

LETTERS TO THE EDITOR

The ethics of boxing

EDITOR,—I read the article on sport medicine and the ethics of boxing¹ with disappointment this month. It rehearsed arguments that are already familiar to sports physicians faced with difficult decisions about how to approach boxing, without taking things further on. In addition, there are medical, social, and ethical points that are not fully addressed in the article.

Medically, epidemiological studies have established that there are a number of popular sports in which the injury and mortality statistics are greater than in boxing. A ban or boycott in rugby, equestrianism, or formula one car racing has not been contemplated by the medical profession.

Socially, the background of most doctors ensures that, unlike some other high risk sports, the cultural significance of boxing in some parts of our society is extremely poorly understood. Boxing represents a relatively safe and desirable alternative to other possible activities for some young people, and it is often the continuation of a family heritage.

Ethically, one cannot separate the desire of boxers to succeed from the financial and social encouragement that is widely offered to those at the top level by people with money and influence. These individuals, and not the boxers, are the ones who should be targeted by those who want to change the status quo.

Personally, the boxers with whom I have been privileged to work have been among the most honest, friendly, and unassuming of the athletes I have encountered. They have a strong tradition of self discipline and decency that puts some other sports, and sometimes the politics of their own sport, to shame.

I do not believe that any sports physician can approach boxing feeling totally at ease with the ethics of their position, but a practical, sensitive, and informed debate is what I, for one, would really appreciate.

CHARLOTTE COWIE
Barbican Health, London

1 Leclerc S, Herrera CD. Sport medicine and the ethics of boxing. *Br J Sports Med*. 1999;33:426-9.

Author's reply

This letter was shown to the authors, who reply as follows:

Dr Cowie alleges that we simply "rehearse" familiar arguments about boxing. In fact, boxing attracts scant attention in the literature, beyond proposals that would ban it outright or take a complete "hands off" approach. Interestingly, Cowie attributes a position on banning boxing to us, despite our statement that "we... offer only qualified support for these efforts".

As we argue, the case for boxing is weak. However, we advocate a position that continually accommodates new evidence, including clinical, sociological, and psychological data on why athletes box; the risks they assume; and the factors that shape the perception of this sport.

Cowie remarks that physicians tend to misunderstand "the cultural significance" that boxing has "in some parts of our society". This is hard to argue against, if only because perfect

empathy with patients rarely occurs in the clinical encounter.¹ The key seems to lie in what one makes of this potential for misunderstanding. For her part, Cowie claims that boxing is a "relatively safe and desirable alternative to other possible activities". This strikes us as vague, bordering on evasive.

Desirable, or relatively safe, compared to what?

As one researcher warns, "it is hard to think of a sporting practice that has been so thoroughly mythologised and so little researched by social scientists".² The prevalent belief, glamorised by Hollywood, that boxing is for many a ticket out of the ghetto, lacks empirical support, and there is room to question the moral relevance that this portrayal would have anyway. First, some evidence shows that even boxers intent on turning pro come mainly from the working classes. Secondly, if criticism would deny such boxers a shot at a promising future, we wonder what was so promising about it in the first place. And if boxers have few "safe and desirable alternative[s]", criticism of boxing is less a threat to the boxer than the threat of injustice, that of having to choose between the risks in boxing and those associated with, say, crime and poverty.³ Boxers who feel compelled to box suffer diminished autonomy long before they feel the effects of our commentary. The economic inequities that Cowie mentions, between the athletes and their handlers, only compound this injustice.

Finally, Cowie accuses us of overlooking the risks in "rugby, equestrianism", and motor racing. Admittedly, these sports give rise to injustice, exploitation, and excessive health risks. There is also the possibility of destructive violence in contact sports like boxing and hockey.⁴ We grant that many sports deserve increased moral and medical scrutiny, as does the possible link between high risk sport and aggressive, violent behaviour in ordinary interaction.⁵ Yet this hardly means that our interest in boxing is misplaced. One can analyse a few aspects of boxing while also welcoming broader dialogue regarding sports and the physician's obligations.

