armento et al., In Prep

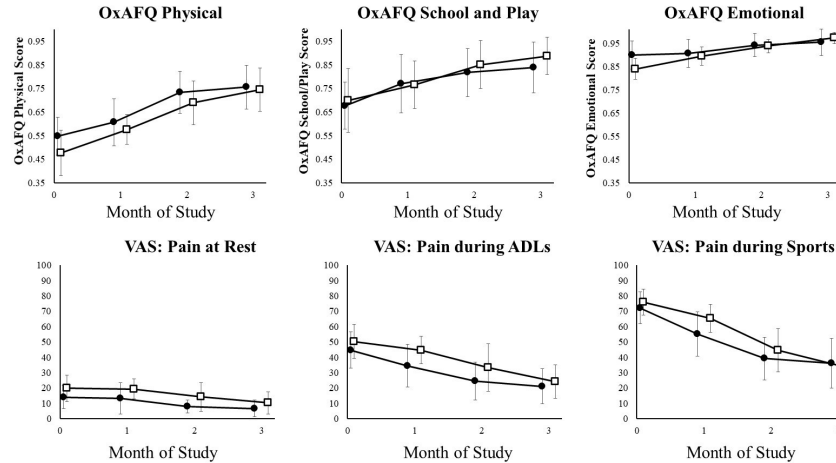


# Gymnastics Research



Emily Sweeney, MD

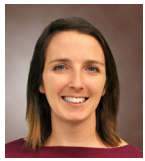
## Longitudinal Outcomes



● X-Brace™      □ Cheetah Heel Cup™

**Randomized Clinical Trial demonstrated improvement in outcomes among gymnasts with Sever's disease with two different types of braces**

# Former Collegiate Gymnasts



Emily Sweeney, MD

Variable	Median or n(%)
Current age (years)	32.4 [26.3, 41.2]
Age began gymnastics	4 [3, 6]
Age gymnastics became only sport	8 [6, 11]
Time-loss gymnastics injury in college (but no surgery/retirement)	320/461 (69%)
Gymnastics injury during middle/high school or college resulting in surgery	266/461 (58%)
Injury during collegiate gymnastics that resulted in retirement	94/459 (21%)
Sustained a concussion during gymnastics	195/459 (42%)
Disordered eating during college	157/459 (34%)
Sustained at least one stress fracture during college gymnastics	139/459 (30%)

**Gymnasts specialize at a young age, are at risk for disordered eating, and a high proportion report sustaining a concussion during their careers**



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Sweeney et al., Phys Sports Med, 2021

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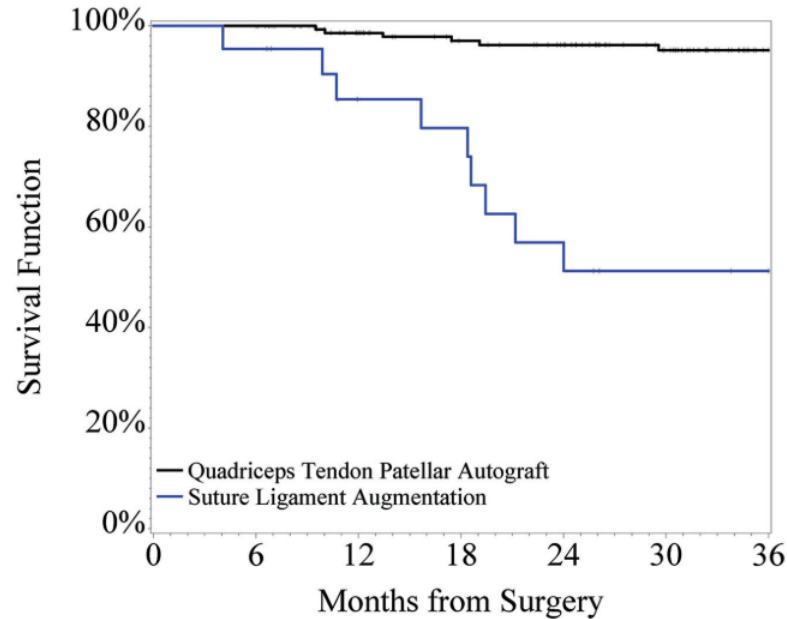
# ACL Techniques and Outcomes



