Drowning in a tsunami of online resources? Time to take stock and re-invent

Benjamin Waller 1, 2, Kati Pasanen 3, 4, 5, 6

DROWNING IN A TSUNAMI OF ONLINE RESOURCES? TIME TO TAKE STOCK AND RE-INVENT

Since lockdown and travel restrictions have been in force, there has been a tsunami of online courses, webinars, congresses and all other forms of learning platforms. The plethora of cancelled congresses led to a rush to put all the content online and deliver it through the computer. All great at saving time, but is trying to apply our old habits to the new norm useful? Let us be completely honest with ourselves, do we pay attention for 6 to 8 hours in an online congress? NO and NO (not that we ever did at a congress either, but there were better distractions often in the form of constructive debate with colleagues). Online congresses cannot provide the same opportunities to meet people during coffee breaks and social activities. Networking, meeting new people and conversations are often more valuable than congress sessions. Ask any student now forced to study at home, do they watch a 1½-hour lecture fully while taking endless notes or do they just turn their video off and possibly listen while completing another assignment? Everyone seems busier than ever and trying to push through the COVID-19 challenges, which might be the wrong approach. Let us stop, take a breath and see where we are headed (figure 1). We need to reinvent the congress but retain the interactions that we all crave.

1Physical Activity, Physical Education, Sport and Health (PAPESH) Research Centre, Sports Science Department, School of Social Sciences, University of Reykjavik, Reykjavik, Iceland
2SUFT, Finnish Sports Physiotherapy Association, Finland, Finland
3Sport Injury Prevention Centre, University of Calgary, Calgary, Alberta, Canada
4Tampere Research Center of Sports Medicine, Ukk Institutti, Tampere, Finland
5Alberta Children’s Hospital Research Institute, University of Calgary, Calgary, Alberta, Canada
6McCaig Institute for Bone and Joint Health, University of Calgary, Calgary, Alberta, Canada

Correspondence to Dr Benjamin Waller, Physical Activity, Physical Education, Sport and Health (PAPESH) Research Centre, Sports Science Department, School of Social Sciences, University of Reykjavik, 101 Reykjavik, Iceland; benw@ru.is

SPINNING OUT OF CONTROL

The problem goes deeper than having to listen to a speaker’s dulcet tones and waxing lyrical about evidence-based practice in sport and exercise medicine (SEM) online. The wealth of information pushed through social media is at the point where the systematic acquiring of literature is now performed more through Twitter than PubMed. The pressure to be evidence-based clinicians is growing exponentially and contact with the research presented in social media has the risk that many links take the reader to title and abstract only. Full access to the paper may be denied by paywalls in journals. Spin and confirmation bias are commonplace in some (but not all) of the more outspoken of the Twitter fraternity.1 The importance of all SEM clinicians having the intrinsic skills of evaluating published research is highlighted in the Delphi work conducted by Humphries and colleagues (see page 81).

However, research that has grabbed the clinician’s attention does not always have a positive outcome (although it helps having followers). Two of the top five most influential physiotherapy studies have a negative result, as highlighted by Amorim and colleagues (see page 78). Understanding how qualitative research can be used to answer pertinent research questions is still greatly underused. Its importance is highlighted in Caroline Bolling’s PhD Academy award to apply qualitative research to the traditionally very quantitative research subject of injury prevention (see page 125). The diversity of the factors influencing the athletes’ health is well described in the paper by Professor Urho Kujala (a Finn) (see page 77).

STANDING AT THE CROSSROADS

The chaos caused by COVID-19 needs to be embraced and has given the SEM community a moment to stop and look to find new solutions for our current challenges from the clinician working at the grassroots level to international sporting committees. There are many issues that additional research alone will not solve. For example, there is sufficient evidence that physical activity is beneficial for older adults and people with chronic conditions.2 The challenges for implementing this research are not new. At the Third World Congress of Sports Physical Therapy (IFSPT congress) in Vancouver 2019, Rod Whiteley and Christian Barton led a great session on the challenges of implementing research and lack of current success. Should we be taking this moment in time to stop, redirect our focus and put implementation research high among our priorities? Gray and colleagues highlight the importance of using implementation frameworks to achieve optimal success at achieving change (see page 84).

Taking one step back can be positive, as highlighted in the editorial by Professor Teppo Järvinen (also a Finn), when looking at the well-publicised effect high-quality research has had on arthroscopic surgery in the management of some common musculoskeletal complaints.3 For example, consider the 5-year follow-up study comparing arthroscopy to either diagnostic arthroscopy or exercise for shoulder impingement syndrome by Paavola and colleagues (see page 99). (A third Finnish study, we declare our bias, Finland is a small country but is a high hitter in research quality). This subject is not without contention, and the editorial by Engbreten and Moatshe highlight the need for critical appraisal of research and its implementation.4 These discussions were

Figure 1 As highlighted on the cover of this issue, COVID-19 has given us the chance to stop, take a deep breath and re-invent ourselves.
Warm up

often held face-to-face at congresses, which now seems like a luxury.

SUFT CONGRESS 2021

2020 was not a great year for congress organisers, and like other organisations, the Finnish Sports Physiotherapy Association (SUFT) has been forced to postpone its congress ‘The athlete’s pain’ until 11th or 12th June 2021. At the time of writing this warm-up we are currently planning the congress to be run as a hybrid congress and an update will follow soon. SUFT is committed to ensuring that our congress will be an interactive experience for all participants, using all the modern technology available. A congress is not just about the content but also about the interactions that happen around the schedule and during the free time and is the one time of the year when friends and colleagues all meet in one place. The congress has always been an occasion where clinicians and researchers can discuss the topics together. Our wonderful speakers have agreed to support the content as much as possible, even though this may be done in part remotely. We hope you will join us.

Twitter Benjamin Waller @BenWaller78

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ORCID iDs
Benjamin Waller http://orcid.org/0000-0002-0738-0670
Kati Pasanen http://orcid.org/0000-0002-0427-2877

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