

Current recommendations for muscle strengthening in young athletes

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Mythology : « A popular belief that is probably not true » (Cambridge dictionary)

Mythology of youth resistance training

Avery D Faigenbaum ^(D), ¹ Andrea Stracciolini ^(D), ² James P MacDonald, ^{3,4} Tamara Rial Rebullido ^(D)

Deep-seated and unfounded beliefs exist among some health professionals, teachers, coaches and parents that resistance training is unsafe, ineffective or unnecessary for children and adolescents. These beliefs constitute a mythology, existing despite the evidence that refutes it. Because of this phenomenon, there is

Br J Sports Med 2022;56:997–998.

Myth #1 *« Resistance training stunts bone growth »*

• No negative effect on physeal health or linear growth

McQuilliam 2020, Stricker 2020, Bergeron 2015, Specker 2015, Behringer 2010, Ishikawa 2013

Myth #1 *« Resistance training stunts bone growth »*

- No negative effect on physeal health or linear growth
- Resistance training can strengthen bone during childhood & adolescence

Does Exercise Influence Pediatric Bone? A Systematic Review

Clin Orthop Relat Res (2015) 473:3658–3672



Myth #1 *« Resistance training stunts bone growth »*

- No negative effect on physeal health or linear growth
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 Effects of Weight-Bearing Activities on Bone Mineral
 Content and Density in Children and Adolescents: A Meta-Analysis

Effects of Weight-Bearing Exercise on Bone Health in Girls: A Meta-Analysis Sports Med (2013) 43:875–892

Significant positive effects of weight-bearing exercises on bone mineral content and/or density (small effect sizes)

Myth #2 *« Resistance training is unsafe for young people »*

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Lack of high-quality epidemiological data because resistance training can represent many different activities

Resistance training among young athletes: safety, efficacy and injury prevention effects

A D Faigenbaum¹ and G D Myer^{2,3,4}

Br J Sports Med. 2010

- This paper suggests that most injuries related to youth resistance training are a result of inadequate professional supervision, which underlies poor exercise techniques and inappropriate training loads.
- The risk of musculoskeletal injury resulting from age-appropriate resistance training, weightlifting and plyometrics does not appear to be any greater than other sports and recreational activities in which children and adolescents regularly participate.



« Resistance training is unsafe for young people »

Weightlifting for Children and Adolescents: A Narrative Review

Pierce et al. Sports Health 2021

Discipline & procedures

Insist on good behavior

Myth #2

- Do not allow athletes to train unsupervised
- Insist on correct warm-up/ stretching/warm-down
- While not lifting, ensure athletes are aware of others who are active
- Instill correct spotting techniques
- Make sure that spotters are used correctly where/when required
- Allow no limit (maximum) attempts for early beginners
- Develop evidence-based methodology (periodization and programming) being used
- Do not allow athletes to progress too quickly

Technique

- Be aware that weightlifting can be very tiring for beginners
- Be aware that familiarity with the barbell and other apparatus can be quite threatening for begin
- Sound, mechanically correct lifting technique emphasizing proper "back position management"
- Instill correct breathing on all lifts
- Use light loads when new skills are being learned
- Teach beginners how to "miss" lifts correctly
- Progress loading at each individual's rate using appropriate monitoring techniques
- Use a "progressive stages" strategy when teaching lifts
- Do not advance progressions too quickly so that beginners are continually failing

« Resistance training is unsafe for young people »

Myth #2

Weightlifting for Children and Adolescents: A Narrative Review

Pierce et al. Sports Health 2021

Athlete—make sure the athletes:	 Training platforms are well-spaced out (at least 1 m apart)
Use suitable footwear to facilitate a stable base	Lifting surfaces are nonslip, firm, and level
Use correct, suitable clothing to allow movement	Barbells are evenly loaded and unloaded
Take care of their hands (ie, callouses, blisters, cracks)	The use of collars with early beginners
Medical	Squat racks and other apparatus are stable and pins in good working order
First-aid kit antiseptic and hand lotion should be available	There is an adequate supply of magnesium carbonate chalk and resin
Disinfectants should be available for cleaning the bar, etc	Discs are replaced in storage racks immediately after use
Ice should be available for treatment of sprains, strains, and general fatigue	The bar knurling is kept clean and disinfected
Have an established emergency withdrawal procedure	Bars are straight and revolve easily
	 The training environment has a reasonable temperature/humidity that is maintained training area