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BOOK REVIEWS

Sports medicine handbook. Eds R Hackney, A Wallace. (Pp 512; £75.00.) BMA House, Tavistock Square, London WC1H 9JR: BMJ Books, 1999. ISBN 0-7279-1031-0.

Having recently taken up the post as medical officer to a 2nd division football club, I was pleased to have a chance to read and review

this book, hoping it would plug the not inconsiderable gaps in my knowledge. It covers almost the whole spectrum of sports medicine, from training, stretching, and drugs, through the management of injuries in both adults and the young athlete, with chapters on orthoses, braces, taping techniques, and the principles of rehabilitation.

The chapter authors are, with two exceptions, from British posts and give each chapter a slightly different flavour, which I found refreshing. Generally the text is well laid out with bullet points and boxes containing "take home messages". The coloured diagrams are clear and informative and the many colour photographs are excellent. The actual page size is relatively small, however, and although it will fit in your kitbag, one downside of this is that many of the x ray pictures and scans are too small to see what is going on, even with the caption as a clue!

I found it a most informative book, exploring the subject in considerable detail. The sections on injuries were excellent, dealing with the relevant anatomy and history, with good descriptions of the examination techniques involved and management.

I was a little disappointed with the head and neck injury chapter. At the end of it, I still felt unhappy about giving advice on return to contact sport after concussion and would have liked to have seen more practical details on assessment included along the lines of the American Academy of Neurology report of 1997. This is perhaps a small grumble. The preface suggests that the book is suitable for coaches, physiotherapists, and doctors; it has certainly achieved its aim.

Analysis

Presentation	11/20
Comprehensiveness	18/20
Readability	18/20
Relevance	18/20
Evidence basis	13/20
Total	78/100

DESMOND THOMPSON

Blackheath, London

Lecture notes on human physiology. J J Bray, P A Cragg, A D C Macknight, R G Mills. (Pp 610; £19.95.) Oxford: Blackwell Science Ltd, 1999. ISBN 0-86542-775-5. All books are available from Blackwell Science Ltd, Osney Mead, Oxford OX2 0EL. Tel: 01865 206206, Fax: 01865 721205.

My immediate impressions when opening this text were that it is comprehensively written but at the same time may appear daunting, especially to undergraduate students. However, on reading the text, it becomes readily apparent that the subject matter is well described in a digestible manner. The flow of the text is aided by the fact that no references are included in the text. A list of relevant references at the end of each chapter would, however, have been useful for the reader to gain further insight into areas of interest. The numerous diagrams intersperse the text well and are relevant, but the text drastically required colour to make the read more interesting and, most importantly, eye-catching. It was, at times, like watching a 1950s black and white film. The chapters themselves were well subheaded and divided into manageable sections. I found the text a little small in places, even with my glasses on, and felt that the contents page was not informative enough. The abbreviations at the start of each

chapter were useful and helped to give a feel for what was to come. I think that a brief summary at the end of each chapter would have been useful, covering the key elements that the chapter highlighted. From a sports science perspective, the text is interesting in places but there is much peripheral material that may be more relevant to the human physiologist (for example, the chapters on sensory systems and higher nervous functions). Some sections are pertinent but the reader needs to be selective, as though picking the chocolate chips off the cookie. As a biochemical text, the book is excellent and there are comprehensive sections on the cardiovascular and respiratory systems. It would not be the first text that I would reach for on the bookshelf, but I would be comforted in the fact that it was there if needed.

MARK DE STE CROIX

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Legal aspects of physiotherapy. B C Dimond. (Pp 496; paperback; £29.50.) Oxford: Blackwell Science, 1999. ISBN 0-632-05108-6.

My first thought on receiving this book for review was "Oh good a new doorstep!" My second was "Imagine the medico-legal nightmare one would have to be in to wade through 496 pages!"

