

AMSSM thematic issue: care of the female athlete

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INTRODUCTION

Athletic opportunities for females have come a long way since the passage of Title IX in the USA in 1972, and the first Olympic women's marathon in 1984. More than three million girls participate in high-school sports each year in the USA; there have been consecutive increases in participation in the past 24 years. With a steady rise in participation, come the positives and negatives. The positives range from improved academic performance in school age individuals to enhanced well-being in older athletes, in addition to many other benefits that extend across the lifespan. Negative consequences are inevitable, but are largely preventable. In this issue, several articles highlight the impact of sports and exercise on the health of female athletes.

FEMALE ATHLETE TRIAD AND MORE...

Dr De Souza and colleagues¹ review the existing literature and present guidelines on clearance and return to play for athletes affected by the Female Athlete Triad. This document provides the needed guidance to physicians worldwide in caring for those affected by low energy availability, menstrual dysfunction and/or impaired bone health. Dr Goldstick and Dr Constantini² highlight the prevalence of urinary incontinence in active women, noting that it is common, under-reported and under-treated. Between 28% and 80% of top female athletes report urinary incontinence. Heightened awareness of this condition, along with implementation of the evaluation and treatment recommendations outlined in the article, would improve the management and likely outcomes. Not surprisingly, pregnancy is a common cause of subsequent urinary incontinence. Dr Morkved and colleagues³ provide an excellent review of the

literature on the effect of pelvic floor training during and after pregnancy as a strategy to prevent urinary incontinence.

Pregnancy can also be an opportunity for women to improve their physical activity and fitness level to optimise their health and the health of their developing fetus. The meta-analysis by Luo⁴ examining physical activity and the risk of gestational diabetes mellitus (GDM) broadens our understanding of the mechanisms by which activity can prevent GDM. Finally, Dr Nicola Brown⁵ addresses mastalgia (breast pain) a little known problem faced by endurance athletes, and how it impacts their participation. Clinicians need to be proactive in assessing this type of breast pain as part of the preparticipation evaluations, and when considering dropout from sport. Exercise-related mastalgia can be prevented.⁶

BURNOUT: AMSSM POSITION STATEMENT

AMSSM position statements such as that on concussion^{7 8} carry substantial weight and are widely downloaded and cited. We publish the result of AMSSM's consideration of burnout in youth sport.⁸ Led by AMSSM President Dr John Di Fiori, the statement highlights particular injuries that can make the clinician suspect the 'at-risk' child, ways to make the diagnosis and guidelines for prevention and treatment. The Executive Summary is in the print issue while the rest of the paper is available on the journal's website. Additional substantive material can be found as a web appendix. We will discuss this key issue further via the AMSSM website as well as on the popular *BJSM* blog (<http://blogs.bmj.com/bjasm/>).

ANNUAL MEETING: APRIL 5–9 NEW ORLEANS

As this AMSSM-themed issue goes to press, our attention moves to New Orleans and the 2014 Annual Meeting (April 5–9). This is the largest annual primary care sports medicine focused conference and its reputation for congeniality and networking opportunities is unrivalled. International keynotes include Professors Mark Batt (UK), Peter Fricker (Australia) and Peter

Brukner (Australia/UK). See this link for the programme (<http://bit.ly/1bGCXQm>). Clinicians can benefit from the premeeting Ultrasound Workshop. Just a few highlights from the programme include 'What does it mean to be a team physician', 'Managing gluteal and hamstring injuries' and 'When disaster strikes—the role of the team physician as a first responder'. The conference programme also includes discussion of the Female Athlete Triad and exercise during pregnancy.

We hope you enjoy this AMSSM-edited thematic issue of *BJSM*. You can follow The American Medical Society for Sports Medicine on Twitter (@TheAMSSM). Feel free to send ideas for future AMSSM-themed issues to Dr Tyler Wadsworth (ty.wadsworth@sbcglobal.net).

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