LETTERS TO THE EDITOR

Club doctors and physiotherapists

EDITOR,—Waddington et al are to be congratulated on highlighting the need to provide the best available care to professional footballers. Their paper is, however, inherently bound by the dogma that all club doctors must possess a postgraduate qualification. We would argue that this is not necessarily the case, as many doctors who do not possess such a qualification can provide excellent professional care.

In our previous work, we have reviewed the appointment and qualifications of club doctors and physiotherapists in English professional football: some problems and issues. Br J Sports Med 2001;35:48–53.


Authors' reply

We are pleased that our paper on the above subject has generated a lively discussion and in this context we welcome the letters from Rob Mackay and Claire Hay. Both letters raise issues to which we would like to respond.

Dr Mackay appears to accept most of our findings, and the central point of his letter is to “sound a note of caution” before a specialist qualification can provide good quality care. We would argue that possession of a specialist qualification (or the willingness to study for one) “should be specified as a desirable (although not, in the short term, essential) attribute of candidates for the post of club doctor”.

However, it is fair to say that, in the longer term, we would like to move towards a situation in which such a specialist qualification is regarded as essential. Our thinking in this regard is based on a view that is, we think, fairly generally accepted: when seeking any service, whether from a doctor, lawyer, or motor mechanic, it is better—other things being equal—to have that service provided by someone who is more, rather than less, well qualified.

We should emphasise that we do not disagree with Rob Mackay’s suggestion that a background in general practice is appropriate for a club doctor; what we argue is that it would be advantageous if the GP acting as club doctor also had an appropriate specialist qualification in sports medicine in much the same way that the crowd doctor in football is required to hold the Diploma in Intermediate Medical Care.

Rob Mackay does raise an important issue when he suggests that the club doctor who dealt only with the limited range of injuries and illnesses in a single club would be likely to find this insufficiently challenging intellectually. We agree. However, there are two rather different issues involved here. The first is whether a doctor has a specialist qualification; the second issue is whether his (occasionally her) appointment is full time. A full time appointment would indeed present a limited range of clinical problems and may well result in professional dissatisfaction, but we do not argue for full time appointments; rather we argue that those who are appointed (whether full time or part time) should be appropriately qualified. This is a rather different issue.

Claire Hay’s letter is much more critical of our research, suggesting that our paper is “inherently biased”. Before we respond to this general criticism, we would like to respond to the major part of her letter which points out that we make no comparisons of the methods used by chartered and non-chartered physiotherapists and their outcomes, nor do we compare the performance of club doctors who have, and those who do not, specialist qualifications. She is of course correct, although this is hardly a criticism of our paper, because we made no claim to making such direct comparisons of quality of care. The objects of our study were set out in the title—to examine the qualifications and methods of appointment of club doctors and physiotherapists and to raise some problems and issues relating thereto. This we did. Claire Hay’s claim that uncared for patients are more likely to receive appropriate care is thus so only
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Although the PFA have a legitimate interest
indirect, on us while we were writing it.

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Finally, Claire Hay asserts that the “biases”
that she claims to detect in our paper arises
from the fact that our study was funded by an
interested party, namely the Professional
Footballers Association (PFA). She has no
evidence for this claim. In fact, all aspects of
the research were carried out wholly by us,
with no input and certainly no interference
from the PFA. The PFA did not even see the
interview schedule (neither, incidentally, has
Claire Hay, despite her unsubstantiated claim
about “leading” questions). Nor did the PFA
see the questionnaire that we sent to doctors.
Nor did they have any input into the writing of
our report, or exert any pressure, direct or
indirect, on us while we were writing it.
Although the PFA have a legitimate interest
in this matter, the report was wholly and
exclusively our work and we are happy to take
eclusive responsibility for our findings.

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Sailing and swimming

Editor.—With regard to the excellence of the Australians in the last Olympics, a small
riposte is required. We need to examine Dar- winism to understand fully this concept. As
you pointed out, the Aussies did exception-
ally well in the water, but have yet to fully
evolve and are still swimming. The Brits on
the other hand are further along the evolu-
tionary scale and have realised that to get
from one island to another you don’t need to
swim, you can sail. And as for rugby (Union
the proper code), I do believe the English beat
them recently. The other code attempted a
“world” cup recently, but each side was made
up of Australians and was starting to
semble the US’s version of a world series.

