



PARTICIPATING IN SOFTBALL WHILE PREGNANT

by Vicky Hall

Over the years, various softball leagues have asked for guidance and advice about whether players should continue to play, umpire or otherwise participate in softball games when they are pregnant.

The main issues raised are:

- The risk of injury to the unborn baby and mother.
- Whether the opposing team can play competitively due to concerns about hurting the pregnant player and baby.

RISKS TO EXPECTANT MOTHER AND BABY

From the Australian Sport Commission:

The risk of traumatic injury to a mother or foetus during sport or physical activity is theoretical and very small. Serious abdominal injuries of the kind that may compromise a mother or her foetus are rare and are usually associated with motor vehicle accidents or domestic violence.

The stage of pregnancy is an important factor in determining whether and how long pregnant women should continue to participate in sport. In the first 12 weeks, the foetus is contained within its mother's pelvis and so is protected from injury by the skeletal structure of its mother's body. As pregnancy continues, the foetus moves higher in its mother's body and becomes more susceptible to injury from a blow or other impact.

Risks will vary according to individual circumstances (the kind of sport played, the fitness of the woman concerned and existing medical conditions). Some particular physical and health factors:

- Theoretically, pregnant women may be more vulnerable to falls because the growing foetus causes a shift in their centre of gravity, which can affect their balance and co-ordination in later months.
- Theoretically, hormonal changes in preparation for the birth may also result in ligament and joint laxity, making women vulnerable to injuries or falls (they should also avoid excessive stretching and jerky ballistic movements as a result).
- As the foetus rises higher in the mother's abdomen later in the pregnancy, it is more vulnerable to direct impact injuries.

GUIDANCE BY OTHER SPORTS AND BODIES	ADVICE ON PARTICIPATION OF EXPECTANT MOTHERS
International Rugby Board	Do not advise any participation due to risk of abdominal injury in rugby.
England Hockey	All hockey players, coaches, umpires and physios are advised to consult with their GP as soon as pregnancy is confirmed to ensure that they are fit to play up to 12 weeks. No player, coach, umpire or physio should participate in hockey beyond 12 weeks of pregnancy.
Softball Australia	Player should consult GP regarding the risks and how long she should continue playing. Disclaimer signed by pregnant player. No ban due to concerns regarding discrimination.
Rounders England	Does not recommend participation while pregnant due to the significant risk to health. Individuals who do choose to participate while pregnant should seek medical consent before participating and must accept responsibility for any adverse consequences of their decision.
American Softball Association	Player should consider the increased risks to themselves and baby and consult a medical professional. May require signed authorisation from medical professional.
Perkins Slade Insurers	Our advice in regard to participation in sports by pregnant women, or those with any type of medical condition, is to seek and follow medical advice. The insurers would not restrict sporting participation on pregnancy grounds; they would follow medical opinion.
European Softball Federation, International Softball Federation, England & Wales Cricket Board	Inquiries made, but unable to obtain any information.
Feedback from medical professionals in the softball community: Emma Davis, Amy Rice, Sue Bedford	The reason all sports professional bodies recommend speaking to the woman's GP is that the GP gives advice based on her individual health and that of the pregnancy. Although the focus is on trauma to the abdomen, in most cases, injuries are more likely to be musculoskeletal in nature and pregnant women would be at increased risk of joint problems from diving and sliding.

SPECIFIC SOFTBALL RISKS WHEN PREGNANT

Below are some possible situations that can arise in softball. The likelihood and risk levels are my opinion and intended as an aid to discussions regarding softball hazards and risks.

What are the hazards?	Who might be harmed and how?	Likelihood	Risk
Hit in abdomen by pitched ball	Player and baby Umpire and baby	Possible in fastpitch Unlikely in slowpitch	Medium in fastpitch Low in slowpitch
Hit in abdomen by batted ball	Player and baby	Possible for pitcher Some chance for infielders; however, fielders generally get their glove to the ball.	Medium Low
Hit in abdomen by foul ball	Catcher, umpire Player on batting team and baby.	Some chance Unlikely, especially if backstops erected.	Medium Low
Hit in abdomen by thrown ball	Player and baby	Most throws are higher and hit a runner on the head or upper torso.	Low
Hit by bat in abdomen tossed by batter	Player and baby	Some chance for a catcher or umpire, although not a common occurrence.	Low
Injury to abdomen from collision at base with runner or baseplayer	Player and baby	Some chance of injury but would it be to abdomen?	Low
Fall, loss of balance during running, diving and sliding.	Player	Increased risk of falling, generally resulting in musculoskeletal, muscle and joint injury.	Increases as pregnancy progresses

ISSUES FOR CONSIDERATION

1. All bodies advise consulting medical professionals; however, British doctors are unlikely to know or understand the risks associated with softball.

Answer: Expectant mother can explain softball to doctor.

2. Should we produce a list of risks to give to pregnant players which could also be shown to GPs?

Answer: No. Players can explain the risks as they will differ in each case. And most doctors will know baseball.

3. What is the level of risk of injury to the abdomen in softball? How often do these injuries occur in general?

Answer: Evidence found indicates low risk. No statistics found, but other countries are reporting a low risk.

4. What happens if a pregnant player and / or baby are injured / miscarried?

Answer: Any miscarriage or injury to an expectant mother or unborn child would be traumatic for all involved.

5. Should opposing players be able to express concern to the umpire / other captain in the same way they can if a player is injured, drunk or not capable of the level of play?

Comment: Perception of risk to a pregnant player by opponents may be greater than the reality. Information indicates the low risk of harm to an expectant mother and baby, but opposition players may still be concerned and alter their game.

Answer: It's difficult! Every player and team plays differently. Some teams will not mind, others will feel it unfair and detrimental to their game because they are worried about harming the pregnant player.

Each league can set rules that they think best serves their teams. The BSF Executive suggests that each league considers the issue and makes a policy based on their knowledge of their teams and players.

BSF GUIDANCE ON PARTICIPATION IN SOFTBALL WHILE PREGNANT

Softball participants who are pregnant – including players, coaches and umpires – may have increased risks or may be susceptible to additional risks of injury from softball activities.

Risks will vary according to individual circumstances – for example, the level and position played, the fitness of the woman concerned and existing medical conditions.

The risk of traumatic injury to a mother or her unborn child during sport or physical activity is low. Serious abdominal injuries of the kind that may compromise a mother or her unborn child are rare. The stage of pregnancy is an important factor in determining whether and how long pregnant women should continue to participate in sport. In the first 12 weeks, the unborn child is contained within its mother's pelvis and so is protected from injury by the skeletal structure of its mother's body. As pregnancy continues, the unborn child moves higher in its mother's body and becomes more susceptible to injury from a blow or other impact.

With regard to the pregnant woman, she may be more vulnerable to falls because the growing baby causes a shift in her centre of gravity which can affect her balance and co-ordination in later months. Also, hormonal changes may result in ligament and joint laxity, making women vulnerable to injuries or falls.

Participants should consult with and follow the advice of a relevant medical professional concerning whether it is safe for her and her unborn child to continue to participate and / or for how long she should continue to participate. The local GP or medical professional can provide advice based on the expectant mother's individual health and pregnancy.