

**SPORTS MEDICINE  
IN ITALY:**

A FEDERATION WITH  
A LONG HISTORY OF  
SERVICE TO ATHLETES

*by GUSTAVO TUCCIMEI*

Whether at popular or high-performance level, there is today no effective sports practice without a certain degree of medical supervision. Physical examinations of athletes, the establishment of nutritional plans, training programmes, antidoping checks, biomechanical studies and so on all require the assistance of the medical profession. How is this medical supervision of athletes carried out ? That is the role of sports medicine, which is itself organised in the form of national federations affiliated to an International Federation. Here, Mr. Gustavo Tuccimei provides us with an introduction to the history and operation of the Italian Federation.



*Sports medicine : mission of protection and prevention*

**T**he first sports legislation in Italy dates from 1859, when the Casati act was passed introducing compulsory gymnastics teaching in schools.

In 1898, Angelo Mosso wrote the following : *“Physical education, which, up to now, has been largely in the hands of empiricists, will tend, with the progress of social conditions, to pass into the hands of specialists ; given that the knowledge of the latter is constantly increasing, doctors will have the upper hand in the end”.*

#### **AN OLD HISTORY**

The first structure of the Italian Sports Medicine Federation was created in 1925 by Ugo Cassinis, who was Director of the first Applied Sports Physiology Laboratory at the Military School of Physical Education, attached to the Foreign Ministry in Rome.

The purposes of the laboratory were to subject potential athletes to some preliminary reac-

tion tests so that they could be directed towards a particular sport, to assess the athlete’s physical condition, to control athletes’ reactions in training and to correct any organic deficiencies arising from performances not appropriate to the athlete’s physical constitution.

In 1928, Cassinis, as Italian representative at the Sports Medicine Congress on the occasion of the Olympic Games in Amsterdam, had the opportunity to observe the interest with which this branch of science was being followed by all the central European nations and the progress which had already been made, particularly in Germany, where this discipline had reached an outstanding level, not only as regards scientific research but also in terms of organisation.

In October 1929, Giacinto Viola founded the “Medical Association for Physical Culture” and Cassinis was appointed a member of the national committee.

On the occasion of the first meeting of the Committee, Cassinis presented a proposal to the effect that doctors should be given the task by the Government of visiting compulsorily all those practising competitive sports in order to avoid damage arising from the irrational practice of sport. Furthermore, doctors would have the task of supervising athletic preparation for competitions, which was often carried out in a manner ill-adapted to the athlete’s capacity to deal with stress.

In November 1929, the CONI (Italian National Olympic Committee) set up the “Italian Sports Doctor’s Federation”.

According to the first regulations promulgated, the sports doctors’ primary task was to become well acquainted with the subject’s physical state, the structure of the various parts of the body, their relationship to one another and the internal organs.

In 1940, the Federation, whilst still retaining its initial directives, was transformed into the “Medical Department” of the CONI. It carried on its activity under this name until 1945.

At that time, there was a proliferation of initiatives (congresses, symposia and meetings) aiming to spread still further an awareness of the importance of sports medicine and to strengthen the ties between the centre and the periphery, where the first scientific laboratories were being created (Turin, Milan, Genoa, Bologna, Florence, Rome, Naples and Bari).

International relations were also established and, in 1933, the 1st International Sports Medicine Congress was convened in Turin with the participation of delegates from home and abroad.

### A STRUCTURAL RATIONALISATION

All these historical considerations bring us gradually up to our post-war period when, as in all fields after a period of troubled reconstruction and reassessment, goals were set higher. An



attempt was made to achieve a definitive and rational organisation of the sports medicine sector, which was taking on increasing importance, not least due to the continued development of sports activities.

On 1st November 1955, on the basis of a resolution passed by the CONI board, and of article 34 of the act which established the body itself, the Italian Sports Medicine Foundation (FMSI) was recognised as a federation of the CONI (at the present time, it is one of the CONI's thirty affiliated federations).

First of all, the administration of the FMSI was entrusted to an "Extraordinary Commissioner", Giuseppe La Cava, who was not elected President of the FMSI until 1947 after the establishment of the articles of association of the FMSI by a regularly constituted assembly.