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CALENDAR OF EVENTS

The International 16th Puijo Symposium on Health Related Physical Activity and Fitness in Health Promotion and Medical Care - Evidence-based Exercise Prescription
June 26–29, 2001 in Kuopio, Finland.
Further details: please contact Puijo Symposium Secretariat: Kuopio Research Institute of Exercise Medicine, Haapaniemenkatu 16, FIN-70100 Kuopio, FINLAND, Fax: +358 17 288 4488; email: puijo.symposium@uku.fi
Web site: www.uku.fi/conf/puijo

National Athletic Trainers’ Association 52nd Annual Meeting and Clinical Symposia
19–23 June, 2001; Los Angeles Convention Center, Los Angeles, USA
Complete information is available on line through the web site www.nata.org; fax-on-demand service: +888 275 6285; Tel: +214 637 6282 ext 330.

Canadian Academy of Sport Medicine/Académie Canadienne de Médecine du Sport Annual Symposium and Stampede Sport Medicine Conference 2001
July 4–7, 2001; Calgary, Canada
Learning from the elite athlete: practical applications for the clinician is intended to provide practical education for the clinician regarding common and controversial aspects of sport medicine, as well as to allow the managemen of sport medicine problems.
Further details: Mme Jacqueline Burke at bureau national de l’ACMS à Ottawa: Tel: +613 748 5851; Fax: +613 748 5792; email: jburke@CASM-ACMS.org.
Web site: www.casm-acms.org

Sixth IOC World Congress on Sport Sciences
16–23 September, 2001; Salt Lake City, USA
Further details: Michele E. Brown, IOC World Congress Secretariat, Salt Lake Organizing Committee for the 2002 Olympic Games, 299 South Main Street, Suite 1300, P.O. Box 45002, Salt Lake City, UT 84111, USA. Tel: +801 212 3472; Fax: +801 212 2440; email: ioc.worldcongress@saltlake2002.com
Web site: www.iocworldcongress.org

20th BRUCOSPORT Meeting
19–20 October, 2001; Congress Centre, Brugge, Belgium.
Further details: Secretariaat Sportgeneeskundig Dagen AZ Sint-Jan AV, Ruddershove 10, B-8000 Brugge. Carine De Bruycker, Tel: +32 50 45 22 30; Fax: +32 50 45 22 31.
Web site: http://user.online.be/brucosport

Australian Conference of Science and Medicine in Sport
23–27 October 2001 Burswood International Resort Casino, Perth, Western Australia.
The theme for the 2001 Australian conference is “2001 A Sports Medicine Odyssey: Challenges, Controversies and Change” and will focus on what the future holds for sports medicine, especially following the Sydney Olympic Games.
Further details: Sports Medicine Australia, PO Box 897, Belconnen ACT 2616, Aus-
talia. Tel: +61 2 6230 4650; Fax: +61 2 6230 5908; email: smanat@smia.org.au
Web site: www.sma.org.au

Concussion in Sport
2–3 November 2001; Vienna, Austria.
International symposium organized by the International Ice Hockey Federation (IIHF) in cooperation with the International Olympic Committee Medical Committee, and the Federation Internationale de Football Association Medical Assessment and Research Center (F-MARC).
The conference will present scientific information on the epidemiology, on site management, treatment, grading, and pre-
vention of concussion in sport. Abstract sub-
missions are invited for the Symposium: Deadline 15 June 2001. An abstract submis-
sion form can be downloaded in pdf format from the IIHF web site: www.iihf.com.
Further details: Darlene Scheurich, International Ice Hockey Federation (IIHF), Parking 11, 8002 Zurich, Switzerland. Tel: +41 1 289 8614; Fax: +41 1 2898629; email: scheurich@iihf.com.

II European Federation Sports Medicine Congress
14–17 November 2001; Oviedo, Spain.
Further details: Tel: +34 902 105 873; Fax: +34 902 120 880; email: info@qz2c3.com.

www.bjsportmed.com
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Claire Hay

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