Myth #3 « Resistance training is ineffective or unnecessary for young people »

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A meta-analysis of maturation-related variation in adolescent boy athletes' adaptations to short-term resistance training

Jason Moran^a, Gavin R. H. Sandercock^a, Rodrigo Ramírez-Campillo^b, César Meylan^c, Jay Collison^a and Dave A. Parry^a

JOURNAL OF SPORTS SCIENCES, 2017 VOL. 35, NO. 11, 1041-1051

	Before PHV	During & after PHV					
Amplitude of strength gains	Significant but small effect size	Significant & large effect size					
Mechanism of strength gains	Improved neuromuscular activation	Improved neuromuscular activation & muscle hypertrophy					



Myth #3

« Resistance training is ineffective or unnecessary for young people »

Bridging the gap between strengthspan and lifespan To cite Faigenbaum AD, Garcia-Hermoso A, MacDonald JP, et al. Br J Sports Med 2024;58:758-760.



CHILDHOOD: START STRONG

Muscular weakness in adolescence is associated with disability 30 years later: a population-based cohort study of 1.2 million men To cite: Henriksson H,

To cite: Henriksson H, Henriksson P, Tynelius P, et al. Br J Sports Med 2019;53:1221–1230.

ADULTHOOD: BE STRONG

OLD AGE: STAY STRONG

Muscle-strengthening activities are associated with lower risk and mortality in major non-communicable diseases: a systematic review and meta-analysis of cohort studies To cite: Momma H,

To cite: Momma H, Kawakami R, Honda T, et al. Br J Sports Med 2022;56:755–763.

CHILDREN AND ADOLESCENTS

WHO guidelines on physical activity and sedentary behaviour





vigorous-intensity aerobic activities, as well as those that strengthen muscle and bone should be incorporated.



LIMIT

the amount of time spent being sedentary, particularly recreational screen time.



Myth #4 *« Wait until 12 years old to start with resistance training »*

Myth #4 « Wait until 12 years old to start with resistance training »

Free-Weight Resistance Training in Youth Athletes: A Narrative Review

Stephen J. McQuilliam¹ · David R. Clark¹ · Robert M. Erskine^{1,2} · Thomas E. Brownlee¹

Irrespective of age, following an initial focus on fundamental movement techniques, strength development can be periodised within a long-term athlete program.

As strength fundamentally underpins power, it is important to first develop this, while concurrently refining the technical skills required for weightlifting.

0	Chronological age (years)	10	11	12	13	14	15	16	17	18	19	20	21	>21
	Biological age	Pre-PHV	â.			PHV				Post-PHV				
	Functional movements	FOUND	DATIONA	AL MOVE	MENTS									
Training focus	Weightlifting	٦	ECHNIC	AL DEVE	LOPMEN		INTROD	UCTION	TO LOA	D	IIGH-IN	TENSITY	LOADING	
	Traditional resistance training		INCREASE IN TRAINING INTENSITY											
	Recommendations	Gene Emphas mo 1-3 se	eral stre is on fui ovemen ts x 8-10	ength nctional nts 0 reps	in	Streng creases 2-3 s 7(th devel in trainir sets x 6-8 0-80% 1F	opment ng intens 3 reps RM	ity	High Tra	intensi ditiona m 3-4 s 70	ty resista al and we novemen sets x 1-6 -100% 11	ance trai eightlifti ts reps RM	ning ng

Sports Medicine (2020) 50:1567–1580

So...no potential danger from resistance training in youth?

• Unqualified instructor/supervisor

• Inadequate integration of resistance training in long-term athletic development plan

• Early sport specialization in « resistance sports »

Early Sport Specialization

« Intentional and focused participation in a single sport for a majority of the year that restricts opportunities for engagement in other sports and activities »

Bell 2021 J Athl Train



Take-home messages

RT induces positive health outcomes for the whole life

RT can strengthen bone during childhood & adolescence

RT is safe for young people when properly supervised

RT can be started young when adequately implemented in LTAD plan

As well as EVERY sport, avoid early specialization in RT