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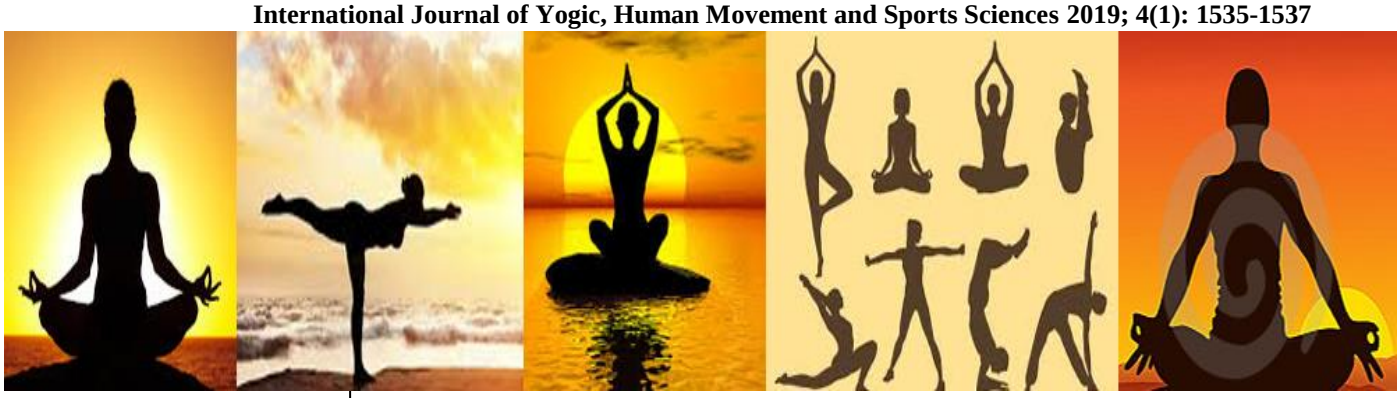

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Female athletes' health concerns: A lifespan at Pondicherry

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Abstract
Exercise benefits women of all ages and has been linked to better health and well-being throughout time. Heat sickness is more common in young adults and adolescents than in children. Injuries to the growth plates are prevalent in children's sports. Teens are more likely to sustain similar ailments, particularly ligament and tendon injuries. Stress fractures, anterior cruciate ligament (ACL) injuries, and patella femoral pain syndrome are all common in teenage and adult females. In athletes in these age groups, physicians should look for pelvic floor dysfunction and the female athlete triad. In adult females, exercise can help with disease prevention and management. The Centers for Disease Control and Prevention advise moderate-intensity exercise most days of the week for at least 30 minutes. However, as athlete ages, they become more aware of their environment. As a result, women and girls may confront difficulties throughout their lives.

Keywords: heat-related illness, pelvic floor dysfunction, overuse injuries

Introduction
Women of all ages have been found to reap significant health benefits from exercise. Physical activity can help you avoid sickness and improve your overall health. The Centers for Disease Control and Prevention recommends 30 minutes of moderate intensity exercises or any other physical activity almost every day throughout the week. Aerobic workouts are beneficial, but encouraging a woman to choose an activity she enjoys (both aerobic and anaerobic) promotes long-term commitment at all ages. Benefits of exercise, such as improved fitness and weight control, are obvious at a young age; other benefits, such as chronic illness prevention and treatment, span a lifetime.

Childhood [6-13 Years]
Children go through three periods of life: early childhood, middle childhood, and late childhood. The period between birth and the age of six is referred to as "early childhood." Development is essential since a lot of significant life events occur at this period, including learning to talk, crawl, and walk. The years a kid spends in middle childhood, which are those between the ages of six and thirteen, are said to be the most formative ones in their lives. High levels of exercise may be too much for immature bodies to cope with.

Heat-Related Illness
Thermoregulatory mechanisms in children deteriorate, putting them in higher danger. Athletes who aren't acclimated to hot temperatures are more prone to suffer from dehydration and heat-related sickness (obesity, illness, use of prescription or illicit drugs, heavy gear, etc.).

Causes &Symptoms
- Edema in lower extremities
- Cramps with painful muscle spasms
- Syncope (temporary loss of consciousness caused by a fall in blood pressure).

Treatment
- Supine posture
- Sodium replacement
- Rehydration
- Changing your environment to one that is cool
- Drink plenty of water before and during your workout.

Use and Overuse Injuries
Inadequate rest times, unexpected changes in the type or intensity of training, poor technique, and faulty equipment are all linked to it.

