SASMA

SOUTH AFRICAN SPORTS MEDICINE ASSOCIATION

The Voice of South African Sports Medicine

The South African Sports Medicine Association is an internationally recognised, a-political, non-profit, multidisciplinary professional and scientific society dedicated to co-ordinating and integrating a high standard of medical, scientific and educational services in sport, exercise and health in South Africa



Take Action! Inspire Change

18 July: Nelson Mandela International Day

FOR FREEDOM, JUSTICE AND DEMOCRACY



"It is easy to break down and destroy. The heroes are those who make peace and build."

- Nelson Mandela

Every year, on 18 July, the Nelson Mandela Foundation challenges people around the world to spend 67 minutes helping others. Specifically held on his birthday, this day is more than a celebration of Madiba's life and legacy, it is a global movement for good and a step towards changing the world for the better. Although 18 July is highlighted as a day to raise awareness for this campaign, the clear message is that every day should be a Mandela day and that every South African, and people worldwide, should act in solidarity for the good of humanity.

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According to the Nelson Mandela Foundation, Mandela Day actions, no matter how big or small, should consistently focus on the restoration of dignity and empowerment through contributions.

So what can you do?

The United Nations' official "Nelson Mandela International Day" Website gives some suggestions on how you can take action and inspire change: (source: http://www.un.org/en/events/mandeladay/index.shtml)

- Make a new friend. Get to know someone from a different cultural background. Only through mutual understanding can we rid our communities of intolerance and xenophobia.
- Read to someone who can't. Visit a local home for the blind and open up a new world for someone else.
- ➤ Help out at the local animal shelter. Dogs without homes still need a walk and a bit of love.
- ➤ Help someone get a job. Put together and print a CV for them, or help them with their interview skills.
- Many terminally ill people have no one to speak to. Take a little time to have a chat and bring some sunshine into their lives.
- > Get tested for HIV and encourage your partner to do so too.
- Take someone you know, who can't afford it, to get their eyes tested or their teeth checked.
- Donate a wheelchair or guide dog, to someone in need.
- > Buy a few blankets, or grab the ones you no longer need from home and give them to someone in need.

To see all 67 suggestions, visit the Nelson Mandela Foundation site on http://www.mandeladay.com/content/landing/what-can-i-do



SASMA 2020 Vision

2020 Vision

- 1. Grow and diversify membership
- 2. Build a strong brand
- 3. Grow participation in the regions
- 4. Achieve multi-discipline integration

2016 Priorities

- 1. Rebranding
- 2. Website face-lift
- 3. Secure sponsors
- 4. Review accreditation policy and membership registration process for implentation in 2017



#Time2Serve #BeTheChange #MANDELADAY

"What counts in life is not the mere fact that we have lived. It is what difference we have made to the lives of others that will determine the significance of the life we lead."

Nelson Mandela

ACSM 2016

63rd Annual Meeting Boston, Massachusetts 31 May – 4 June 2016

We came. We saw. We're here to make our mark.

South Africa was superbly represented at this year's ACSM. Not only did we feature on the cover of the programme (!), but also as invited speakers, presenters, and panelists. It was heart-warming and inspiring to see senior and junior colleagues stand tall amongst the best of the best in Sports Science and Exercise Medicine internationally.

"I was proud to be South African and to see that Sport and Exercise Medicie is alive and well in SA."

Prof Martin Schwellnus

"Thanks for flying the [SA] Flag High!"

Dr Pierre Viviers

"Onward and upward everyone!!! What a great S.A. Team!!"

Prof Wayne Derman

These are just a few of the utterances from proud South Africans who attended the 63rd Annual ACSM meeting in Boston. With a 4 day line-up of more than 500 lectures and workshops covering 12 topical categories, ACSM 2016 lived up to the expectation of a programme jam-packed with rich content for clinicians, scientists, physiologists, researchers and students.

