EDITORIAL

The bad news first — as anticipated, there was agreement at the Annual General Meeting of the British Association of Sport and Medicine that there should be a significant rise in all subscriptions, and details are given in the Bulletin section of this number. The rise operates from January 1st, 1982, and new Banker’s Order forms are included — Library subscribers and agents will be informed in due course.

We welcome several new contributors, including three teams from Scandinavia. The first article, by Hammer and his co-workers raises some important points relating to the use of the trampoline in schools and gymnastic clubs. As with so many strenuous activities, risks must be weighed against educational benefits and the promotion of courage and adventure, and it is difficult to legislate at which point the risks become unacceptable. The official policy of the Danish Education Authority is now that the risks of injury from the trampoline outweigh the benefits, so this activity should be deleted from the physical education programme. Compared with Rugby football, riding, skiing and canoeing, the risks do not seem too high, but another paper from the same team, at present with a referee, gives details of six serious injuries treated at one hospital.

Tysvaer and Storli report upon the incidence of cerebral trauma, fortunately most of it of little or moderate significance, amongst Norwegian football players due to heading the ball. Before the advent of the light-weight plastic ball, a wet mud-coated leather one must have exerted considerable force, and makes one wonder how many “eccentric” ex-footballers are actually suffering from the boxer’s punch drunk syndrome with its associated mental instability, and excess of tobacco, alcohol and sex.

The third Scandinavian paper, by Pääkönen and his Finnish colleagues, is of most importance to orthopaedic surgeons, and reinforces what most of us were taught about the prolonged application of tourniquets during our medical curriculum or in first-aid courses.

Lesions of the talus, often unsuspected and not infrequently undiagnosed, are described by Israeli and his orthopaedic colleagues.

There are two papers on physiology; further work on blood lactate by Greg Gass et al in Australia, and a technical validation of the Åstrand-Ryhming nomogram for calculating maximum oxygen intake. Work done amongst Swiss athletes is reported by Kunz and Kaufmann, on the mechanics of sprinting.

Two articles break away from the usual papers on traumatology or physiology. Stimulated by the current interest in “Marathons” of all types, R. Grogan has tried to find out the true facts about the original run by Pheidippides (no relation to our own occasional correspondent who writes under that name) after the battle of Marathon.

Finally our only contribution from the United Kingdom is an account by Peter Sperryn, who besides being the Secretary of BASM is also a member of the American College of Sports Medicine, of an interview with Allan Ryan, Past-President of ACPSM and an Honorary Member of BASM.