



## A HEALTHY SUCCESS

Former playing stars Pavel Nedved and Lucas Radebe demonstrate F-MARC's "The 11+" injury prevention programme as German international Birgit Prinz watches on.

Football leaders and medical experts came together to address some of the most pressing issues in football medicine in mid-October when the Swiss city of Zurich played host to the first ever FIFA Medical Conference.

The central idea behind the inaugural FIFA Medical Conference was to bring the presidents and general secretaries of FIFA's member associations together with the doctors and medical practitioners whose expert knowledge is often heard in football's corridors of power – but not always heeded.

Financial constraints, limited time or simply a lack of understanding of complex medical issues and terminology are all possible reasons why medical concerns are not always accorded the attention they deserve by sports administrators. The two-day meeting in Zurich aimed to redress the balance, however, by providing football leaders and medics from over 180 countries with a quick and clear summary of where football medicine stands today and where it would like to stand tomorrow.

"The idea is not just to bring together all the doctors and tell them what FIFA is doing for the health of our players and officials," FIFA President Joseph S. Blatter told the delegates during his opening address. "We also want to better inform the presidents, general secretaries and CEOs so that they can help us achieve the objectives of FIFA's important work in the field of health."

The picture painted of football medicine over the following two days was of a highly diversified branch of practically applied science whose scope has been defined by the FIFA Medical Committee and developed through 15 years of research by the FIFA Medical Assessment and Research Centre (F-MARC). Its practitioners, if consulted, can help advise the game's decision-makers

on a wide range of significant topics – ranging from the prevention of injuries and sudden cardiac death, strategies for dealing with extreme conditions relating to heat, cold, humidity or altitude, the latest anti-doping developments, and even the potential for using football as a general tool to combat disease and other public health problems.

"When I started out in 1972 as a young doctor supporting my local team, the only question anyone wanted to ask me was 'Can he play on Sunday?'," recalled FIFA Medical Committee chairman and FIFA Executive Committee member Dr Michel D'Hooghe. "Now times have changed and the medical care of footballers has become so complex that no one doctor can master all the relevant elements. Just like in football,

what is needed now is a successful team. It is a particular credit to FIFA's medical experts that the focus has shifted from purely performance-related work to the wider aim of protecting players' health."

### Issues and challenges

That particular point was amply demonstrated by the rapid succession of issues and challenges that were put before the sporting leaders in the presentations that followed. After reminding the delegates that medical experts had led the way in the introduction of red cards for players who tackle from behind, the administrators were presented with evidence demonstrating the need for similar strictness when it comes to reckless tackling from the side or using the elbow to strike an opponent's head. The delegates were reminded that violent fouls can easily end playing careers, most frequently by causing complex joint and tissue damage. A more friendly approach to injury prevention was then highlighted when former and current stars Pavel Nedved, Lucas Radebe and Birgit Prinz came on stage to demonstrate the F-MARC "11+" injury prevention programme recently rolled out as a cost-effective way of cutting down on non-contact injuries through a variety of scientifically-tested warm-up exercises.

"I remember playing football as a child on rough fields without boots," recalled former South Africa captain Radebe, "and if someone sprained an ankle, they just bandaged it up and carried on playing, not knowing that they were making their injury worse. That is why I think an educational programme like this can make a huge difference and the earlier the better when you think of all those kids dreaming of being stars when they grow up."

The clear message behind "The 11+" was that the programme has already been finalised and proven to reduce injuries by almost a third, and now just needs to be promoted and implemented by the sport's various national leaders – a message that was then repeated when it came to the F-MARC Pre-Competition Medical Assessment (PCMA) now intended for use prior to all FIFA competitions to help detect underlying risk factors predisposing players to sudden cardiac death, and the more recently

perfected MRI scanning procedures used to prevent the fielding of over-age players in U-17 competitions.