South African highlights included numerous excellent poster and podium case and research presentations; a Tutorial Lecture by Dr Jon Patricios entitled "The Return of Olympic Rugby"; an "Endurance Race Event Coverage" and "On Pace with the world" marathon symposium featuring Prof Martin Schwellnus; and an Exercise is Medicine symposium on "Disability and Physical Activity" featuring Prof Wayne Derman.



As a final highlight, and testiment to the strides being made in South Africa, SASMA received glowing recognition for hosting an outstanding ACSM Team Physician Course at the 2015 SASMA Congress.





8 KEY INVESTMENT PRINCIPLES TO SUPPORT YOUR INVESTMENT DECISIONS





1. A sound financial plan helps build confidence regardless of what the market is doing

Your financial plan should be tailored to your particular financial needs and risk profile. It should include your goals, current financial position and make adequate provisions for the future. It's important to review it regularly with the help of a financial adviser.

2. A diversified portfolio will help to manage your risk

A sound financial plan includes a balanced portfolio of investments with shares, bonds, cash and property, invested in both local and international markets.

Combine a range of different asset classes to ensure that you don't have too many eggs in one basket. The result is a lower level of overall risk, while still enjoying exposure to potentially inflation-beating returns.

3. Always consider your investments as a whole

In any diversified portfolio there will always be times when one asset class outperforms another. Property may go up as shares come down. International investments may prosper when local markets fall. It's the total return over the longer term that matters. Our portfolio managers manage this exposure on your behalf, ensuring your Old Mutual portfolio is positioned in context of prevailing market conditions.

4. It's time in the market that counts, not timing the market

No one knows with certainty when markets will rise or fall. Trying to time the market is not only stressful, it is very seldom successful. It is far better to use time to your advantage. The sooner you start investing, and the longer you invest, the more likely you are to make a handsome return - regardless of the ups and downs along the way.



5. Over the long term cash is unlikely to deliver the returns needed to outpace inflation

Investing in cash may seem like a safe bet, especially when markets are volatile. But it comes at the price of lower long-term returns. Every investor needs at least some part of their funds in liquid investments in case of an emergency. And for some investors, a larger cash holding may be appropriate.

6. By investing regularly over the longer term, you generally get the best return

Research has proven that investors tend to join late in a rising share market, and then achieve disappointing results when the market falls. By contrast, when the market falls, investors stay out of the market, which means very few people are still buying at the market's lowest levels.

If you are in the market with the aim of building your long-term wealth, it is better to disregard short-term performance fluctuations and to focus on your long-term goals. The wise investor continues to invest through dips in the market, knowing that the cheaper shares become, the greater the potential gain when the market recovers.

7. Invest with a partner experienced in managing different market conditions

In South Africa there are many reputable financial services companies that can help you to manage your investments. Old Mutual has a 170 years legacy and is a major international financial services company today. We have the tools, the experience and the people to help you structure your investments to match your needs and goals.

8. Each investor's solution is unique

Everyone's circumstances and needs are different. The right answer for your neighbour might not be the right one for you. Financial advisers are trained to help you to think about what you want to achieve, and the best possible way to achieve it. They are here to provide you with an objective view.

SASMA Notice Board Highlighted this month



UCT Division of Exercise Science & Sports Medicine pioneer a comprehensive Sports Injury Service in the SA public sector.

The UCT Division of Exercise Science & Sports Medicine (ESSM) and Department of Orthopaedic Surgery have formally rolled out a public sector Sports Injury Clinic at Groote Schuur Hospital.

Dr Jeroen Swart & Dr Caroline Dalton, both Sports Medicine academic staff at UCT, will provide clinical sports medicine services to the public every Wednesday via the Orthopaedic outpatient clinic at Groote Schuur Hospital. Patient referrals will be accepted via an online referral system available at www.sos.uct.ac.za.

The clinic will see both acute and chronic sports injuries. Patients needing early surgical management are fast-tracked into subspecialist Orthopaedic clinics at Groote Schuur Hospital. Many less privileged patients have been unable to access sports medicine expertise and have been sidelined from physical activity as a result of their injuries. This clinic, a first in South Africa, will now allow these patients to access the care that they could otherwise not afford.

