Proceedings: Symposium on the Future of Sports Medicine in Britain

Tuesday, November 26, 1974, at 10.15 a.m.
at
The Royal Society of Medicine, 1 Wimpole Street, London, W.1.

In the Chair RT. HON. LORD PORRITT, K.C.M.G., G.C.V.O., C.B.E., A.R.C.S.

CHAIRMAN'S OPENING REMARKS

May I take the opportunity first to welcome you all. We are very grateful to you for coming to this Meeting. I know you are all sufficiently interested in Sports Medicine to realise this is by way of being quite an important Meeting; important particularly I venture to say because as you will know Sports Medicine as such is well on the way to getting formal medical recognition. The subject of Sports Medicine has shown over the years that we have amongst us a great deal of enthusiasm, and a great deal of ability. It has not really been, I think, co-ordinated sufficiently yet. We have too many bodies at the moment, full of the same ability and enthusiasm, all working in their own particular directions, and it will equally be well known to you — and — I think it is quite fair to say that we do not, in this Country at the moment, stand particularly high in the International League of Sports Medicine. What I am trying to say is that I think there is enough ability here, and enough know-how for us to get together and become a force, not only in this land, but in other lands as well. In other words, I am quite sure what we should be aiming to do is to drive towards some co-ordination and more co-operation, and this I hope the following papers will bring out. In the first Panel, which is discussing in general Sport’s Problems, we have Dr. Raymond Owen from the British Olympic Association, one of our original sponsors from which the Association commenced, Mr. Lawson’s car has unfortunately broken down and we will put him into the programme if possible later because the C.C.P.R., dressed up in its new clothes is, I hope, rather an important part of the set-up to be.

Also in this section is Mr. Clinton Sayer from the Sports Council, one of the Organisations which is of course, of the greatest importance to the Association of Sport and Medicine.

SPORTS PROBLEMS

Dr. J. Raymond Owen (British Olympic Association)
Mr. Clinton Sayer (The Sports Council)

THE FUTURE OF SPORTS MEDICINE

J. R. OWEN, M.R.C.O.G.

British Olympic Association

I think the first thing one has to consider is what we mean by Sports Medicine.

Although one may say that it is quite obvious what is meant by it I do think that different people think of Sports Medicine in different ways, according to the context in which it is used, and very much according to the position which each individual plays in sport as a whole.

To some Sports Medicine means the treatment of athletic injuries almost exclusively, to others the treatment and care of competitors at major international meetings only, to others the treatment of competitors apart from actual competition, to others again the medical care of anyone taking part in sport generally, and finally research into the scientific aspects of sport, in some cases aimed at the health of those taking part, and in others with improvement in performance as its primary objective.

It therefore appears that sports medicine covers an
extremely wide field — certainly a much wider field than can be covered by any one individual specializing in it. I think, therefore, that in talking about sports medicine it is important to preface what one says with a statement of which aspect of the subject is relevant to the speaker.

In my own case I am trying to express the views of the British Olympic Association on the future of Sports Medicine, and I shall therefore be talking about it from the point of view of its importance with regard to:

a. Scientific research into any aspect of training, diet, travel, acclimatisation, or any of the many other things which may affect the competitor in his performance.

b. The care of the competitors, and treatment of his complaints in the years between the Games.

c. The care of the competitors at the actual Games themselves.

A RESEARCH

Any research into problems concerning sport, must in my opinion, comply with two basic principles.

1. It must always have at least some practical application to sport. It must never be allowed to become an end in itself.

2. Any competitors involved in the research must be taken fully into the confidence of those carrying it out, so that they understand the objectives, and they must, at the end be told the conclusions, whether these are positive or negative.

Another point that is sometimes overlooked, both by individuals and any organising committee, is that the right time for research is not at the Games themselves, when tensions are high, and the cooperation of the competitor difficult to obtain, but is much better carried out during the time between the Games, when there is usually no difficulty in getting competitors to take part in it. Research into the main problems which can affect the competitor, and his performance, are legion and it is in this field that sports medicine can, and surely will, play one of its most important parts. There are so many facets of sport in which problems requiring urgent elucidation exist, and this is certainly one of the principle fields in which the British Olympic Association is looking to the Sports Medicine Bodies to provide the answers. The British Olympic Association has neither the mandate, nor the facilities, to carry out this work — this is the job of others. But what we do urgently require is one body to which we can refer the many questions which come our way, and from whom we can hope to obtain reasoned answers based on the results of full scientific research.

