Tackles, tears and troubles… a South African Sports Medicine Association perspective

Jon Patricios¹,²

RUGBY RETURNS
Rugby Sevens returns to the Olympics this August after an absence of over 90 years. South African Seabolo Senatla, pictured on the cover, is one of a number of international Rugby Sevens players with poetic-sounding names. Akira Ioane (New Zealand), Nathan Hirayama (Canada), Collins Injera (Kenya) and Savenaca Rawaca (Fiji) have titles of similar allure for rugby commentators. The truly international reach, fast pace and tempo of the sport viliﬁed the Olympic motto of ‘Citius, Altius, Fortius’. However, the debates surrounding the risks of collision sport, the discussions around injury epidemiology and prevention as well as the ubiquitous grey cloud of doping are unlikely to evaporate in the midst of Olympic euphoria. This South African Sports Medicine Association (SASMA)-led BJSM edtion scrutinises these aspects of sport.

TACKLES…

The contentious call by a group of UK-based ‘health experts’ for a ban on tackling in school rugby¹ has provoked much print and social media comment,² both oﬃcial³ ⁴ and provocative.¹ The widely followed Dr Ross Tucker carefully analyses the data in a global context (see page 921). He illustrates how assessment, estimation and evaluation of risk should precede policy implementation. Banning tackling at youth level may actually have detrimental eﬀects for the sport. Read why.

An emerging theme in the sports and exercise medicine literature, and collision sport in particular, has been that of injury prevention. With the tackle identiﬁed as the main area of concern, has been that of injury prevention. In the sport. Read why.

TEARS (…AND TESLAS)
A recurrent ACL tear must be one of the most despondent scenarios faced by an athlete (and the medical team). Lead author Polivios Kyritsis, from Erik Wintrow’s Qatar group, eloquently outlines six key discharge criteria for mitigating rerupture risk. These are key ﬁndings for rehabilitation therapists, who would do well to print out Yann Le Mœur’s (@YLMSportScience) accompanying infographic (see page 952). This paper deserves the wide access (free) that comes with being Editor’s Choice. In a similar vein, PhD candidate Nirav Maniar illustrates how isometric strength, passive straight leg raise and dynamic strength measures can guide return-to-play decisions after hamstring tears (see page 909). And, from China and Germany, Dr Wei Dong’s systematic review and meta-analysis examines tennis elbow ‘tears’ (see page 900). Who has not been tempted to opt for the ‘quick ﬁx’ option of a corticosteroid inﬁltration?

Today, most would associate the term ‘Tesla’ with South African-born disruptor and billionaire Elon Musk’s electronic car company. But the ‘T’ more pertinent to musculoskeletal radiology is the unit of magnetic ﬂux density applied to MRI. In two editorials, Professor Ali Guermazi and Professor Frank Roemer ask the pertinent question, ‘How often has 3T changed my treatment decision compared to 1.5T?’, and then outline the uses for T2 mapping and compositional MRI for diagnosing articular cartilage damage (see pages 894 and 896).

TROUBLE
What would the Games be without a doping scandal? Will meldonium, that well described ﬁrst-line therapy for diabetes(!), raise its head? (by the way, @dnunan79 wrote an excellent BJSM blog on the topic⁵). Hong Kong’s Professor Chan advises on avoiding doping trouble and comments on research into psychological, social and educational variables (see page 989).

PROUDLY SOUTH AFRICAN
Rounding oﬀ the South African contributions is Professor Martin Schwellnus and colleagues’ SAFER study, which spotlights the high incidence of acute illness in competing endurance runners and the beneﬁts of pre-race medical screening (see page 939). Martin has recently become Director of the Institute for Sport, Exercise Medicine and Lifestyle Research, Faculty of Health Sciences, University of Pretoria. This is an IOC research centre (one of only nine in the world).⁶ While enjoying the poetic rhythm of the Sevens Rugby Olympians, look out for some excellent work from this clinical and research group as South African sports clinicians continue to tackle issues, prevent tears and avoid trouble.

Accepted 19 June 2016
doi:10.1136/bjsports-2016-096591

REFERENCES