EDITORIAL

1968!

At the beginning of this year of 1968, there is a feeling of uncertainly, internationally, nationally, in sport as well as politics, economically, in sport as well as in politics and everything else, and these factors affect the interests and activities of your Association. The ever present tension between East and West, especially between the U.S.A. and the U.S.S.R., leads to a feeling of mutual suspicion in all aspects of daily life, as well as in the sphere of political and military rivalry, and we sincerely hope that the Autumn of 1968 does not lead to the spread of hidden or open conflict from Vietnam, Korea, Berlin, the Middle East, to Mexico. In spite of the good intentions of the organisers and politicians of countries participating in the Olympic Games, no opportunity seems to be missed by some to make the Games a political manoeuvre. The sensible inclusion of a multi-racial South African team leads immediately to the withdrawal from the Games of some ten other African countries, and a violent protest from the U.S.S.R. who sides with the 'oppressed', but does not select or offer to select a multi-racial Russian team, Red and White. We have seen already in the Winter Olympics the espionage and counter-espionage needed to detect and bring official action to bear upon such procedures as warming the runners of toboggans. The multitude of different events in the Mexico Olympics give a greater chance for similar evasions of the official laws of the sports, or perhaps worse still, of the unwritten ethics. It is too much to hope that no athlete will contemplate the use of dope to improve his performance, or of anabolic steroids to assist in his muscular development, although nearly all countries participating condemn these practices. For this agreement, and for the awakening of the consciences of doctors and administrators concerned with Sport, tribute must be paid to the International Olympic Committee, and especially to our own representative, Sir Arthur Porritt, whose opinions and recommendations were put forward so convincingly. These were backed by the factual evidence on doping collected by our Hon. Secretary, Dr. J.G.P. Williams, and other members of this Association concerned with the techniques of sample collecting and analysis developed by Professor Arnold Beckett and his team at Chelsea College of Science and Technology. The pilot projects in two Tour of Britain cycling races, and in the World Cup Association Football championships have shown the feasibility and reliability of mass dope testing that should act as strong discouragement at a time when drug dependance is becoming a serious national and international problem in an increasingly permissive society.

The detection of the anabolic steroids is a much more difficult problem, as they are present normally, but in quantities that vary enormously from one individual to another. Restriction of their manufacture or sale present problems, as these substances are of such value in the treatment of the chronic sick, the elderly, and those suffering
from terminal wasting conditions. A related topic is that of correct sex determination, and the difficulties are discussed in this number of the Bulletin by Professor Bernard Lennox, the pathologist and geneticist from the Western Infirmary, Glasgow, who presented a paper to the Scottish area of B.A.S.M. at the meeting at the National Recreation Centre at Inverclyde last November. Technical improvements in microbiology, especially of the counting and identification of chromosomes, enable sex testing to be done by scrapings from the mouth, and avoid the detailed, often controversial clinical examination of women athletes that is so resented.

Apart from the political complications of the Olympic Games, there are physiological and clinical ones of importance. To an Everest explorer, the altitude of Mexico City of some 2,300 metres, or 8,000 feet, is insignificant, but to an athlete competing at this altitude in long distance or long duration events, some physiological stress is likely unless the speed of the event is reduced, there is a reasonable period of acclimatisation allowed, and the athlete is really fit. The British Olympic Association asked the B.A.S.M. to set up an ad hoc Medical Advisory Committee, under the chairmanship of Sir Arthur Porritt, and Dr. L G.C. Pugh, the M.R.C.'s altitude physiologist, was among those coopted. His study of six distance runners in Mexico City is now well known, and copies of the report, including the clinical observations of Dr. J. Raymond Owen, Medical Officer Elect to the British Olympic Team, have already been offered to B.A.S.M. members by the B.O.A. (and a few are still in stock at the Treasurer of B.A.S.M.'s address). Apart from the problem of altitude, it is likely that heat and solar radiation will provide additional hazards, and work on the temperature stresses is in progress at the M.R.C.'s Human Physiology Laboratories in Hampstead. This project is being carried out by a B.A.S.M. member, Dr. Elizabeth Ferris, and we hope she will achieve the same success in a research career as she did earlier as an Olympic Diver. Recent work by this team was reported to the B.A.S.M. at the Symposium on Acclimatisation held at St. Mary's Hospital Medical School on Nov. 25th 1967, and an account of this work is included in the Proceedings of this symposium. A paper by Surgeon Rear Admiral Miles on heat adaption, and a report by Dr. P.M.O. Massey on cold adaption, are also included.

The plea in the Bulletin a year ago for original manuscripts has borne some fruit, and we are grateful to Dr. D.H. Elliott for the report on his experimental work on the strength of tendon, with its useful bibliography, and to Dr. J.M. Henderson for his discussion of the psychophysiology of motor racing drivers. We are also indebted to the Editor of 'The Rifleman', and the Secretary of the National Smallbore Rifle Association for permission to reprint the article on noise by Acton, Coles and Forrest, which was carried out at the instigation of one of our members, Dr. L.H. Lerman.
We are still appealing for original articles for the Bulletin, of completed research, research in progress, and especially for clinical reports. With the facilities offered by the printers, we can easily produce line diagrams, but can also print half-tone photographs if a suitable gloss print of good quality can be supplied. It is felt by many members that much, perhaps too much, of the emphasis of the work of the Association is devoted to the physiology of exercise, and to reports of laboratory work rather than to clinical matters. With this view, we would agree, but if papers are not submitted for presentation at meetings, or if articles of clinical interest are not submitted for publication, they cannot be circulated. We can only print what we receive. Case reports, especially if illustrated by photographs and X - Rays, are of value, and can be a great help in adding to our collective knowledge of the aetiology and treatment of sports injuries. We still hear of fit young men with locked knees being subjected to general anaesthesia for the reduction of a locked knee, put into plaster of Paris for a few weeks, then re-admitted to hospital months later for menisectomy with another general anaesthetic. Apart from the anaesthetic risk being doubled, the athlete subjected to this routine can virtually be "written off" as a competitor for the season, - possibly for the next season as well, and some regretably for ever.

The programme for the coming year has been planned, the first meeting being the Annual General Meeting on Saturday April 6th, (the weekend after the Boat Race), which is to be held during a symposium on "Team Medical Problems", at St. Mary's Hospital Medical School. The Convenor for this meeting is the Conference Secretary, Dr. Peter Sperryn, of Redhill General Hospital. Full details are given later in this issue. On Saturday July 13th, a joint meeting will be held with the Society of Remedial Gymnasts, at Loughborough College of Education (Convenor: Dr. H.E. Robson). In the Autumn, at the University of Salford, there will be a symposium on the Medical aspects of Rugby Football (Convenor: Mr. Don Masterson, University of Salford, Lancs.). Papers for these three meetings will be welcome, and should be submitted to the appropriate Convenor, or to the Conference Secretary of the Association.

At the Annual General Meeting, all Officers of the Association have to be elected, and there will be several new Committee members to be elected as well. The Association has lost its Chairman and co-founder, Sir Arthur Porritt, and we wish him all success in his new appointment. It is with great sadness that we mourn the death last December of the other co-founder, Sir Adolphe Abrahams, our President.