First impressions, however, are not always accurate. Closer examination reveals a book not just to turn to in times of strife, but one which could be instrumental in helping to avoid it.

The author writes clearly and concisely, from the list of abbreviations at the beginning to the glossary of legal terminology at the end, taking great care to produce understandable and readable text.

The book is divided into five distinct parts, each dealing with a different aspect of how the law relates to day to day physiotherapy practice.

It begins with education registration and professional conduct: a good basic guide for undergraduates and newly qualified physiotherapists of the statutory regulations of state registration and professional discipline.

Vital information on "client's" (I think that means patient's!) rights, confidentiality, consent, and access to records is provided in the second section.

Record keeping and health and safety are among the issues covered in section 3, with good examples of how inadequate records and procedures can easily lead to serious problems.

Parts 4 and 5 address management, both NHS and private practice, and specialist client groups. Both sections are divided into short easy to read sections.

In conclusion, a good reference book containing easy to find advice on many professional issues. If I do use it as a doorstep, it will only be to make sure it is always within easy reach!

Analysis

Presentation	16/20
Comprehensiveness	18/20
Readability	16/20
Relevance	20/20
Evidence basis	20/20
Total	90/100

MARGARET REES

Course Principal, Society of Orthopaedic Medicine

Foot orthotics in therapy and sport. S Hunter, M G Dolan, J M Davis. (Pp 141; soft cover; £31.00.) Leeds: Human Kinetics Europe Ltd, 1995. ISBN 0-87322-829-4.

This book lacks vigour and colour. The front cover looked promising but unfortunately the book does not live up to this promise. It is an out of date basic book which is disappointing, considering the biography and experience of the authors.

The pictures and illustrations are of poor quality, inadequate description, and in some instances confusing. In my opinion, the use of the skeleton to illustrate foot and leg movement is a very poor idea. If the intention was to present a three dimensional appreciation of specific joint position and movement, this exercise failed to achieve that objective.

I also felt that the chapters were jumbled up and waffly. The book could have been better organised by a reduction in the number of chapters and more concise writing.

This book is ideal for a clinician who is a novice and has little or no knowledge of clinical biomechanics of the lower limb. It will also benefit undergraduate students of physiotherapy and podiatry, as it is adequately referenced and provides basic concepts of biomechanics and use of foot orthoses in the management of some common musculoskeletal pathologies in sport. Not one for my book shelf!

Analysis

Presentation	11/20
Comprehensiveness	10/20
Readability	12/20
Relevance	15/20
Evidence basis	10/20
Total	58/100

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NOTES AND NEWS

Benefits and Hazards of Exercise

Benefits and Hazards of Exercise, a book compilation of updated review articles from the *British Journal of Sports Medicine* has had excellent reviews and continues to climb the list of medical bestsellers. There is an increasing market for sport and exercise medicine literature, not just within the medical profession but also throughout the sport and leisure industry. Following the success of this venture, the *BMJ* and Royal College of General Practitioners have organised a superb conference addressing the most important aspects of the benefits of exercise and how to get the population active. The conference will be at the Chelsea Village Conference Centre on Thursday 15 June and, following the success of Chelsea Football Club both at home and abroad, many delegates will relish the opportunity to visit this famous ground. Further details are available from the Royal College of General Practitioners Courses Unit (tel: 0171 823 9703; email: courses@rcgp.org.uk).

Forthcoming conferences

June is the month for sports medicine conferences. After many years of famine, we now have two major conferences on sport and exercise medicine in London on successive weeks. The Royal College of Physicians have put together a high quality meeting focusing on Exercise Prescription on 8 June with details available from the Conference Administrator, Royal College of Physicians, 11 St Andrew's Place, Regents Park, London NW1 4LE.

