Bone density in elderly women

EDITOR,—In the article by Rhodes et al1 “Effects of one year of resistance training on the relation between muscular strength and bone density in elderly women”, I was surprised to see no mention of HRT status in the women in the trial. Given the relatively small number of women taking part, surely this is quite an important variable?

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Who should be blinded?

EDITOR,—I was very pleased to read the recent article by Eston and Rowlands2 on the various stages of development of a research project. It is important to have papers on research methodology that deal specifically with sports science/medicine examples. Even though the authors described the paper as “a brief guide to the most common sequence of stages”, it nevertheless addressed many good points about research design. However, their description of blinding was perhaps oversimplified, disregarding experimental design in some areas of sports medicine research. They stated that in a single blind study the participants do not know which treatment they are receiving, and in double blind studies neither the participants nor the tester know which treatment the participants are receiving.

Research in sport and exercise medicine encompasses a number of professions, who differ in the way they provide treatments and interventions. In some of these disciplines, the way the intervention is administered will influence the way the intervention is perceived. Blinding the outcomes that are blinded.

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The genetics of physical fitness

EDITOR,—Might I briefly comment on Dr Lavin’s observation that elite athletes, whom he classes as “freaks”, “are as removed from real life as it is possible to be”? “Real life” is what is all around us, from the homeless in the street to the most highly paid sports, pop or business stars. Humphry Lyttelton, whose jazz talents took him on a different career path from his high positioned family, was told once by his uncle “Yours is a different world”. To which he replied “No, it is the same world as yours, only bigger”. Elite competitors have a talent which they market to their best and brief advantage, as do many in the creative arts, sciences, and professions. They also bring enjoyment to many of our lives, and are no more—and no less “freaks” than genetic outliers in any of the talents.

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Serum concentrations of P-selectin decline rapidly in resting humans

EDITOR,—In assessing the health benefits and risks of physical activity, there has been much interest in the relation between exercise and the immune and inflammatory responses. However, only a very limited number of studies have examined the role of exercise on adhesion molecule profiles. P-selectin (CD62P) is an adhesion molecule expressed on activated platelets and endothelial celland is one of a group of related molecules that play an important role in leukocyte rolling on the vascular endothelium. Therefore it is intimately involved in the regulation of immune and inflammatory responses. Circulating forms of several adhesion molecules, including P-selectin, have been observed in humans, and elevated levels may reflect acute infection or inflammation. Alterations to the concentration of circulating adhesion molecules have also been associated with increased risk of specific diseases. High levels of soluble P-selectin, for example, have been associated with cardiovascular risk.

My colleagues and I are interested in the influence of smoking on the aetiology of chronic inflammatory periodontal disease and have recently completed a study in which we observed the acute in vivo effect of smoking a standard 2R1 research cigarette on the serum concentration of a range of adhesion molecules and on adhesion molecule expression on circulating monocytes and neutrophils. As part of the experimental protocol, all subjects, who were apparently healthy, rested in a dental chair in a semi-reclined position for one hour. There were no statistically significant differences between the serum levels of soluble P-selectin of heavy smokers (n = 9; serum cotinine concentration ≥100 ng/ml), light smokers (n = 10; serum cotinine concentration ≤60 ng/ml), and non-smokers (n = 10; serum cotinine concentration ≤10 ng/ml) at baseline. However, an incidental and unexpected observation was that soluble P-selectin concentrations fell significantly over the one hour rest period, independent of smoking status, as shown in fig 1.

It may be relevant to note that Kirkpatrick et al3 reported an increase in soluble P-selectin on repeated exercise in subjects with intermittent claudication. They concluded that the rise in soluble P-selectin after exercise may indicate progressive platelet
Activation. Jilma et al had previously shown that, in healthy men, exercise could lead to an increase in the serum concentration of soluble intercellular adhesion molecule-1, another adhesion molecule involved in the chain of receptor-ligand interactions regulating leukocyte transmigration in inflammatory and immune responses.

We have shown that a period of rest can lead to a rapid decrease in circulating concentrations of soluble P-selectin. This observation is, to the best of our knowledge, entirely novel and may represent an important insight into the complex relation between physical activity and the inflammatory response. Further studies by those with expertise in sports physiology and medicine may be warranted.