Jay Albright, MD



Lexi Gagliardi



The cumulative incidence of graft failure in the first 3 years after ACL reconstruction was higher in the suture ligament augmentation group vs the quadriceps tendon group (48.8% vs. 4.7)

**Figure 3.** Graft/repair survival.



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Gagliardi et al., Am J Sports Med, 2019

# Access to ACL Surgery Time

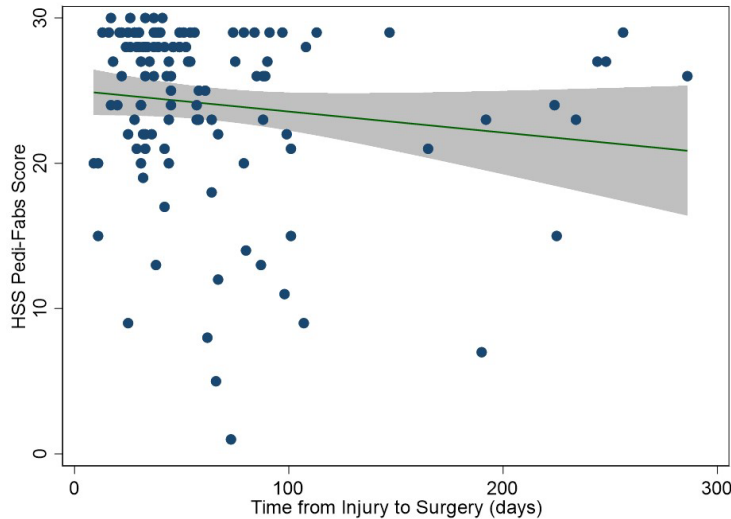


Jay Albright, MD

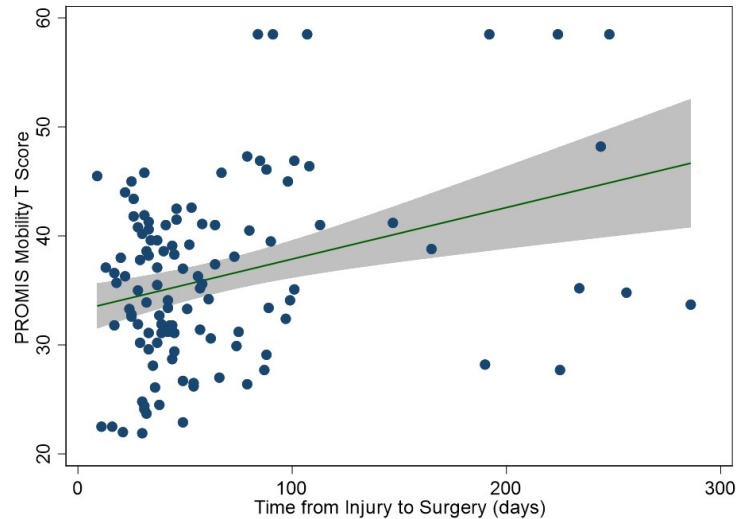


Claire Giachino

A. Pediatric Functional Activity Brief Scale (HSS Pedi-FABS)



B. PROMIS Mobility Score



After screening for different intrinsic/extrinsic factors, the two most prominent predictors of time from ACL injury to surgery are:

**Public insurance (42-day delay) and better self-reported mobility (2 pt greater score)**



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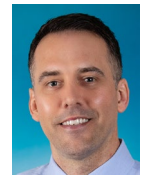
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Giachino et al., In prep



# Surgical Research: Future Directions



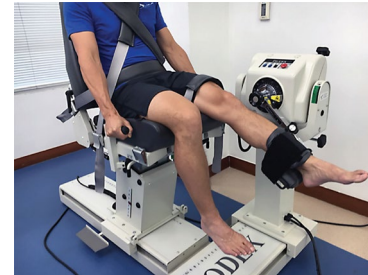
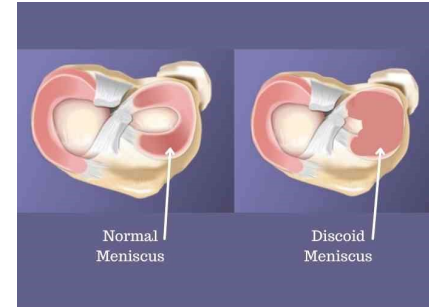
Curt Vandenberg, MD