Mike Turner has put together an excellent conference on tennis injuries to coincide with the Wimbledon season (23-25 June). This is a superb conference which will attract all racket sport enthusiasts. Among the speakers are Per Renstrom, Savio L-Y Woo, and Ben Kibler, and these are just a few of a host of sports medicine stars. Wimbledon attracted some adverse comments in recent years about the provision of sports medical care. No one can fault their response with this outstanding programme.

American College of Sports Medicine annual conference

The American College of Sports Medicine annual conference promises a large BASEM presence this year. Ron Maughan features on a number of events. Nic Mafulli, winner of the AIRCAST prize 1999 has been chosen to give the BASEM lecture on tendon injuries. There is also a unique opportunity to learn about the systems of peer review and how to get into print in three of the world's medical journals. Tom Best, from the University of Wisconsin, Madison and former editor of the *Clinical Supplement of Medicine, Science, Sport and Exercise* joins with Winne Meuwisse of the *Clinical Journal of Sports Medicine* and Domhnall MacAuley of the *British Journal of Sports Medicine* in a discussion on how to publish in the sports medical press. A must for budding authors.

Annual Scottish BASEM meeting

Out door pursuits enthusiasts congregated at Glenmore lodge, near Aviemore for the annual Scottish BASEM meeting entitled The Upper limb and Beyond. Introduced by Jane Dunbar, who has done so much to promote this meeting in the past, the weekend with a wonderful success and remains one of the highlights of the sports medicine calendar.

London marathon

The 20th London marathon brought thousands to the streets again in April, but also brought a large group of doctors to a superb medical conference, coordinated by Dan Tunstall-Pedoe, at the Royal Society of Medicine. Highlights of the conference included lectures by Ron Maughan, Roger Wolman, and Martyn Shorten.

UK Sports Institute

The UK Sports Institute continues to progress and Roger Moreland was recently appointed to lead the project. Many will remember that Roger spoke at the 1999 BASEM conference and gave us some insight into how he perceived the development of the medical side of sport. He emphasised the importance of sport and

exercise medicine and how it should be an integral part of the package offered by the Institute. We can look forward to a fruitful partnership in the future.

Institute of Sports Medicine

The Institute of Sports Medicine recently announced details of their annual awards for 2000. These are, arguably, the most prestigious awards in British sports medicine and attract considerable national and international interest. The Prince Philip Medal in Sports Medicine is the highest award. It will be presented to a doctor who has made an outstandingly significant and original contribution to the advancement of medical knowledge or technique in the treatment of sports injuries, or of psychological and/or physical conditions brought on by participation in particular sports. The Duke of Edinburgh Prize for Sports Medicine is awarded for outstanding contribution to clinical and/or research work in the field of sports medicine in the community. The Sir Robert Atkins Award will be awarded to the doctor who has provided, for not less than five years, the most consistently valuable medical (clinical/preventive) service to a national sporting organisation or sport in general. Further details of all these awards are available from the Secretary, The Institute of Sports Medicine, The Royal Free and University College Medical School, Charles Bell House, 67/73 Riding House Street, London W1P 7LD. The closing date is 1 September 2000.

British Olympic Association

The Olympics are drawing closer and most medical teams are well into their preparation for the event. Few nations will have a medical team as well organised as that coordinated by Richard Budgett, Director of Medical Services for the Great Britain team. On 6 May, the medical team met at Northwick Park Hospital, home of the British Olympic Medical Centre, for their first orientation course and heard presentations on many aspects of the Olympic medical adventure. This included all the expected topics: jet lag, doping, medical and physiotherapy support, but also held a few surprises with a talk on the flora and fauna of eastern Australia.

