LETTER TO THE EDITOR

Sports medicine education

EDITOR,—I read the section on sports medicine education in the August issue of the journal with great interest because of the issues raised for all of us involved. It stimulated me to raise two points.

Firstly, although it is desirable for undergraduate medical students to be introduced to sports medicine, it does seem to be an area of practice that seems very appropriate for continuing medical education and for postgraduate qualifications. Although a case can be made out for medical practitioners who wish to practice full time in sports medicine, the number of such practitioners will be relatively few. The much greater need is for the "up-skilling" in sports medicine of medical practitioners whatever their practice—family medicine, emergency medicine, rehabilitation medicine, paediatrics, orthopaedics. There is a great need for much better "duty of care" in sports medicine practice by local medical practitioners with regard to promotion of physical activity, recreational sport, school and regional sporting teams, and community sporting and physical activity events.

Secondly, the useful article by Professor Peter Fricker on sports medicine education in Australia does contain statements that require correction for the public record.

He states that there are two classes of medical practitioners with an interest in the practice of sports medicine in Australia: sports physicians and "sports medicine practitioners". In fact, there are now two discipline bodies representing medical practitioners in Sports Medicine Australia, the Australian College of Sports Physicians and Sports Doctors Australia, members of which quite properly refer to themselves as sports doctors, either possessing a Masters of Sports Medicine or demonstrating a continuing involvement in sports medicine. This new body was formed two years ago in response to a request from Sports Medicine Australia to represent doctors who wished to incorporate sports medicine into their existing practice.

In referring to the sports medicine programmes at the University of New South Wales in Sydney, Professor Fricker states that the teaching in these programs is carried out by "sports physicians and researchers". In fact, in the distance delivery postgraduate programs (MSPMed, GradDipSpMed, GradCertSpMed), teaching is conveyed in weekly video presentations in which the contribution of sports physicians is 20%, valuable particularly in the area of musculoskeletal medicine. As is to be expected in the multidisciplinary area of sports medicine, 80% of teaching is provided by medical physiologists such as myself, cardiologists, rehabilitation physicians, rheumatologists, ophthalmologists, anatomists, respiratory physiologists, orthopaedic surgeons, sports scientists, sports dietitians, sports psycholo-

gists, pharmacologists, biomechanists, radiologists, physiotherapists, sports lawyers. This distribution of teaching load also holds in our CME one week courses.

DAVID GARLICK

President, Sports Doctors Australia
Director, UNSW Sports Medicine Programs
School of Physiology and Pharmacology
Sydney 2052, Australia
d.garlick@unsw.edu.au
www.med.unsw.edu.au/sportsmed
www.sportscience.unsw.edu.au
www.sportsdoctors.com.au

BOOK REVIEW

Homoeopathy for sports, exercise and dance. Emlyn Thomas. (Pp 337; soft cover; £25.00.) Beaconsfield, Bucks: Beaconsfield Publishers, 2000. ISBN 0-906584-48-5.

As a physical education teacher and trampoline coach currently travelling around the world, I found this book a welcome fuel injection for the brain.

Homoeopathy and other complementary therapies are fields of knowledge in which I have always had a general interest. However, formal education has in some way prevented my ability to look beyond the sphere. This book has given me a starting point and an insight to the value of homoeopathic remedies. It has convinced me that there are other options to consider when an injured athlete is not responding effectively to medical treatment.

Emlyn Thomas cleverly emphasises the important link between the physical and mental traumas incurred by an athlete. I found his holistic approach to recovery both inspiring and logical. For the modest PE teacher there is a lack of certainty involved in making an accurate diagnosis of injury.

The *Materia Medica*, while having content and specificity, was a bit beyond my comprehension using third form Latin. Like most new skills, it would require a fairly steep learning curve to understand and apply this new depth of knowledge to the rehabilitating patient.

Homoeopathy for sports, exercise and dance is a comprehensive, well sequenced document. The content is informative and accessible. There is a bonus section, which offers remedies for everyday health problems from asthma to sciatica. Considering the scope of information in this book, coaches, sports therapists, athletes, physiotherapists, and others in related fields may find something of value.

I would not have purchased the book myself, but I am sure that I will be consulting it—even if it is only for altitude sickness in the Rocky Mountains or sleeplessness in Seattle. It may even be the start of a new direction in my career. At the moment it will stay in my backpack and come around the world with me.

Analysis

Presentation	15/20
Comprehensiveness	17/20
Readability	17/20
Relevance	11/20
Evidence basis	14/20
Total	74/100

PATRICIA FEARON

5/16 Warren Avenue, Three Kings,
Auckland, New Zealand
Trishafearon@hotmail.com

CALENDAR OF EVENTS

5th Annual Conference on Self Directed Learning in General Practice

24th April 2001; London, UK

Organised by the Open Learning Unit, University College London, and sponsored by the British Medical Journal.

The conference will be organised around the themes of:

- revalidation
- web based learning resources for self directed learning.

The day will be based around small group workshops, with some offering hands on training in the use of online learning resources. Places will therefore be strictly limited and allocated on a first come, first served basis.

Further details: please contact Marcia Rigby on m.rigby@ucl.ac.uk; tel: +44 (0)20 7288 3246; fax: +44 (0)20 7281 8004.

UK Radiological Congress

21–23 May 2001; London, UK

Further details: UKRC Secretariat, PO Box 2895, London W1A 5RS, UK. Tel: 020 7307 1410/1420; fax: 020 7307 1414; email: ukrc@dial.pipex.com

Website: www.ukrc.org.uk

Concussion in Sport

2–3 November 2001; Vienna, Austria

Organised by the International Ice Hockey Federation (IIHF), this conference will present scientific information on the epidemiology, on-site management, treatment, grading, and prevention of concussion in sport. Abstract submissions are invited for the symposium.

Further details: Mr Dave Fitzpatrick, International Ice Hockey Federation (IIHF), Parkring 11, 8002 Zurich, Switzerland. Tel: +41 1 289 8600; fax: +41 1 289 8622; email: fitzpatrick@iihf.com

Multiple choice—Answers

p 8; Daly RM, Bass SL, Finch CF. Balancing the risk of injury to gymnasts: how effective are the counter measures?

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