Welcome, Dr. Vandenberg

- Emphasis: cartilage health after surgery

Biomechanics integration

- Isokinetic and movement analysis investigations



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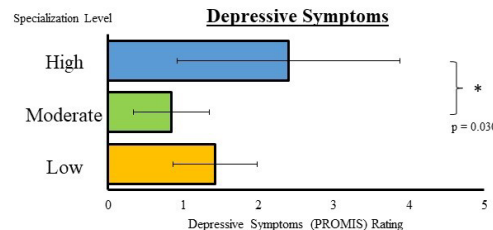
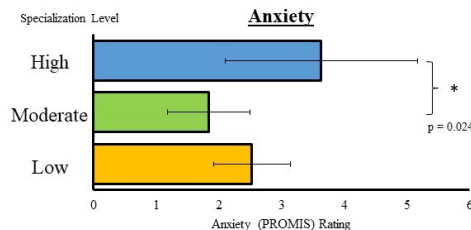
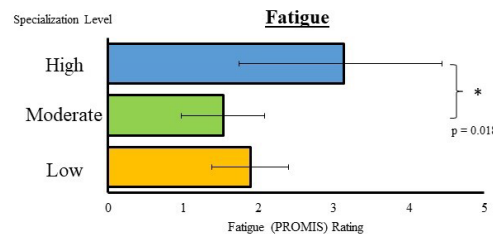
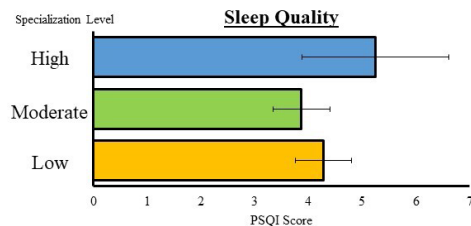
# Early Youth Sport Specialization



Greg Walker, MD



Kathryn Stockbower, MD



**Highly specialized high school athletes report higher levels of fatigue, more anxiety symptoms, and more depressive symptoms than their moderately specialized peers**



# Early Youth Sport Specialization



Greg Walker, MD

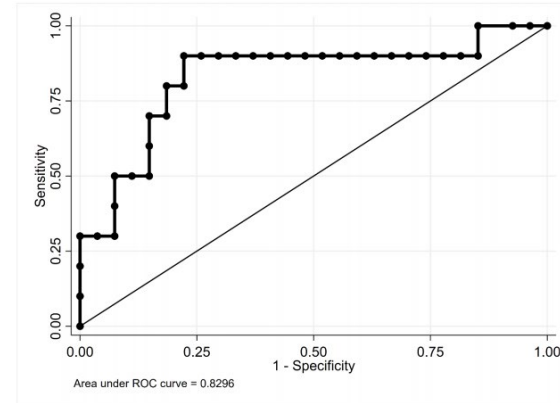
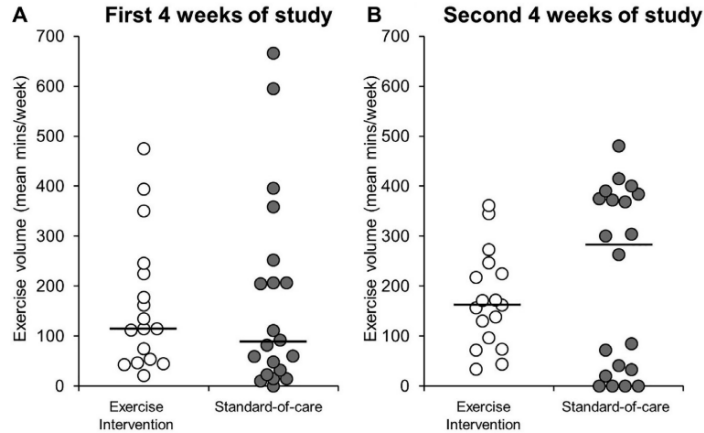


Casey Little

Variable	Exceeds age/volume recommendation	Meets age/volume recommendation	P value
<b>Youth in my sport play too many games before college</b>	Agree/Strongly Agree: 11 (33%)	Agree/Strongly Agree: 21 (16%)	0.03*
Female participants	7 (21%)	9 (7%)	
Male participants	4 (12%)	12 (9%)	
<b>I wish I could spend more time playing other sports</b>	Agree/Strongly Agree: 13 (39%)	Agree/Strongly Agree: 42 (33%)	0.50
Female participants	7 (21%)	21 (17%)	
Male participants	6 (18%)	21 (17%)	

**Athletes who spend more hours in sport than their age appear to perceive their competition load during youth sports to be excessive**

# Concussion: Early Aerobic Exercise



Patients randomized to an individualized exercise recommendation (100 min/week) exercised at a similar volume as those not provided a recommendation.