BASEM congress 2000

The final programme for the BASEM Congress 2000 is now available. It takes place from Friday 3 November until Sunday 5 November at the Hilton Puckrup Hotel in Tewkesbury in association with the British Olympic Medical Centre and the British Olympic Association, together with the Association of Chartered Physiotherapists in Sports Medicine. The international keynote

speakers are Bob Cantu, a world authority on sporting head injuries from Concord Massachusetts, and Norbert Bachl who will address the challenge of sports medicine in health promotion. All enquiries and bookings for the conference should be made to Mrs Sue Roberts, BASEM Company Office, 12 Greenside Avenue, Frodsham, Cheshire WA6 7SA. The research papers and poster session will be coordinated by Mrs Lindsay Thomson FASIC, Centre for Sport and Exercise, The University of Edinburgh, 46 Pleasance, Edinburgh EH8 9TJ (tel: 0131 650 2578; fax: 0131 557 6398; email: lindsay.thomson@ed.ac.uk).

AIRCAST Travel Fellowship

The AIRCAST Travel Fellowship will be awarded once again at the BASEM conference and the recipient will deliver a lecture outlining their research on the evening of 4 November. Details of the submission criteria for the AIRCAST Travel Fellowship are available from Dr Ian Adams, 25 Parish Ghyll Drive, Ilkley, Yorkshire LS29 9PT.

CALENDAR OF EVENTS

Exercise and sport: the pros and cons for health

15 June 2000; London, UK
Further details: Jennifer Goulding, Courses and Conferences Organiser, Royal College of General Practitioners, 14 Princes Gate, Hyde Park, London SW7 1PU. Tel: 0207 581 3232. Fax: 0207 589 1428

National Athletic Trainers' Association 51st Annual Meeting

28 June–2 July 2000; Nashville, Tennessee, USA
Further details: NATA, PO Box 911758, Dallas, TX 75391-1578, USA. Tel: (301) 694 5243. Fax: (301) 694 5124. Website: www.nata.org

Rehabilitation and rheumatology 2000: unlocking the door of disability

29 June–1 July 2000; Bath, UK
Further details: Janet Crompton. Tel: 01453 549929. Fax: 01453 548919. Email: janetcrompton@compuserve.com

5th Annual congress of the European College of Sport Science

19–23 July 2000; Jyväskylä, Finland

Details from: ECSS, University of Jyväskylä, PO Box 35, FIN-40351, Jyväskylä, Finland. Tel: +358 14 603160. Fax: +358 14 603161. Email: ecss@pallo.jyu.fi
 Website: www.dshs-koeln.de/ecss

1st Latin American meeting in orthopaedic sports medicine

26–29 July 2000; Santiago, Chile
Details from: Chilean Soc Sp Med, Av. Las Condes 9792 Oficina, 206 Santiago, Chile. Email: info@sochmedep.cl
 Website: www.sochmedep.cl

British Association of Sport and Exercise Sciences Annual Conference

29 August–1 September 2000; Liverpool, UK
Further details: BASES 2000, Event Management Services, Egerton Court, 2 Rodney St, Liverpool L3 5UX. Tel: 0151 231 3585. Fax: 0151 709 5057. Email: ems@livjm.ac.uk

2000 Pre-olympic scientific congress

7–13 September 2000; Brisbane, Australia
Further details: Congress Manager, Sports Medicine Australia, PO Box 897, Belconnen Act 2616, Australia. Tel: +61 2 6251 6944. Fax: +61 2 6253 1489. Email: smanat@sma.org.au

19th congress of sports medicine

13–14 October 2000; Bruges, Belgium
Further details: Dr Michel D'Hooghe, President Brusport, Hospital AZ Sint-Jan AV, Rudderhove 10, B-8000 Brugge, Belgium. Tel: +32 50 452230. Fax: +32 50 452231. Email: brucosport@azbrugge.be
 Website: <http://user.online.be/brucosport/index.htm>

1st Moscow International Forum: Sport medicine science and practice on the eve of the 21st century

20–25 October 2000; Moscow
Further details: Organising Committee of the Forum, Yachshuk AM, Zemlyanoi Val 53, Moscow. Tel: +7 928 29 92

Multiple choice questions—answers

p 162: Ram FSF, Robinson SM, Black PN, Effects of physical training in asthma: a systematic review

1 (d); 2 (b); 3 (c); 4 (e); 5 (a).