

Texas Bandmasters Association Convention/Clinic July 26-28, 2018

Health and Wellness Concerns for Marching Band

CLINICIAN: Melissa Lewis

Health Considerations for the Marching Arts

Texas Bandmasters Association Convention July 28th, 2018

Melissa Hatheway Lewis, Lone Star High School lewisme@friscoisd.org

Abstract:

As marching band directors, we have a unique task set before us - to combine music education with the physical activity of marching band. Recent additions to the 9-12 Music TEKS state that students must apply health and wellness concepts related to music. In addition, many of our students receive their only high school physical education course credits through the marching band substitution. So how do we as music educators provide appropriate health and wellness information in the context of a marching rehearsal? How do we work towards creating a physically dynamic and exciting marching band production, while also ensuring the safety of our students and reducing risk of injury? This lecture will present information from the field of performing arts medicine, which views various medical specialties through the lens of the performer, and the author's own research in marching band epidemiology.

Objective:

The 9-12 Music TEKS states that students are to "apply health and wellness concepts related to music practice such as body mechanics, hearing protection, vocal health, hydration, and appropriate hygienic practices". This lecture will provide context for the origin of these TEKS standards and research-based information on hearing loss and musculoskeletal injuries, as well as provide best practices for the high school marching band.

Outline:

- 1. Origin of health and wellness TEKS in the Music curriculum
- 2. Musculoskeletal Injuries in Marching Band
 - a. Pain
 - b. Overuse injuries
 - c. Risk factors for musculoskeletal injury
 - i. Force
 - ii. Posture
 - iii. Time

- 3. Ways to Reduce the Risk
 - a. Interdisciplinary cooperation with athletic training staff
 - b. Physical training blocks
 - c. Stretching
 - d. Body Mapping Technique and Marching Band Posture
- 4. Noise induced hearing loss
 - a. Anatomy of the ear
 - b. OSHA Permissible Noise Exposure
 - c. Ways to reduce noise exposure
- 5. Other health concerns
 - a. Dehydration
 - b. Taking breaks the importance of rest
 - c. Dietary concerns
 - d. Instrument hygiene
 - e. Concussions

Clinician Biography:

Melissa Lewis is the Associate Band Director at Lone Star High School in Frisco ISD. Prior to coming to Frisco, she taught at Keller Middle School, in Keller, Texas. She is a proud graduate of the University of North Texas, where she played clarinet and graduated summa cum laude with honors. Mrs. Lewis is also actively involved in the marching band activity, working at various programs around Texas during college and also serving as the Head Field Technician, Athletic Bands Librarian, and Student Assistant to the Director of the UNT Green Brigade Marching Band. Most recently, she served on the visual staff at the Guardians Drum and Bugle Corps in Open Class and the Pioneer Drum and Bugle Corps in World Class in 2015 and 2016.

Following a series of performance related injuries, Mrs. Lewis became interested in performing arts medicine research. She has won numerous awards for her research on marching band, and her first published work appeared in the Medical Problems of Performing Artists journal in 2013. Her area of research interest lies in maximizing performance and reducing injury in marching band. Mrs. Lewis is currently working towards her Graduate Certificate in Public Health at the University of North Texas Health Science Center. Mrs. Lewis is a member of the Texas Music Educators Association and Performing Arts Medicine Association.

Noise Induced Hearing Loss

Limits for Permissible Noise Exposure (According to OSHA)	
6 hours	92 dB
4 hours	95 dB
3 hours	97 dB
2 hours	100 dB
1.5 hours	102 dB
1 hour	105 dB
30 minutes	110 dB
15 minutes	115 dB

Ways to Reduce NIHL in Marching Band:

- 1. Encourage students to wear earplugs at pep rallies, in the stands at football games, etc. Provide them for free to students or include the cost in their band fees!
- 2. Require that members of the drum line and those students running the metronome wear earplugs at all times.
- 3. Utilize dynamics! Research shows that varying the decibel level in a rehearsal can significantly impact the overall sound exposure (Chesky, 2010)
- 4. Include reps where students count, sing, push air, etc.

