The timing of publication of this issue of the Journal in relation to the Annual General Meeting of the Association makes this the last Secretary’s Column of my three year tenure of office and perhaps makes it reasonable to discuss the immediate problems now facing B.A.S.M.

When I first assumed the secretarial pen, some six years ago, we were beset by problems of recognition. The presence of the Institute of Sports Medicine was an embarrassment which was frankly preventing both bodies advancing the cause of sports medicine. Over the last six years, B.A.S.M. has clearly emerged as the leader in the whole range of sports medical activities apart from the actual provision, as an organisation as opposed to individuals, of sports medical services. We have established full residential courses annually, in accord with the International Federation syllabus, we have started specialist seminars, the British Journal of Sports Medicine has a formal academic Editorial Board and B.A.S.M. is generally recognised as the competent internationally affiliated body in sports medicine.

There have, however, remained problems of size and function and at the present we have to decide which way B.A.S.M. is to go next.

We have just surpassed the 800 mark for members, roughly half of whom are medically qualified, the other half possessing qualifications of professional standard in any relevant discipline.

We are big enough to be accused constantly of failure to produce services which we are frankly not funded or intended to produce. It is evident that the government and its agencies, such as The Sports Council, are in no position to establish sports medical services throughout the country and at the present time of extreme financial stringency throughout the public service, it is unlikely that public enterprise will be able to achieve much for five to ten years. At the same time sponsorship of top performers in sport is accelerating and it is now virtually accepted that sportsmen consist of two groups — a gladiatorial élite, largely subsidized by the public and privy purses, maintained largely for the entertainment of the masses, and the vast majority of sportsmen who seek simply to entertain themselves. The top sportsman is now becoming more and more dependant on professional backing in services as well as merely money and equipment. Who should be providing sports technical services?

The forthcoming A.G.M. is a convenient time in our history to consider our functions. We have got to the limits of a ‘club’ for size and manageability. It will simply not be possible for B.A.S.M. to provide any further functions or services without an element of professionalization. The Association may elect to remain as a club at no more than the present level of functions, or it may decide that it should expand towards a fully professional, or even commercial level. This is the main issue for the A.G.M. to decide.

The Executive Committee will be submitting its own recommendations to the A.G.M. in respect of proposed constitutional changes and various suggestions have been canvassed over the years. Regional organisation has never really worked, apart from in the Scottish area. A further possibility is of subdivisions by interests, along the lines of the American College of Sports Medicine which has clinical, physiological and Physical education divisions, each with its elected Vice-Presidents.

It is likely that the Executive will propose certain structural changes which it is hoped will make for a more effective possibility for growth in the Association’s functions in the next few years and particular matters being scrutinized include, yet again, the financial aspects of the Journal, and the setting up of initiatives with other bodies in the private sector of medicine for the provision of clinical services. This may become fairly important if the N.H.S. continues to find it impossible to maintain, let alone expand, its present level of remedial and diagnostic services.

Finally, we have the matter of title. One resolution has already been submitted for the A.G.M. ‘that the name of the Association be changed to the British Association of Sports Science and Medicine’ and this will be notified and debated in the usual way.

The implications of the Association’s title have, naturally to be considered. The cynic may well ask ‘what’s in a name, anyway?’ but whatever there may, or may not be, in our name, it seems there is enough in it for some members to wish to change it.
I, for one, am not really sure what a sports scientist is, science being defined as the state or fact of knowing knowledge acquired by study, acquaintance with or mastery of any department of learning, particular branch of knowledge or study or a branch of study which is concerned either with a connected body of demonstrated truth or with observed facts systematically classified. On the other hand, perhaps, I am not too sure what ‘sports medicine’ is either! Medicine is described as the science and art connected with the cure, alleviation and prevention of disease and with the restoration and preservation of health. If we have Oxford to thank for these definitions, then we must thank Strasbourg for the Council of Europe definition of ‘sports medicine’ as “application of the art and science of medicine from a preventative and therapeutic point of view to the practice of sports and physical activities in order to utilize the opportunities afforded by sport for maintaining or improving health and to avoid possible dangers.”

Part of the motivation underlying the proposed change of title is that “sports science tends to be seen as a branch of sports medicine, dominated in this country by two Associations whose hierarchies are mainly from the medical profession, and whose members are mainly untrained as scientists”.

While the easy arrogance of those who, in one sentence, demolish the scientific basis of medicine will be tolerated easily by the broad and compassionate shoulders of the medical profession, perhaps we have a broader duty as an Association to consider the interests of all our factions. A change of title may well be a valid proposition, but why to only “sports science”? It seems to me that a very plausible case could be made for making our title serve all our members fully and that we should henceforth be known as the British Association for (not of, to be pedantic) Sport and Biochemistry, Coaching, Ergonomics, Genetics, Medicine, Nursing, Paediatrics, Physical Education, Physiology, Physiotherapy, Psychology, Remedial Gymnastics, Surgery, Traumatology and Venereology, to name but the majority. Alternatively, we could change to British Association of Sports Technology, but I doubt whether even this would legitimize the Organisation in the eyes of some.

Anyway, for once in three years, your future is in your hands. If the membership does not take an interest in its future, then there really isn’t going to be anything in a name after all.

