The Health of Competitive Swimmers

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A Competitive Swimmer should possess:-

- a. Anatomical Fitness - absence of disease and a harmonious physiological co-ordination of the system.
- b. Psychological fitness for the event and the occasion.
- c. Physiological ability of the body to work under stress.
- d. Technical Skill.

About Swimmers

Some $\frac{1}{2}$ million in the U.K. - most are teenagers and have a modern outlook. Most enjoy a happy home life, but occasional parents drive them to success. Most are intellectually bright. Best swimmers tend to be extroverted. Can show resources in emergencies. Some excel at other sport. A lot of swimmers are lost to the sport around the age of 16 - 17, this may be due to studies or other interests.

Previous Medical Histories

Until about 10 years ago swimmers were medically examined on courses. Because some were medically unfit, this is now done by the family doctors some weeks before final selection is made. To date some 500 swimmers and fewer divers have been so examined. Previous illnesses include childhood fevers, pneumonia (common): several have been asthmatic. Tuberculosis of spine and primary tuberculosis not so common now, but were seen in the early 50's. Clinical examinations have revealed glycosuria (low renal threshold) and albuminuria (orthostatic), dental caries and otitis media. Furunculosis, athlete's foot, acne vulgaris are not uncommon skin findings.

Inoculations

The serious competitor should have inoculations kept to date. Smallpox vaccination is needed for travel and should be renewed every three years. Polio vaccination, B.C.G. (anti T.B.) vaccination are important.

Health on Courses

Much disability can be prevented by previous preparation and strains avoided by previous weight and circuit training. The eyes may get sore from swimming due to incorrect treatment of water. Towels, costumes, tracksuit, should be kept clean in order to prevent skin infection.

Otitis externa

Abrasions from towels or earplugs: scaly or localised boil and tenderness and ear may be tender and oedematous. Wax in ears should receive treatment before swimming or air travel. Otitis Media common in swimmers and divers - infection spreads from throat. Much more serious but prognosis is much better since the days of antibiotics. Chronic Otitis Media may, bearing in mind the possible complications, make competition undesirable. Nasal sinusitis can be caused by competing when a cold is present. May become chronic and require surgical intervention.

Championship Meetings

Call for special preparations - medical service in conjunction with local hospital advised when 1000 competitors or over are involved (e.g. in National Championships). Approximately 1500 competitors are confined together in a chlorinated hot-house - a wonderful environment for infection with close contact among competitors. A spectator may spread infection. Asian flu in 1957 and gastro-enteritis in 1961 and 1963 were outstanding examples and spread havoc amongst competitors and officials at the Nationals.

General Care of Swimmers and Divers

Menstruation presents few problems and does not of necessity impair performance. Divers sustain injuries due to hitting board or through bad entry, these may vary from cutaneous abrasions to cuts or fractures. From 10 metres injury to viscera can occur. Swimmers fracture fingers through hitting the end of the pool. A competitor at a meeting is a patient coming in many cases primarily for symptomatic relief. In International events, travel, diet, sleeplessness and climate, all present problems, but with a little care and planning many of them need not occur.