Symptom resolution after 4 weeks of study: optimal cut point =

**160 min/week aerobic exercise**

# Early Intervention in High-Risk Patients



Julie Wilson, MD

&

David Howell, PhD



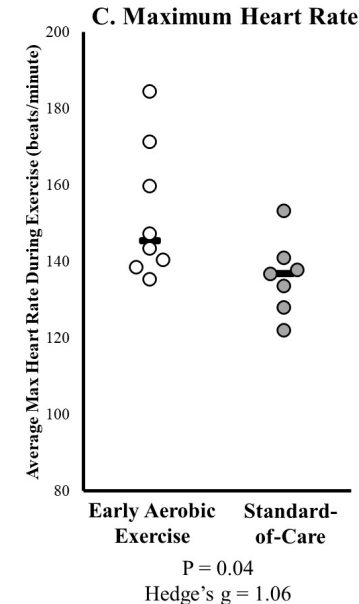
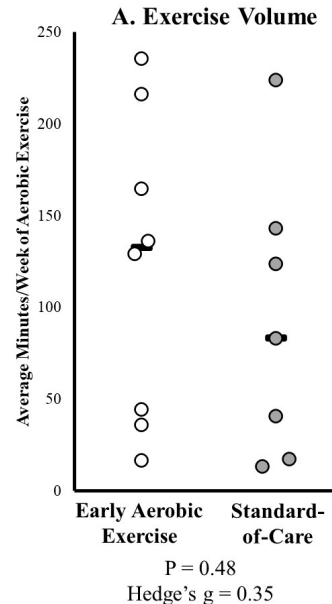
Mathew Wingerson

## Pilot Study:

Can early aerobic exercise reduce risk of PPCS for those at highest risk (5P Risk Score  $\geq 6$ )?

86% (6/7) – SOC developed PPCS

44% (4/9) – early exercise developed PPCS



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Howell et al., PT in Sport, 2022



# Post-Concussion Neuromuscular Training reduces 1-year injury risk

For one year after concussion  
RTP

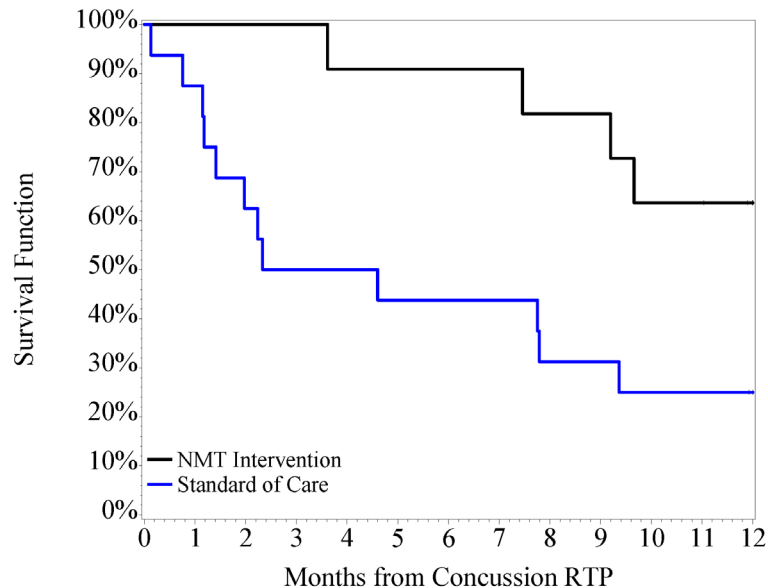
Intervention: 36% (n=4/11)  
sustained a sport-related MSK injury

