

## SPORTS DOCTORS AIR THEIR VIEWS

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*At the second Franco-German Colloquy on Sports Medicine in Strasbourg (France) at the end of last year, the World Association of Medical Internationals organized a round-table discussion whose interest was largely due to the qualifications of those taking part, all of whom had themselves experienced the problems that competitive sport at international or national level raises for students going in for sport. The journalist Noël BAYON, who specializes in medical problems and whose mind is always receptive to new ideas and techniques, wrote a remarkable report on this discussion for the "Gazette médicale de France" of January 5th last. We wish to thank our colleague as well as the editor of the journal in question for allowing us to reproduce extracts from this article.*

Dr. Robert ANDRIVET admitted that, in actual fact, university circles in France are not on the whole particularly receptive to sport but that, even so, there are students who devote the whole of their leisure time to it and who manage in this way to compete at the highest level. He considered however that it is not the facilities granted students to allow them to train that will make them flock to the stadiums. In this connection, he made a point of stressing that contrary to what is generally believed American universities do not grant their students extraordinary facilities encouraging them to go in for sport. Whereas in Rumania, as Dr. APELI (Bucharest) explained, it takes the prospect of foreign travel to attract students to sport, and in Germany students going in for high level sport receive a monthly grant from the state welfare department, in the United States, although students are well provided with trainers in the various stadiums, they are given no special incentive to practise sport. American students who go in for sport are not treated with any special indulgence when it comes to getting through examinations, for the universities have no intention of lowering the value of the degrees they award. To such an extent is this true, that Dr. Robert ANDRIVET once read a notice posted up in a university stadium changing-room with the

following warning: "Students with poor grades in their end-of-term exams will be taken off the university team". There is therefore the desire to practise sport, resulting from a sporting state of mind instilled in early youth. Consequently Dr. Robert ANDRIVET advocated, as did Dr. TALBOT, getting children used to the idea of sport from the age of ten and accustoming teachers to consider sport as an integral part of education from primary school on, while other delegates expressed the wish that young people should be initiated into sport from the age of six . . .

### Sporting longevity

For some years now, the age of continued sporting ability, especially at a high competitive level, has shown an increasingly sharp upward trend. Thus in France the "veteran" category which started officially at 35, has in actual fact become an *extended senior* category, forming a *third sporting age* which the Canadians call the *Sportsman's Golden Age*. This very definite trend led Dr. Robert ANDRIVET to present a report on sporting longevity, in other words on the ageing sportsman and his ability to continue to practise sport. *Trainer players* or *athlete trainers*, the veterans of today live with the young, sharing to the full their sporting way of life and their training, and in addition frequently go to their doctor in order to ask "either for a thorough medical check-up in connection with the issue of a licence, or, much more significantly, for a check-up motivated by the wish to know how they stand physically and whether they can continue to practise sport and at what level, it being generally understood that they are thinking of a fairly high competitive level."

This sporting veteran is very different from the retired sportsman who only too often limits his activity "to vocal exercises accompanied by occasional vigorous movements of the upper limbs, on Sunday afternoons in grandstands or even in his armchair in front of the television", and who, suddenly realizing he is putting on too much weight, takes up violent physical exercise again in a desperate attempt to recapture his youthful figure. This is the type of ex-athlete who has to consult his doctor for various ailments: excessive fatigue, cario-vascular accidents, muscular, tendinous and articular mechanical troubles. Dr. Robert ANDRIVET also sketched the portrait of those sportsmen who, even though over 35, refuse to grow old, clinging to their earlier prowess and insisting on continuing with a type of

training that is not only exaggerated but even downright dangerous because no longer adapted to their age. "Only too often" added Dr. Robert ANDRIVET, "we see them, undoubtedly attracted by the lights of the National Sport Institute, running round its railings, going for frenzied walks or runs, in the early morning or even late at night and who, sweating, panting, even foaming at the mouth, are courting danger as well as making themselves ridiculous. What they need is a psychological rather than a physical examination".

