Managing skiers' thumb

Anders G.J. Rhodin, M.D.
Can You Pass the Stress Test?

by John Neill
Division Proficiency S & T Advisor

The major obstacle to learning is fear, fear of appearing clumsy or unskilled. Fear of failure. For most people, the mere mention of the word “test” makes them shudder with thoughts of impending doom. Because of this fear, many ski patrollers never progress beyond the basic patroller classification.

Why is testing viewed so negatively? Mainly because it is a stressful situation. Webster's dictionary defines stress as a “factor that induces bodily or mental tension.” Stress factors exist at every clinic and evaluation, and they can affect a candidate’s performance.

An appropriate level of stress produces energy. It produces a heightened sense of alertness, creating an environment close to the realistic patrolling experience. How can evaluators create a difference between appropriate and inappropriate stress levels in a testing situation? The question has been an important focus for the division’s S & T staff for the past several years. It was concluded that our goal must be to eliminate those factors which increase stress levels above those which would occur naturally in a patrolling environment.

In the two-day pilot Senior Clinic/Evaluation, the goal has been reached by combining the instruction and evaluation components, creating a supportive atmosphere. Mistakes are viewed as positive opportunities to improve performance. Candidates are welcomed and put at ease throughout the weekend. Due to the quick pace, there’s little time spent standing around, and less time to think about nervousness.

Instead of test courses, creative and exciting learning activities are employed, encouraging candidates’ success and achievement of personal goals.

Trainer/evaluator clipboards have been replaced by new training and “people” skills learned from the Phase I Instructor Development Program. Candidates now wear name tags instead of numbers. Trainers know that learning is enhanced when recognition, respect and feedback are given individually, and that all learning is influenced by the relationship between student and instructor.

Last year was the division’s third successful season conducting the popular two-day pilot program. Reviews of the program, by candidates and staff alike, are overwhelmingly positive. Current seniors attend to polish skills and brush upon the latest techniques. Patrollers are finding the two-day program so beneficial, they’re attending yearly.

For this season, five Senior Clinic/Evaluations are scheduled; they are listed on the preregistration forms. In the Eastern Division, we have proven that to remove fear is to invite attempt. To welcome mistakes is to encourage learning. This may be your year to become a Senior. Come, learn with us.

Managing Skiers’ Thumb

by Anders G.J. Rhoadin, M.D., EMARI Medical Advisor

Of the many injuries we see on the ski slope, many are dramatic, involving major joints and long bones. Often these have visible deformities, severe pain and marked disability. These spectacular injuries receive priority care and are nearly always referred to hospitals for definitive care. However, as patrollers, we should also be aware of the less dramatic injuries that less often come to the attention of the ski patrol. Despite being relatively minor, they are potentially serious injuries that may require medical, and even surgical attention.

The most common of these is “skiers’ thumb”. This is an acute sprain or fracture of the joint at the base of the thumb; at the juncture of the proximal phalanx and the metacarpal. It usually involves the side of the joint nearest the web space between the thumb and index finger. This injury associates most frequently with the

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sport of skiing, caused by falling on the hand and thumb while gripping a ski pole.

Normally, when a person falls on an outstretched hand, the thumb is adducted (close to the other fingers). However, in a fall while holding a ski pole, the thumb is forced into a position of abduction (away from the other fingers) and becomes more easily injured. The injury is usually a sprain or avulsion fracture of the ulnar collateral ligament of the metacarpophalangeal joint, caused by the hyper abduction of the thumb either as it hits the snow, or by the leveraged force of the ski pole forcing the thumb into further abduction as the pole is wrenched from the hand at impact.

When this condition of the thumb-ligament injury was first recognized, it was assumed that the use of ski pole straps somehow caused the problem. Skiers were advised to alter their grip on the pole, to avoid wrapping the straps tightly around the base of the thumb. Then strapless ski poles appeared. It was discovered that neither of these modifications had an effect on skiers' thumb. It isn't the strap, but the pole that causes the problem. In fact, the larger strapless grips are more apt to injure the thumb in a fall than thinner handles with straps.

If the injury to the ligament is severe—in the case of an avulsion fracture in which the ligament pulls away from the bone, this can lead to significant long-term disability. Many of these unstable joints require surgical repair to keep proper function. But repair, to be successful, must be done within a week to ten days following the injury. Because of this time factor, a skier with this classic injury must be seen by a physician soon after it occurs.

Because it is often a minor, sometimes isolated accident, on-hill patrollers are seldom called to care for this injury. The skier may stop by the patrol room just to have it checked. But despite involving a small joint, this injury can be severe. The skier should be directed to a health professional for further evaluation. In terms of first aid, simple splinting with an ace wrap or other bandage is usually sufficient, with the addition of a rigid splint if pain is intense. Immediate application of ice is recommended.

Interestingly, this injury was until recent years called "gamekeepers' thumb". The term originates from historic England, where the royal gamekeepers injured their thumbs through the repetitive motion of breaking the necks of wildfowl destined for the royal kitchens. The difference in the two conditions is that gamekeepers' thumb was a chronic condition gradually leading to thumb joint instability. Skiers' thumb is an acute injury. Unlike gamekeepers' thumb, which had poor surgical results, skiers' thumb injuries, when properly diagnosed and treated, have a high success rate.

Ed. Note: Dr. Anders Rhodin, a noted orthopedic surgeon, formerly with Wachusett Mt. Ski Patrol, is also a past Medical Advisor for EMARI Region. (MA).

Trail Sweep Policy Noted

We welcome all articles, photos, letters to the editor, or just notes of interest. Articles arrive fairly frequently with no identification attached, and no way to check up on facts, names, etc. Sorry, but in spite of obviously well written (usually humorous) work, it is our policy not to print anonymous articles.

We ask only that you include a name and telephone number or address of either the author or contact person.

It has been suggested that photos appearing in Trail Sweep's pages be credited to the person who took them. We are more than happy to do so, if those folks who send in snapshots will let us know who's behind the lens. In most cases, we receive photos which identify the subject and the event, but leave us in the dark—no pun intended—about who took the shot.

A word of caution: if you write directly on the back of a photo, particularly with a felt-tip, the ink may transfer to its face, creating some interesting special effects (think E.T. or Yoda) on even our most dignified patrollers. It's best to print or type your info on a separate (small) piece of paper, then tape it to the back of the photo, with the info folded over to the front. Don't forget too, that if you want your photos back, they must be accompanied by a stamped, self-addressed envelope.

Patrollers Wanted

Wildcat Mountain needs volunteer patrollers to fill out their weekend patrol for the '91-'92 ski season. Call or write Jeff Maynard, Wildcat Mountain Ski Area, P.O. Box 5, Jackson, NH 03846, tel. (603) 466-3326, or (603) 383-9057 after 6 PM.