SASMA 2017 Accreditation System

SASMA is in the process of reviewing and improving the current accreditation system with the aim of implementing in January 2017. Members are requested to be patient as we complete this process. The SASMA accreditation is deliberately exclusive but not restrictive and aims to recognize individuals and practices that are significantly involved in the practice and advancement of sports medicine as opposed to those who are "just interested". By nature of their training and experience, these clinicians should be ideally suited to provide comprehensive medical care for athletes, sports teams, or active individuals who are simply looking to maintain a healthy lifestyle.

If your accreditation has expired, you can opt to order a plaque valid for 2016 only at cost price of R300 or a certificate for R50. The application fee will be waivered. Alternatively, you are advised to wait a few months until we have finalized the new system and criteria, after which accreditation will be renewable every 3 years.

Sport Science Collective

Use the following link for the 3rd issue of SPORT SCIENCE COLLECTIVE. I'm sure you'll find it interesting and I'd bet that others would too. Please do share it among colleagues, friends, or family who might find it relevant.

https://drive.google.com/file/d/oB7kUBueokBftOEpsSEhqVzB4Q2s/view

Jason Wulfsohn



2016 Conference Calendar

6 - 9Eur College of Sports Science 21st Jul Annual Congress, Vienna, Austria.

21 -22 2nd Schools Sport Jul Summit, Cape Town.

29 Sep FIMS 34th World 2 Oct Congress of Sports Medicine, Istanbul, Turkey

SA Homeless Football Team heads to Homeless World Cup in Glasgow

Source: https://www.homelessworldcup.org/news/team-south-africa-aim-build-last-years-success/

09-06-2016 POSTED BY: HOMELESS WORLD CUP MEDIA TEAM

South Africa's team is comprised of young men and women who live on the streets or those in very difficult circumstances within informal settlements.

The selection process began at the National Street Soccer tournament where 16 players were selected to participate in the final trial to represent South Africa at the Homeless World Cup. The final eight players are selected over a two-month period according to performance and personal development criteria.

At Amsterdam 2015, the team dominated the first stage, winning all five of their opening games. In the second stage, their only loss was to Brazil, earning them a place in the top tier of the trophy round. After a loss to Portugal in the quarter final match, the team won two more games to claim fifth place overall, their highest ever finish in the tournament. South Africa are ranked 16th for Glasgow 2016.



Oasis "Reach for Your Dreams" SA Homeless Street Soccer work to create developmental opportunities for young people across South Africa through participation in sport and education. They focus on creating developmental opportunities for young men and women living on the streets, or those who live in very difficult circumstances within informal settlements. Each year they participate in the Homeless World Cup with the goal of giving opportunities to those less fortunate. They also offer accommodation to participants before and after the Homeless World Cup, with an emphasis on working out an exit plan.

Click here to listen to an SABC interview with the team: https://youtu.be/WbC9x7nRt60









From the BJSM Blog

blogs.bmj.com/bjsm/

Editorial

Surviving 30 years on the road as a team physician

Published Online First: 18 May 2013 by Peter Brukner

Br J Sports Med 2013;47:610 doi:10.1136/bjsports-2013-092618

I realised the other day that it was 30 years since I did my first overseas tour as a team doctor (World University Games, Edmonton, Canada, 1983). Since then I have lost count of the number of trips that I have with a succession of Australian national sporting teams (swimming, athletics, field hockey, soccer and cricket). It has taken me to Olympic, Commonwealth and World University games, World Championships and World Cups.

It has always seemed pretty straight forward, you travel with the team, you just do your job as conscientiously and enthusiastically as you can, you contribute to the team in as many ways as possible, and you get a lot of satisfaction and enjoyment. You get to work with some amazing athletes and at times make a small contribution to their success.

And yet what seems a fairly simple task does not go well for many sports medicine professionals. I have heard many stories of doctors who have 'failed' on tour and their passports stamped 'never to tour again'.

