

EDITORIAL

This special number of the British Journal of Sports Medicine, Vol. 10 No. 2, is devoted to collected papers on clinical topics related to coronary heart disease and the place of exercise in its prevention and treatment, and to work on cardiological aspects of exercise physiology. The editor wishes to record his gratitude to Dr. Dan Tunstall-Pedoe for his help in reading and checking the clinical papers, and to Dr. Ernest Hamley for a similar service upon the physiological papers.

There is still much controversy in medical and physical education circles about the value of exercise in the prevention of ischaemic heart disease, as well as in the type of work that should be undertaken by the convalescent patient. It is a happy coincidence that this number of the journal was reserved for "the heart" at a time when the report of the working parties of the Royal College of Physicians made available their reports, and comments about these reports were made at a meeting arranged by the Scottish Area of BASM during the weekend of May 14th – 16th, 1976. The points covered by these two informal verbal communications at this meeting are included in this journal in the section devoted to "Proceedings". It is anticipated that by the time this journal reaches its readers, these Working Party reports will have been published widely by the Royal College of Physicians, and that most doctors in the U.K. will have received, or be receiving a copy. Dr. Hawthorne's paper discusses the epidemiology of coronary heart disease, including the place of exercise, and Dr. Semple deals with the problem of the after-treatment of the patient recovering from an ischaemic cardiac attack. Hypokinesia takes its place with smoking, high saturated fats in the diet, hypertension, diabetes and obesity as factors that increase the risk of ischaemic attacks, especially if two or more of these factors are present in any individual. Those engaged in sports medicine can play a big part in the education of the public, both by teaching, and by personal example, though it is unfortunate that so many of the pleasures of life are included in this list. We are, however, left with several pleasures, such as the benefits of exercise suitable to age and state of training, and a sensible approach to food and drink that do not require one to be too obsessional about it.

The leading article by Dr. Tunstall-Pedoe sets the problem in an unbiased and sensible way, and stresses the need to curb over-enthusiasm during the recovery stage following a coronary episode, but at the same time to encourage active supervised rehabilitation as soon as the patient is fit enough to undertake it. Reports from teams working in some of the London teaching hospitals follow, covering two pilot studies. The first, by a team headed by Dr. Malcolm Carruthers, is concerned with exercise in healthy middle-aged men, and the second, by Dr. Peter Nixon's team, is on secondary prevention, that is, the prevention of further attacks in coronary heart disease patients. The Department of Medicine of Edinburgh University have produced a study of exercise tolerance in athletes, reported by Dr. Leitch and Mr. Clancy. The physical effects of work in patients with chronic obstructive lung disease, using heart-rate to monitor the work load, is reported by Mr. Tudor Hale, a physical education lecturer; Miss Jean Spriggs, a clinical physiologist; the work was guided by Dr. Ernest Hamley, Reader in Human Biology, and this work is a good example of the multi-disciplinary approach that is needed so much in all aspects of sports medicine. More work on heart rate as an indication of exercise stress is reported by Messrs. Sykes, Page and Charlesworth, and a useful table of norms for a standard exercise test, the Åstrand-Ryhming, is produced by Dr. W. Marley and a statistician Dr. A. C. Linnerud, from the U.S.A.

THE BULLETIN OF THE B.A.S.M. — 'THE SECRETARY'S COLUMN'

In this section of the journal, besides the reports and balance sheets concerning the A.G.M. for 1975, and the list of members elected, we are now including a regular contribution from the Honorary Secretary, which will report upon the work of the Executive Committee, the place of the B.A.S.M. in national and international negotiations on sports medicine matters, and upon other items of interest and importance to our members and other readers. It is hoped that information can also be supplied about matters of concern elsewhere, perhaps by the provision of reports from the International Federation of Sports Medicine.

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The next issue of the Journal will again be a special number, this time devoted to the proceedings of an international symposium on dope detection. Although the symposium is being organised by the Racecourse Security Services Laboratory in Newmarket, the techniques used for drug detection in horses are applicable to detection in man, and the ethics and problems of marginal substances, and prohibited agents taken accidentally in food or proprietary medicines, apply equally to both classes of mammals. We are grateful to the Horse Race Levy Board for the promise of a substantial grant to help with the costs of this publication, and to the Organising Committee for inviting BASM to participate, and to be their first choice for a journal in which the proceedings should be published. It will be most interesting to see how a unit consisting of whole-time professionals devote themselves to sports medicine, even if it is of a specialised type, as their daily employment. We are sure that the doctors, veterinary surgeons and organic chemists participating in this symposium, will all have much to learn from each other.