News Item
The Société Médicale Belge d’Éducation Physique et de Sports have elected our Editor and Treasurer Dr. H. E. Robson, an Honorary Member.

BRITISH ASSOCIATION OF SPORT AND MEDICINE

Notice is hereby given that the Annual General Meeting of the Association will be held at 2.00 p.m., on Wednesday, 25th May, 1977, at the Royal Society of Medicine, 1 Wimpole Street, London, W.1.

Members are strongly urged to take part in the whole day’s proceedings during which possible constitutional changes submitted by the Executive Committee will be debated.

At the A.G.M. Elections will be held for the Committee and all Offices.

Any member wishing to make proposals on the above should communicate with the Hon. Secretary urgently.

Owing to the importance of matters to be debated at this meeting, it has been necessary to advance the commencement of the Annual General Meeting to 2.15 p.m.

The meeting scheduled to commence at 10.00 a.m. will consist of short papers on general themes related to sports medicine.

By Order of the Executive Committee,

P. N. Sperryn,
Honorary Secretary.
MEETINGS OF OTHER ORGANISATIONS

ONE-DAY SEMINAR — SATURDAY, MAY 14th, 1977
LIVERPOOL POLYTECHNIC

Organised by the Physical Education Department of Liverpool Polytechnic and
the Association of Chartered Physiotherapists in Sports Medicine

9.45 a.m. Registration

10.15 a.m. — 12.30 p.m. 1st session
Communications on psychology of the injured Sportsman and fitness testing after injury.
Speakers include Vaughan Thomas, Dennis Wright and Leon Walkden.

2.00 p.m. 2nd session
Demonstrations of Coaching practices in rugby and association football, given by the Staff
of the Physical Education Department.
Discussion on weight-training and hockey followed by group discussions.

Enquiries and requests for detailed programmes should be sent to:

Vaughan Thomas, Esq., Ph.D.
Dept. of Physical Education, Liverpool Polytechnic,
Byrom Street, LIVERPOOL L3 3AF

British Society of Sports Psychology

10th Annual Conference

The Society’s 10th Annual Conference at Lady Mabel College of Education, near Rotherham, is from 2nd — 4th
September 1977. Further details may be gained by writing to:—

Dr. G. J. K. Alderson, Ph.D., M.A., B.Ed.,
C/o Faculty of Human Movement Studies,
Lady Mabel College,
Wentworth Woodhouse,
Wentworth,
ROtherham,
South Yorks, S62 7TJ

A varied programme is envisaged with appeal to both the practical and the theoretical in Sports Psychology.
NEW MEMBERS

The following were elected by the Executive Committee on January 12th 1977.

ORDINARY MEMBERS

Mr. R. Beal, M.Sc., 5 Eaton Sq., Barnburgh, DONCASTER, S.Yorks
Mr. D. A. Brown, J.P., M.S.R.G., Dept. of Physical Medicine, Bucknall Hospital, Nr. STOKE ON TRENT, Staffs.
Dr. P. J. Burrows, 7 Greenhill Ave., LUTON, Beds.
Dr. Eiona Conacher, 17 Braehead Rd., EDINBURGH, EH4 6BN
Mr. R. Davison, M.S.R.G., Dept. Physical Medicine, Bucknall Hospital, Nr. STOKE ON TRENT, Staffs.
Mr. S. Gamble, B.Ed., Pingle School, SWADLINCOTE, Derbyshire
Dr. R. E. Herbert, D.A., 133 St. John’s Ave., KIDDERMINSTER, Worcs.
Dr. S. Herbertson, 172 Banbury Road, OXFORD
Mr. B. Holmberg, Physio (Norway), sveene 35, Åfoss, 3700 SKIEN, Norway
Dr. J. Kenwright, Ph.D., F.R.C.S., Manor House, Dorchester on Thames, OXFORD
Miss Margaret E. Langhorn, M.C.S.P., 130 Windermere Road, Moseley, BIRMINGHAM
Dr. W. L. Mosterd, M.D., Daam Fockemalaan 92, AMERSFOORT, Holland
Mr. K. Padayachi, B.P.E., P.O. Box 70, NASEA, Labasa, Fiji Islands
Dr. D. T. Protheroe, D.A., Royal United Hospitals, Coombe Part, BATH BA1 3NG
Dr. A. Salem, M.D., 8 de Junio 616, CONCEPCION DEL URUGUAY, Entre Rios, Argentina
Dr. H. Sless, 294 Dyke Road, BRIGHTON BN1 5BA

STUDENT MEMBERS

Mr. A. M. Cheesbrough, 24 Greville Drive, Edgbaston, BIRMINGHAM B15 2UU
Mr. B. A. Crompton, 12 Arden Ct, 90 Church Rd., Perry Barr, BIRMINGHAM B42
Mr. C. J. Worringham, University House, Edgbaston Park Road, BIRMINGHAM 15

Proposed by:

E. Hamley
H. Robson
J. Williams
H. Robson
D. A. D. MacLeod
H. Robson
H. Robson
A. Dunnill
T. Andersen
J. Williams
P. Sperryn
G. van Enst
H. Robson
H. Robson
B. Fearn
H. Robson
N. Tubbs
H. Robson