Ways to fail as a doctor on tour

There have been the party animals, the ones who are in the bar every night. There are the ones who try and be best mates with the athletes and join them out socialising. There have been the ones who are branded as 'tourists', always out shopping or sightseeing and never there when needed.

There have been doctors who spent the whole tour taking literally thousands of photos (and have been mistakenly identified as the team photographer). Then there was the one who arrived at his first training session took his shirt off and proceeded to work on his suntan for the duration of the tour. Or the doctor who sat in the front seat of the tour bus in the seat usually occupied by the coach and refused to budge. Then there was the doctor who drank too much and tried to move in on a player's romantic interest. There are those who are always running late, keep the team bus waiting, late for team meals, wear the wrong uniform and basically think there is a rule for them and one for the rest of the team. They do not last long.



Habits of highly effective team doctors

So what is the secret of survival and more importantly doing a good job and enjoying the experience. The first rule is be available. Unfortunately as a doctor you can never predict when you will be needed and there is nothing worse than an athlete looking for the team doctor and being told that he cannot be contacted, or that he is off shopping or sightseeing. So I rarely go shopping or sightseeing unless the whole team is doing something similar.

Fitting in with the team rules and customs is essential. You do not want to draw attention to yourself by being different. Wear the correct uniform, turn up on time (I always aim for 10 minutes early) for meals and the team bus, find out where you should sit in the bus and sit there (there is often a pecking order of seating on team buses). Do not hide in your room all the time, be seen in the treatment room.

As a doctor you spend a lot of time at team training. Do not sit down and read a book, get involved, help out, pick up stray balls, fill drink bottles, put out cones for the fitness staff or coaches, record times and other data, generally assist the team as much as you can. When travelling or packing up after a game, help carry equipment and bags to the bus and help unload at airports and hotels.

You can also contribute to team events and culture. I have organised quiz nights, tipping competitions, arranged guest speakers and even carried out a 'This is your life' show.

You do have plenty of spare time while on tour and I have always tried to use that time productively. I save much of my journal reading for trips away and try and do some writing—I am writing this in the Australian dressing room at Chennai, India during the first cricket test.

I suspect the reason that some doctors struggle is that they are used to being the centre of their working universe. Hospitals and clinics revolve around doctors, and other staff such as receptionists, nurses and paramedical staff are there to make the doctor's working life easier. On tour, however, the doctor is a small cog in a very large wheel where the players and the coach are the key people. The doctor is there to provide service. If you cannot handle that concept then probably you should not tour.

I would encourage anyone to take the opportunity to travel internationally with a team if they get the chance. It does not suit everyone's personality or their desired work environment, but there are enormous benefits to be gained.

Footnotes

- Competing interests None.
- Provenance and peer review Not commissioned; internally peer reviewed.

Regular Consumption of Sports Drinks are a Risk to Children's Health

29 June 2016 by BJSM

FSEM Press Release



Regular consumption of sports drinks by children, for social reasons, could be having a detrimental effect on their health concludes the Faculty of Sport and Exercise Medicine (FSEM) UK. A survey by Cardiff University School of Dentistry[i], published in the British Dental Journal, showed a high proportion of 12-14 year olds are regularly consuming, high sugar, sports drinks unnecessarily:

- 89% of school children are consuming sports drinks with 68% drinking them regularly (1-7 times per week)
- Half claimed to drink sports drinks for social reasons
- The high sugar content and low pH of sports drinks increases the risk of obesity, type 2 diabetes, heart disease and the erosion of tooth enamel
- Most sports drinks are purchased by children in local shops at value prices

The survey looked at 160 children in four schools across South Wales and uncovers that children are attracted to sports drinks because of their sweet taste, low price and availability. The research highlights the fact that parents and children are not aware that sports drinks are not intended for consumption by children. The FSEM recommends that water and milk is sufficient enough to hydrate children and adults before during and after exercise, there is no evidence of beneficial effects of sports drinks in non-elite athletes or children. However, there is evidence that an increasing consumption of sugar sweetened drinks in the UK increases cardiometabolic risks[ii] and contributes to tooth decay.