B THE CARE OF COMPETITORS DURING THE YEARS BETWEEN THE GAMES

This again is not the job of the British Olympic Association. It is the job of those bodies geared and set up specifically to perform this work. We of the British Olympic Association welcome the opportunity to refer cases which may, from time to time come under our care, to Sports Medicine Bodies, and Clinics which we can trust not only to deal efficiently with those cases, but to keep us in the picture about progress, future expectations, and performance of the person concerned.

Again I feel it is important that the names both of individual specialists in Sports Medicine and Sports Medicine Clinics should be put on an officially recognised basis, so that reference to them, and cooperation with them, can be carried out without delay and with a knowledge of the competence of those to whom they are being referred.

C LASTLY, THE CARE OF COMPETITORS AT THE ACTUAL GAMES

This is certainly the duty of the British Olympic Association but not, I hope, without the advice and cooperation of the sports medicine bodies who may have been concerned with the treatment of the competitors during the intervening time. The more the cooperation between the sports medicine bodies and the British Olympic Association during the time between the Games can become a recognised and working partnership, the better, and the more efficiently, will this enable us to do our job at the Games.

In a similar manner to this F.I.M.S. and the International Association of Olympic Medical Officers each have quite separate and distinctive functions, but yet each is complimentary to the other. The first is concerned with the many aspects of Sports Medicine research over a wide field, and with the overall treatment of sports injuries, the latter is concerned solely with the problems of Team Doctoring.

I have recently attended both the meeting of the European Sports Medicine Congress in Budapest, and the Canadian and North American Congress in Montreal. As a result of this I cannot help feeling that sports medicine, at least internationally, is ‘Rearin’ to go’ but is lacking a real direction of the path to follow.

Some of the papers that were presented appeared to have no practical application to any aspect of sport, others a somewhat nebulous relationship, and only too many obviously groping for the really important aspects
of sport in which to channel their energies. Many of these people have great abilities, and excellent working facilities, and it seems a great pity that so much of their work should not come to the fruition which it deserves.

However, what of the future of sports medicine in this country? There is no doubt, to us at the British Olympic Association that there is an adequate supply here of people with the brain and ability to carry forward the work of sports medicine and to bring it to heights that can equal, or surpass, anything that is being achieved abroad. There are however, certain things lacking that require to be put right before this can happen:

1. Organisation and classification on a national basis, and adequate availability of clinics and individuals throughout this country dealing specifically with those aspects of medicine and sport.

2. Individuals and clinics, should receive sufficient financial support to enable them to work full-time in this speciality.

3. A sufficiency of adequate and up to date, equipment should be made available to them including computerisation on a wide scale. One has only to go to places like Maglingen in Switzerland, the National Institute of Sport in Paris, or East Berlin to be able to see how much we lack in the way of equipment in this country, and how infinitely more difficult this makes the tasks of those working here.

4. Lastly, does one dare to hope that in the future, and by that I mean the near future, there may be one united body for sports medicine in this country?

This I think, is extremely important. We in the British Olympic Association as well as Governing Bodies of Sport throughout the country would welcome having one Sports Medicine body to whom we could refer — one body recognised both here and internationally as representing sports medicine in Great Britain — one body in which everyone had confidence — one body responsible for the initiating and carrying out of research into many aspects of sports medicine so urgently needed.

Sports medicine in this country has made enormous strides over the last decade, and it is now an established entity. It has now, to my mind, reached the point from which it can only advance further, on the wide scale which we all want to see if it has the necessary prerequisites — organisation and classification on a national scale — direction and official encouragement — sufficient finance to enable full-time participation — equipment at least equal to that in other countries, and one united body under the auspices of which all facets of sports medicine can be correlated and operated.

Given these provisos sports medicine in this country has an unlimited future.

SPORTS PROBLEMS

Peter Lawson

The Central Council for Physical Recreation

Owing to a mechanical breakdown of his car en route to the Symposium, Mr. Lawson was unable to attend. No manuscript has been received.
J. R. Owen

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