The ageing sportsman, on the other hand, accepts a gradual reduction of his physical ability. Having foreseen it, he has succeeded in organizing his life and his training to keep his sporting decline within reasonable limits. A study of this subject has made it possible to judge the physiological future of the sportsman. In 1952, the big American insurance companies came to the conclusion, after a survey of several thousand subjects, that the life-expectancy of the sportsman was for all practical purposes approximately equal to that of the non-sportsman and that from the point of view of health, the risks were no greater among the non-athletic.

#### The *old guard* still going strong

In Paris, sixty sportsmen in their sixties were examined at the *Gerontological Centre*. The results showed that their physiological condition was roughly the same as that of a comparable test group. But the figures Dr. Robert ANDRIVET quoted from a report by Dr. Lionel LONGEUVILLE (Paris) and his assistants, are even more interesting. They are the result of an analysis of 545 files on 395 sportsmen. Among them, 35 were aged from 40 to 44, 82 from 45 to 49, 93 from 50 to 54, 43 from 55 to 59, 24 from 60 to 64, 9 from 65 to 69, 4 from 75 to 79, and finally two *real veterans* aged 85 and 89 respectively. About these two, Dr. Robert ANDRIVET made a point of stressing that "they went in for long cycle rides of an almost competitive nature, going for long rides at speeds averaging over 20 m.p.h. For the whole of this male sporting group, it was shown that 21 per cent of the subjects were in good condition and 100 per cent fit for competition; 32 were fit for competition subject to certain restrictions relating to training in view of the intensity of the competition; 27 per cent were insufficiently fit as a result of poorly planned training, errors of hygiene, sporting or professional strain, limitation of the basic qualities or precocious ageing; 16 per cent were not comp-

letely fit but were nevertheless fit enough while only 4 per cent were totally unfit. In all, 53 per cent of this group were really fit for competitive sport. Then again the authors considered that, of the third group, one third were recuperable for competition, which would raise the percentage of those fit for competition to 62 per cent; only 38 per cent of the group ran a definite risk by going in for sport without proper medical supervision and precise instructions.

Dr. Robert ANDRIVET then announced the conclusions he had reached from a study of ten files on sportsmen of all ages, regularly practising sport and attended by him. He listed in turn the results of the cardiac aptitude test during effort for each of his patients; all were very good, even in those of over 70.

From the vascular point of view, the work of Dr. Lionel LONGUEVILLE who, in the sporting group under examination, discovered 47 cases of vascular defects and 24 cases of coronary sclerosis already visible on the electro-cardiogram and 24 moderate but definite cases of high blood pressure, showed that the regular practice of a sport does not prevent the vascular system from ageing. On the other hand and this is extremely important - in spite of a *veritable inquisition* even in veterans suffering from an arterial disease, it was only very rarely possible to detect any important functional trouble.

It seems that they can stand it better. And this is also true on the mechanical level. "It is known" recalled Dr. Robert ANDRIVET, "that sport and above all competitive sport tends to lead to the appearance of an articular and a juxta-articular pathology, giving the same images as arthrosis, with however one particularity of a very marked constructive aspect. They are exuberant arthroses as if attempts were being made to compensate by a 'super-adaptation' of these joints."

In fact, during systematic X-ray examinations of these sports veterans, we discover radiological images of very marked arthrosis. The localizations are those of preferential attacks: *vertebral*, with a cervical predominance especially in gymnasts and P.T. instructors; of the *knee and tibio-tarsal* in footballers; of the *elbow*, in boxers, judokas and weight-putters. For Dr. Robert ANDRIVET, the term 'radiological image' appears as though it should be preferred to that of arthrosis, for the tolerance is perfect, because, in sportsmen, thanks to a good distribution

of the peri-articular muscular tensions, the joints continue to function satisfactorily. It would therefore be a mistake to prescribe a reduction of sporting activity based on radiological observations. On the contrary, Dr. Robert ANDRIVET noted that the starting up of sporting activities again got rid of the functional trouble and the pain. There was therefore no doubt that sport, even if it often precipitates articular ageing or increases it, also helps to tolerate it. Thus, sport does not stop one from ageing, but allows one to age more gracefully.

Noël BAYON

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