Half of the children surveyed claimed to drink them socially and most (80%) purchased sports drinks in local shops, whilst 90% claimed that taste was a factor and only (18%) claiming to drink them because of the perceived performance enhancing effect. The FSEM is calling for tighter regulation around the, price, availability and marketing of sports drinks to children, especially surrounding the school area, to safeguard general and dental health:

Dr Paul D Jackson, President of the FSEM UK comments: "The proportion of children in this study who consume high carbohydrate drinks, which are designed for sport, in a recreational nonsporting context is of concern.

"Sports drinks are intended for athletes taking part in endurance and intense sporting events, they are also connected with tooth decay in athletes[iii] and should be used following the advice of dental and healthcare teams dedicated to looking after athletes. Water or milk is sufficient enough to hydrate active children, high sugar sports drinks are unnecessary for children and most adults." The FSEM is concerned about an increasing UK trend for the consumption of sports drinks[v] and this schools survey uncovers social reasons, availability and price as having a large influencing factor. Price was one of the top three recorded reasons for purchase and, of particular concern, 26% of children also cited leisure centres as purchase sources.

The survey also addresses the fact that there is particular confusion over the definition of a sports versus an energy drink. However from a dental and wider health perspective, these two drinks have similar detrimental effects due to their high sugar content and low pH.

In supermarkets and shops, sports drinks are sold alongside other sugar sweetened beverages. This is misleading children and parents by indicating that they are meant for use by everyone.

*References available on http://blogs.bmj.com/bjsm/

In Brief:

*Full article available on website

#ItTakesAVillage

Thanks to the entire BJSM community for efforts to improve patient outcomes & health

14 June 2016 by Karim Khan

Impact factor day makes me think of the phrase in **David Bowie's 'Heroes'** — **'just for one day'**. There is a lot of attention on one metric 'just for one day'. But the BJSM community works to improve the health of patients for 365 days most years, 366 days in Olympic years. Today is a good day to acknowledge the heroes in the BJSM community. It's a big community. Hence the also appropriate **#ItTakesAVillage**

Every clinician wakes up motivated to help. To listen, to do his or her best to alleviate pain and improve function and ultimately quality of life in the hundreds of thousands who attend clinics of various forms the world over. Every 'off-field' member of sports teams gives unselfishly so players can maximise their potential and play safely. Folks with academic posts teach with enthusiasm, advocate fearlessly and embrace knowledge exchange with those at the front lines.

Teamwork is critical for the BJSM to add value. At BMA House Claire Langford is tireless and available 24/7. Malcolm Smith, James Smallbone, Christine Janssen, Leticia Amorin, Rosemary Hall and Rebecca Vickerstaff ensure quality in every element of our product. Janet O'Flaherty has steered BJSM since it became part of the BMJ group in 1995. Claire Bower was, and remains, without equal. Success does not come overnight and we thank Duncan Jarvies and Harriet Vickers for vision. We have had support to the very top of BMJ group – thank you Peter Ashman, Allison Lang and Dr. Fiona Godlee.

BJSM's heroes are leaders and members of 23 clinical societies that guide us for international relevance. We have created podcasts in 5 languages. Our special partner, the International Olympic Committee supports 4 BJSM issues annually – chockablock full of key Consensus Statements, linkages to sport federations and driving the sports injury prevention agenda. The IOC's 9 international research centres form an R&D hub that communicates with the world via BJSM and other journals as appropriate.

Our large team is essential as our constituency numbers 7.125 billion. No apologies for a 150-member editorial board! We need more help – volunteer! (info.bjsm@bmj.com) We need you today and every day. Not 'just for one day'! May I use this opportunity to say 'thank you' for the privilege of serving with you all.

Karim Khan.

Be Inspired



Please contact us with comments or suggestions.

Best Wishes!

Phatho Zondi SASMA President



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If you are located in an area too remote from these established chapters but with a growing/large number of sports practitioners, contact us on president@sasma.org.za and we may be able to help you set up your own chapter for CPD activities.