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Exercise at altitude

Editor,—In the early sixties I established a base camp at altitude (19 340 feet (5985 m)) of 6 hours and 48 minutes, and my colleague (and current Lon-


For the British reader, there are perhaps too many references to American food products and RDAs referring to nutrients per pound body weight or to 8 oz of fluid, whereas we are now thinking in terms of kg and 100 ml respectively.

Analysis

Presentation
Comprehensiveness
Readability
Relevance
Evidence basis
Total


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Dilemmas in sport: a journey through ethics, the law and medicine

The Institute of Sports Medicine together with the Sports Medicine Section of the Royal Society of Medicine have organised a meeting entitled “Dilemmas in sport: a journey through ethics, the law and medicine”. This all day meeting will take place on 8 November 2000 at the Royal Society of Medicine in London. A wide range of speakers from the world of sport, politics, and the law will address many of the controversial aspects of sports medicine including the ethics of boxing and drugs in sport. John Liddell Parry, a BASEM stalwart, is the current President of the section of Sports Medicine at the RSM.

Diploma in Sport and Exercise Medicine, Great Britain and Ireland

This two part diploma examination will be held twice a year. Part 1 of the examination, consisting of a multiple choice question and short essay paper will be held in April and September in London, Glasgow, or Dublin. Successful candidates will proceed to part 2 of the examination in either June or November. This consists of an oral and a clinical, based on two OSCEs, and will be held at a single centre which will rotate every six months.

Further details: Examinations Department, Royal College of Surgeons in Edinburgh, Nicolson Street, Edinburgh EH8 9DW. Website: www.rcsed.ac.uk

19th congress of sports medicine

13–14 October 2000; Bruges, Belgium

Topics include:
- Sports physiotherapy
- Children and sports
- Arthroscopy and sports traumatology
- Medical ethics, doping, and sports

Further details: Dr Michel D’Hooghe, President Brucosport, Hospital AZ Sint-Jan AV, Ruddershove 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.

Symposium: training, overtraining, and regeneration in sport—from the muscle to the brain

26–28 October 2000; University of Ulm, Germany

Topics include:
- Training and regeneration in sports
- Metabolism, training, and monitoring
- Cellular protection and immunological function
- Muscular adaptations and stress proteins and cytokines
- Peripheral mechanisms for adaptation and regeneration
- Hypothalamic hormonal regulation and the central nervous system

Further details: Dr JM Steinacker, Abt. Sport und Rehabilitationsmedizin, Medizinische Klinik und Poliklinik, Universitätsklinikum Ulm, 89070 Ulm, Germany. Tel: +49 731 502 6966; fax: +49 731 502 6686; email: org.sportmed@medizin.uni-ulm.de

Website: www.uni-ulm.de/sportmedizin
An introduction to sports physiotherapy
28 October 2000; Wales, UK
Further details: Dawn Walling. Tel: +44 (0)20 7251 0583 x 238; email: dawn.walling@nsmi.org.uk

British Association of Sport and Exercise Medicine congress
3–5 November 2000; Tewkesbury, UK
Final bookings should be received by 2 October 2000.
Lectures include:
● Muscular conditioning during space station MIR flight
● Health enhancing physical activity—an upgrowing challenge for sports medicine
Please note that there have been some small changes to the congress programme.
Further details: Mrs Sue Roberts, BASEM Company Office, 12 Greenside Avenue, Frodsham, Cheshire WA6 7SA. Tel/fax: 01928 732 961; email: baseoffice@compuserve.com
Website: www.pmhcs.com/basem

20th national congress of the Société Française de Médecine de Sport: Physical activity, sport and health
6–8 December 2000; Paris, France
Topics include:
● Physical activity and fertility
● Sport and aging
● Rehabilitation
Further details: Pranacom, 40 rue des Blancs Manteaux, 75004 Paris, France. Email: pranacom.ifrance.com
Website: www.sfms.asso.fr

True or false?—answers
(T = true; F = false)
p 326: Petrella RJ. Is exercise effective treatment for osteoarthritis of the knee?
1(a) T; (b) F; (c) F; (d) T 2(a) T; (b) T; (c) F; (d) F 3(a) T; (b) T; (c) T; (d) T 4(a) T; (b) T; (c) T; (d) T 5(a) T; (b) F; (c) T; (d) T.