



Who should be Responsible for Kevin Durant's Achilleic Tendon Tear?

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Introduction

Kevin Durant is my favorite NBA player. He has won two NBA championships, an NBA Most Valuable Player Award, two Finals MVP Awards, two NBA All-Star Game Most Valuable Player Awards, four NBA scoring titles, the NBA Rookie of the Year Award, and two Olympic gold medals. Durant has also been selected to nine All-NBA teams and ten NBA All-Star teams (Figure 1).



Figure 1.

On June 10, Kevin Durant ruptured the Achilles tendon in his right leg in the second quarter of Game 5 of the NBA finals. Two days later, Durant underwent surgery to repair the tendon. The 30-year-old former league MVP is expected to miss the entire 2019-20 season. Whether he'll be the same elite player in the aftermath of an injury that has altered the careers of other NBA players remains to be seen.

Durant's injury has generated significant discussion. The fact that one of the top-five players in the league and a future Hall of Famer will miss next season is, on its own, a major news story. His pending free agency status in what could be another summer of roster drama only adds to the controversy.

Yet much of the discussion has centered less on what is to come and more on the ambiguous circumstances preceding the injury. Specifically, why did Warriors medical staff and coaches clear Durant to play when he was already suffering from an injury to a related part of his body, and was Durant sufficiently apprised of the risk of playing?

According to the news conference after the game, the warriors' head coach Steve Kerr said, return to play is a joint decision between the medical staff, player and team. The "Vote" has to be an unanimous "Yes" to return to play. The medical staff decision is made jointly by the doctor/surgeon/consultants, athletic trainers and physical therapists. The player makes his call with input from his agent, advisors, personal doctors and family. The team position is formulated by the coaches, general manager, front office and ownership.

Everyone is in the decision-making process-It seems like that no one should take the responsibility. But the tragedy did happen. As a medical professional, I could not decide who should be responsible for the tragedy either. But from medical perspective, we do learn a lot from the case.





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Let us Review the Case First

Before playing in Game 5 of the Finals, Durant had been sidelined for a month. He strained his right calf on May 8. The injury occurred with 2:10 to go in the third quarter of Game 5 of the Warriors' second-round playoff series with the Rockets. Durant pulled up and hit a jumper and then, as he ran back to defend, grabbed his right leg and limped off the court in pain. The injury was initially diagnosed as a mild strain that might knock him out of action for a week. Then it was determined to be a more serious strain.

Dr. David Chao, an orthopedic surgeon who served as Chargers team physician, wrote in the San Diego Tribune that Durant's reaction to the May 8th injury suggested he might have suffered an Achilles tendon rupture. He noted that the team's labeling of Durant as having suffered a "calf" injury was not inconsistent with an Achilles injury. "The Achilles can be considered part of the calf/lower leg area" and the team notably did not say "calf muscle" but instead the less-precise term "calf."

Durant rested after the May 8^{th} injury and also received unspecified treatments. He made enough progress to participate in team practices and shootarounds on June 9^{th} and 10^{th} without apparent incident. The Warriors trailed the Raptors 3-1 heading into Game 5.

We do not know the specific treatments for Durant. From the interview, there is no acupuncturist, massage therapist or other CAM workers involved. A month recovery treatment for a mild calf strain is not satisfied. From limited information, we can see Durant is using ice pack on his right calf a day before and during the break of the Game 5 of the NBA finals before injury. This is the failure of medical procedure on sports injury. They should not have used the ice on him at that moment (Figure 2).



Figure 2.

The reason is simple. We all know a warm-up is very important to prevent injury. A warm-up session will include a combination of cardiovascular exercises, stretching and strength drills. The warm-up should gently prepare the body for exercises by gradually increasing the heart rate, body temperature and circulation; this will loosen the joints and increase blood flow to the muscles. Stretching the muscles prepares them for physical activity and prevents injuries. The warm-up is also a good opportunity for an individual to prepare themselves mentally for the game ahead and for a team to work together prior to the start of the game. Warm-ups can also be used to practice skills and team drills.

Ice pack is doing the opposite, it slows down the healing process. General speaking, any materials are lower in ductility and higher in brittleness at decreased temperatures [1].

According to Traditional Chinese Medicine, Qi(energy) and blood are very important vital substances for the tissue repair (Figure 3). Cold compress is only applied at the first 1-2 days after injury to stop bleeding and swelling, decrease the inflammation. Heat compress is applied thereafter to bring Qi and blood to the injured area to nourish the tissue. Considering Durant is a tall and thin player, he is a qi deficiency constitution who needs more heat compress for his injury! Although ice pack decreases the local pain and inflammation, for an injured muscle or tendon, it is even worse because there is no self-protection mechanism without pain. Modern researches reveal that non-bacterial inflammation is part of the healing process in the tissue repair [2].

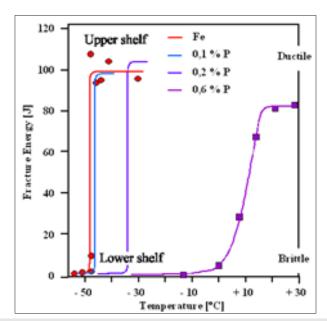


Figure 3.

We would like to appeal that medical profession reviews the heat/cold compress procedure for sport injury, so Durant's tragedy would not happen again! We also suggest sport medical team should include Acupuncture and other complementary medicines personnel to speed up sport injury recovery [3,4].

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