Causes & Symptoms
- Muscle imbalance
- Flexibility
- Growth cartilage susceptibility to repetitive stress Treatment:

Treatment
- Taking a break
- Ice should be used.
- The use of analgesic drugs
- Rehabilitation

Adolescence [11-17 Years]
Growth plate injuries are less common in adolescents than in children. Several illnesses and ailments that can occur in adolescence include overuse injuries, female athlete syndrome, sacroiliac dysfunction, and anterior cruciate ligament [ACL] injury.

Overuse Injuries
Patellofemoral pain syndrome and stress fractures are common ailments in post-pubescent girls.

Patellofemoral Pain Syndrome: Anterior knee pain associated with activity characterizes this disease.

Causes
- Running on a hilly terrain
- Inadequate core/hip abductor strength
- Lower extremity pain Misalignment

Fracture Due to Stress
This disorder is caused by repetitive loading that exceeds the bone's ability to heal. Common places include the tibia, tarsal, metatarsal, and femur. Following the finding of a stress fracture, it's critical to evaluate lower extremity alignment, strength, and gait, as well as screen for risk factors such as disordered eating, menstrual dysfunction, and other chronic medical conditions that could predispose the athlete to bone loss.

Trait of a Female Athlete
Disordered eating, menstruation dysfunction, and bone mineral density loss are among the symptoms. A physician, a dietitian, and a mental health specialist should make up the treatment team. Medical, menstrual, reproductive, and family histories, as well as particular inquiries about disordered eating, should all be considered when assessing menstrual dysfunction.

ACL Injury
It's a form of non-contact injury that's linked to jumping, cutting, and turning, and it's likely multifactorial in origin.

Causes & Symptoms
• Misalignment
• Instability in the core
• Muscle strength imbalances
• Hormonal influences

Treatment
1. Surgical restoration of a damaged ACL
2. Core and lower extremity strengthening, as well as proprioceptive training
3. Jumping exercises

Higher female athletes tend to have more symptoms and higher severity and longer to recover. Concussion will affect also by hormonal issues and can lead to abnormal menstrual patterns.

Adults [18 – 35 Years]
Female athletes may experience complications including the female athlete triad, patellofemoral knee discomfort, and ACL rupture as adolescent athletes.

Pregnancy
The ACOG (American College of Obstetricians and Gynecologists) has issued guidelines for activity during pregnancy. Several studies have demonstrated that moderate-intensity exercise during pregnancy has no negative consequences.
Gestational diabetes-(a condition of elevated blood sugar that affects pregnant women), Preeclampsia (elevated blood pressure during pregnancy, sometimes coupled with fluid retention and proteinuria)

Exercise intensity, duration, and frequency
Pregnant women should exercise moderately for at least 30 minutes almost every day in a week, unless they have a medical or obstetric issue. Exercise should be performed in a space with ideal temperature or under-regulated environmental conditions, with sufficient hydration and subjective comfort in mind.

Pelvic Floor Dysfunction
Approximately 47% of women who exercise on a regular basis report having urinary incontinence. Jumping, high-impact landings, and jogging were the most common causes of urine incontinence.

Older Adults [35 Years and Older]
Older female athletes have many of the same exercise-related issues as younger female athletes, but they are more likely to have chronic medical conditions.

Prevention and management of disease
People who engage in regular physical activity had decreased all-cause death rates. Improving bone mineral density and offering cardio-vascular protection, aids in the prevention of hypertension and diabetes. Regular exercise can help with depression, osteopenia, and osteoporosis.

Prevention of fall
Exercise improves strength, flexibility, balance, and overall conditioning. Exercise increases postural stability and delays functional impairment in older women, reducing the chance

of falls. Hip fractures, as well as the morbidity and death that accompany them, must be avoided.

Conclusion

Female athletes are more likely to experience additional symptoms, have a greater severity, and take longer to recover. Hormonal difficulties might be exacerbated by concussion and can result in irregular menstruation patterns.

In children and adolescents

- Use the preparticipation evaluation forms and take a detailed history.
  Ask about training, injuries, menstruation and nutrition.
- Identity risk factors for injury.
  Muscle imbalances, sport specialization.
- Screen for disordered eating and low energy availability.
  Appropriate caloric intake and also calcium and vitamin D
- Evaluate for menstrual irregularity
  It is NOT normal to NOT menstruate as an athlete.
- Educate
  Family, athletes and coaches

In adult and older women

- Continue to screen for female athlete triad.
- Continue to screen for risk of overuse injuries.
- Continue appropriate calcium and vitamin D intake.
- Educated on the benefits of and encourage resistance training screen for urinary incontinence.
- Pregnancy is NOT a reason to NOT exercise.

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