Hydration Tips and Fluid Guidelines:

UIL Safety Training, 2016

- 1. Drink regularly throughout all physical activities. An athlete cannot always rely on his or her sense of thirst to sufficiently maintain proper hydration
- 2. Drink 16 oz of fluid two hours before physical activity
- 3. Drink another 8 to 16 oz fifteen minutes before physical activity
- 4. During physical activity, drink 4 to 8 oz of fluid every fifteen to twenty minutes
- 5. After physical activity, drink 16 to 20 oz of fluid for every pound lost during physical activity to achieve normal hydration status before the next practice or competition

Concussion Symptoms and Signs:

UIL Safety Training, 2016

- 1. Concussion can produce a wide variety of symptoms
- 2. Symptoms reported may include: headache, nausea, balance problems, dizziness, double or fuzzy vision, sensitivity to light or noise, feeling sluggish, feeling foggy or groggy, concentration or memory problems, confusion
- Signs observed may include: appears dazed or stunned, is confused about what
 to do, forgets plays [or drill in the case of band], answers questions slowly, loses
 consciousness, can't recall events prior to getting hit, can't recall events after
 getting hit
- 4. Any one or group of symptoms may appear immediately and be temporary, or delayed and long lasting
- 5. The appearance of any one of the above mentioned symptoms should be cause to alert to a possible concussion

Response to Suspected Concussion:

- 1. The student should be immediately removed from rehearsal
- 2. Have the student evaluated by an appropriate health care professional as soon as possible
- 3. Inform the parent and guardians about the possible concussion
- 4. If it is determined that a concussion has occurred, the student will not be allowed to return to participation that day regardless of how quickly symptoms resolve
 - a. In addition, they are not to return to participation until a physician indicates they are symptom-free and are cleared to return to activity
 - b. A coach [or director] is not authorized to clear a student to return to play

Marching Arts Research Bibliography

Compiled by Steven Rock, 2015

Marching band injuries. A one-season survey of the University of Michigan Marching Band. Mehler AS, Brink DS, Eickmeyer KM, Hesse DF, McGuire JW. J Am Podiatr Med Assoc. 1996 Sep; 86 (9) 407-13.

Epidemic faintness and syncope in a school marching band. Levine RJ. JAMA. 1977 Nov 28;238(22):2373-6.

Epidemiology of health concerns among collegiate student musicians participating in marching band. Hatheway M, Chesky K. Med Probl Perform Art. 2013 Dec;28(4):242-51.

Footwear in the United States Army Band: injury incidence and risk factors associated with foot pain. Grier TL, Knapik JJ, Swedler D, Jones BH. Foot (Edinb). 2011 Jun;21(2):60-5. doi: 10.1016/j.foot.2010.12.002. Epub 2011 Jan 13.

Marching athletes: injuries and illnesses at band camp. Kilanowski JF. MCN Am J Matern Child Nurs. 2008 Nov-Dec;33(6):338-45; quiz 346-7. doi: 10.1097/01.NMC.0000341252.95674.9f.

Diet and cardiovascular risk in university marching band, dance team and cheer squad members: a cross-sectional study. Sharma SV, Bush JA, Lorino AJ, Knoblauch M, Abuamer D, Blog G, Bertman D. J Int Soc Sports Nutr. 2008 Apr 18;5:9. doi: 10.1186/1550-2783-5-9.

The contribution of marching band participation to overall physical activity for a sample of university students. Cowen VS. Percept Mot Skills. 2006 Oct;103(2):457-60.

Adolescents' energy cost in marching band. Erdmann LD, Graham RE, Radlo SJ, Knepler PL. Percept Mot Skills. 2003 Oct;97(2):639-46.

Beat the heat: managing heat and hydration in marching band. Vepraskas C. J Sch Nurs. 2002 Aug;18(4):237-43. Review.

BMI changes among marching artists: a longitudinal study.Levy JJ, Statham WJ, VanDoren L. Med Probl Perform Art. 2013 Dec;28(4):236-41.

Big Five personality traits and performance anxiety in relation to marching arts satisfaction.Levy JJ, Lounsbury JW. Work. 2011;40(3):297-302. doi: 10.3233/WOR-2011-1233.

An investigation of musical performance anxiety in the marching arts.Levy JJ, Castille CM, Farley JA. Med Probl Perform Art. 2011 Mar;26(1):30-4.

<u>Measles among members of a drum and bugle corps--Arkansas, California,</u>
<u>Kansas.</u>Centers for Disease Control (CDC). MMWR Morb Mortal Wkly Rep. 1983 Nov 4;32(43):561-2, 567. No abstract available.

Drum and bugle corps: Medical problems and issues. Bischof RO. Med Probl Perform Art. 1994 Nov; 9:131-6.

Medical problems of marching musicians. Harmon SE. Med Probl Perform Art. 1993 Dec: 132-5.

Big five personality traits and marching music injuries. Levy JJ, Lounsbury JW, Kent KN. Med Probl Perform Art. 2009; 24: 135-40.

Injuries and injury risk factors among members of the United States Army Band. Knapik JJ, Jones SB, Darakjy S,Hauret KG, Nevin R, Grier T, Jones BH. Am J Industr Med. 2007; 50(12): 951-61.