Standard of Care: 75% (n=12/16)  
sustained a sport-related MSK injury

**Hazard ratio = 3.56**

**(95% CI: 1.11 – 11.49; p = 0.03)**

*Adjusted for strata (sex and age)*

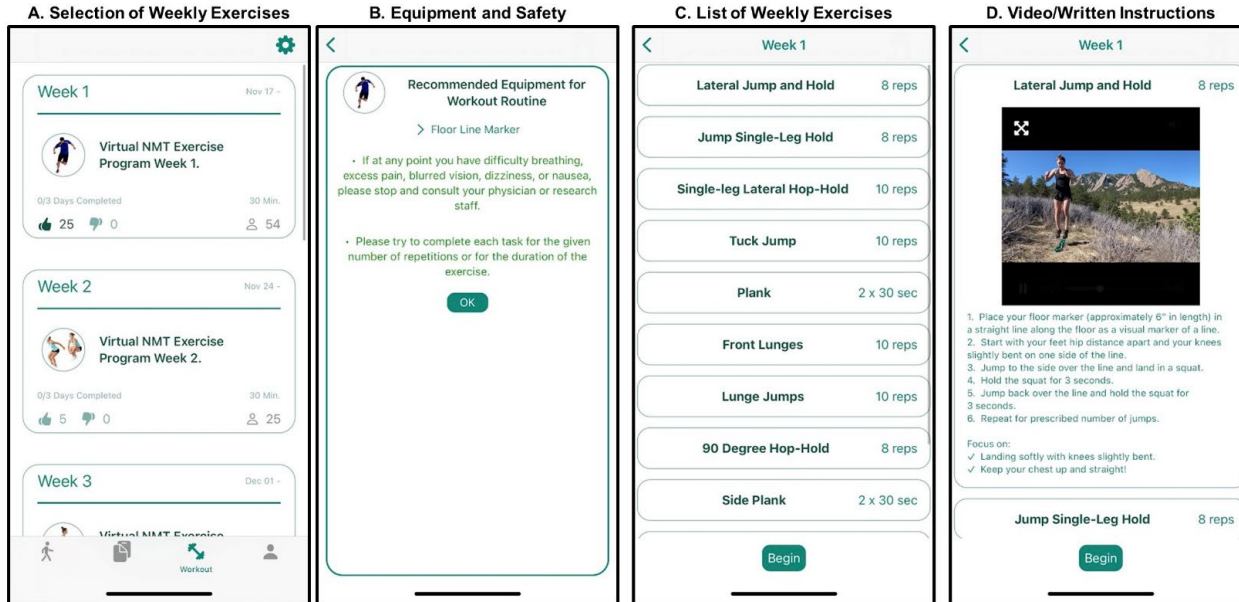


Julie Wilson, MD  
&  
David Howell, PhD



Cory Seehusen

# Translation to Virtual Environment



Screenshots of the Self-Guided virtual rehab program. Participants progress through each week using their smartphone, completing three sessions/week. Weekly check-ins with the research team ensure compliance and timely troubleshooting

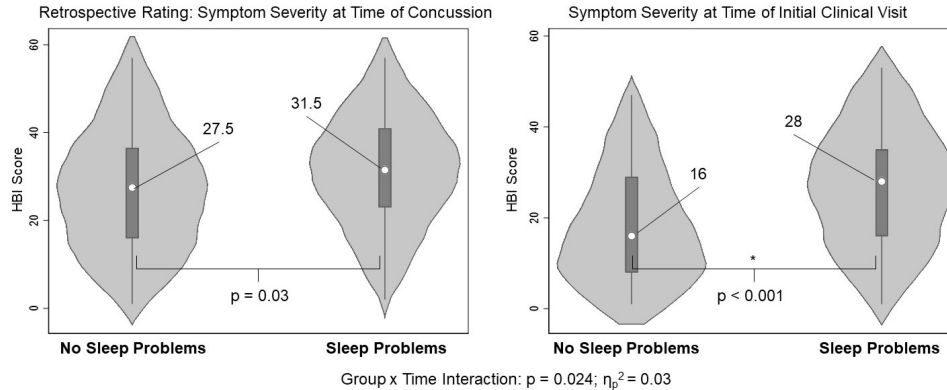
# Sleep as a Prognostic Indicator



Julie Wilson, MD  
&  
David Howell, PhD



Samantha Magliato



53% of those **with** sleep problems developed PPCS  
31% of those **without** sleep problems developed PPCS  
 $P = 0.004$

After adjusting for *time of visit and pre-injury sleep problems*:  
aOR = 2.02, [1.01, 4.06],  $p = 0.049$

# Know a Potential Participant?

We are enrolling active/healthy adolescents in ongoing studies. Use the QR codes below to get in touch!



Understanding How Sleep Health Affects  
Recovery from Adolescent Concussion



Energy Availability and Quality of Life in  
Adolescent Athletes