The post-war activities of the Sports Medicine Foundation began in November 1945, a year after the restructuring of the CONI. A dense

propaganda campaign was launched with a view to gathering together as many people as possible who had already been working for sport for some time. To that end, doctors were approached in order to bring all those interested throughout the country into the FMSI.

The essential points to be tackled were defined as follows :

1. Compulsory examinations for athletes ;
2. Presence of doctors at all sports events ;
3. Obligation for each sports association to have its own doctor recognised by the CONI.

The 222 federations, 133 in the north, 89 in the centre and the south, were grouped together within the Rome Federation, which became the national body, on which the CONI imposed a democratic structure with provincial and regional elections. The first statutes, prepared with the participation of the 975 doctor members, were then approved.

In 1947, sports medicine courses were organised in Rome for doctors and students of the medical and surgical faculties, with 140 participants.

The issue of sports medicine was also widely publicised through articles and notes in newspapers and sports journals.

The go-ahead was given for the compilation of a series of studies on the subject-matter and a Sports Medicine and Surgery Review was launched.

The first post-war Sports Medicine Centre was opened in Bari, followed by others in Naples, Savona, Ferrara, Leghorn and Genoa.

The first contribution given by the CONI in 1947 was 1,465,446 lire.

In 1948, the FMSI became part of the Executive Committee of the International Sports Medicine Foundation.

The first meeting of the presidential board of the FMSI took place in Milan on 14th September 1947.

In 1948, on the occasion of the first international meeting of fencing medicine in Milan, a motion on the agenda outlawing the use of drugs in fencing practice was approved.

Subsequently, the International Fencing Federation (FIE) established the first list of doping substances (pervitine, sympamine, prostagmine and eserine).

In 1948, the FMSI set up sports medicine centres in Rome, Turin, Genoa, Milan, Savona, Sassari, Como and Leghorn.

The first course for sports masseurs was held in Naples in 1948 with twelve participants, followed by courses in Turin and Genoa.

Between 1949 and 1975, various laws were passed governing the health protection of those involved in sports activities.

The FMSI, which enjoys technical as well as organisational and administrative autonomy, has as its main institutional tasks :

a) the ongoing training of members and the diffusion of sports-medical knowledge among doctors in general ;

- b) the promotion of scientific studies and research in the field of medicine as applied to physical exercise and sport ;
- c) the performance of preventive, advisory and checking roles and functional evaluation for athletes of national sports federations and recognised sports organisations ;
- 4 health education for the sporting population and information campaigns to heighten awareness of sport as a factor for the physical and moral improvement of young people ;
- e) preparation and implementation of any other initiative useful in the promotion of Olympism ;
- f) all these tasks are carried out through the central and peripheral organs of the FMSI.

#### SPORTS DOCTORS

Year	Totals
1949	891
1959	1,506
1969	2,479
1978	3,016
1986	4,612

#### SPORTS MEDICINE INSTITUTES, CENTRES AND SURGERIES

Year	Institutes	Centres	Surgeries
1986	7	24	51

#### FIGC ANTIDOPING CHECKS

Year	No of athletes
1956-1966	1,188
1974-1975	2,414
1979-1980	2,144
1985-1986	2,540

#### FCI ANTIDOPING CHECKS

Year	No of athletes
1965-1966	510
1974-1975	2,580
1985-1986	4,150

Over the four year period from 1981-1985, a total of 2,583 antidoping checks were also performed on athletes belonging to nine other national federations, in addition to 109 international antidoping checks.

#### THE ORGANISATION OF THE FEDERATION

The central organs of the Federation are : the Federal Assembly, the President, the Federal Board, the Presidential Board, the College of Arbiters, the College of Auditors and the Federal Secretariat. The Federation's peripheral organs are : the Regional Assembly; the Regional Board ; the provincial representative.

Finally, the technical organs of the Federation are the Federal Physicians' Board and the Technical and Scientific Advisory Commission.

When requested to do so by federations or recognised sports organisations, the FMSI also organises health services at competitions through its sports medicine centres and institutes or its provincial representatives.

The FMSI organises studies and researches concerning doping and its control, as well as advisory services on other problems affecting federations or other sports organisations.

The above gives only an outline of the FMSI's activities over the some forty years.

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