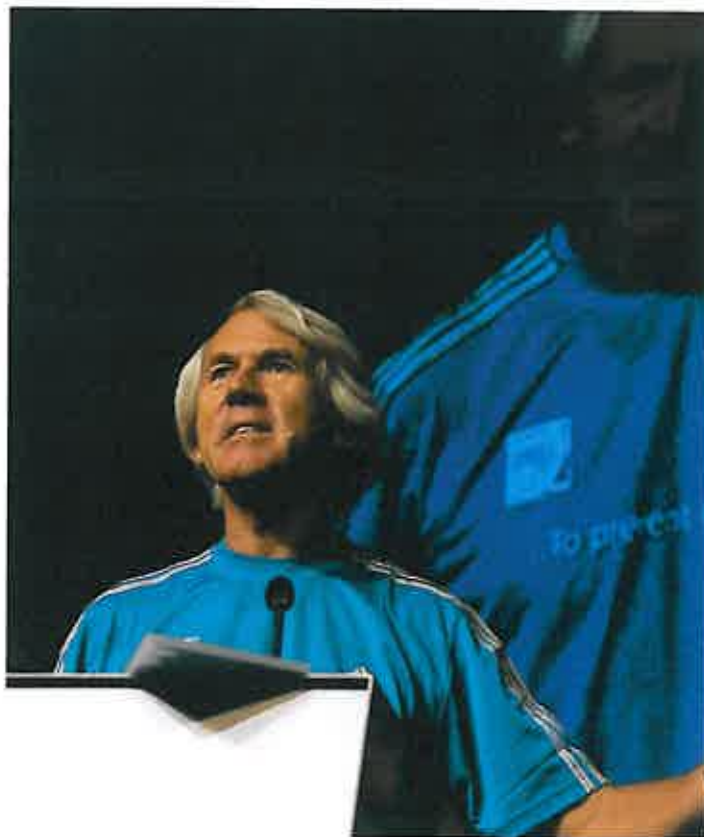
The high costs of medical expertise, equipment and procedures was a subject raised on more than one occasion, particularly by associations whose annual budgets fall far short of even a single FIFA youth competition. But the repeated message of the conference organisers was that any start, no matter how small, was at least a start.

"With 260 million active football players in the world, we of course cannot expect pre-competition medical tests for everybody," acknowledged D'Hooghe. "But just as we have started our efforts at an international level, we are calling on all of you to at least make an effort with your top players, the players in all your national teams. There is always a budget issue, I know, but I think a lot more money has been spent in the past on things a lot less important

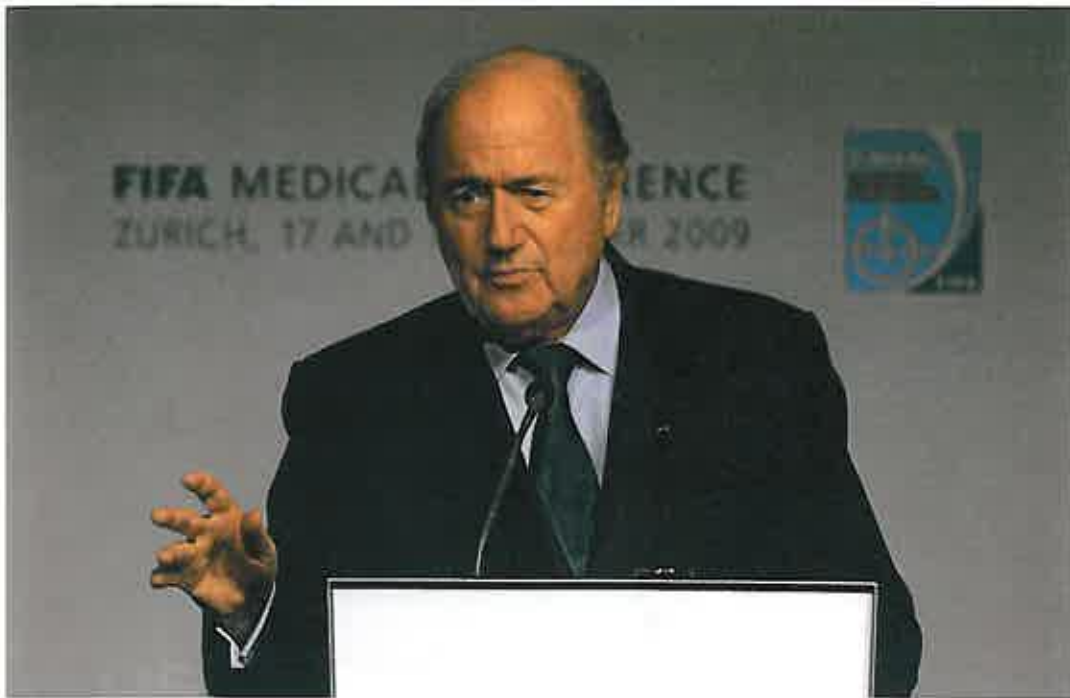
than the health of our players. And soon, everyone will see that the financial investment is worth it."

A clear example of that point was provided by Simon Gianotti from the New Zealand Accident Compensation Corporation (ACC), which registered an 8.5% decrease in knee and ankle claims among amateur footballers between the ages of 15 and 44 during the 2008-2009 season following the introduction of the F-MARC injury prevention programme. With sports injuries costing the country almost NZD 450 million a year (compared to NZD 400 for road injuries), Gianotti told the conference that for every dollar invested in the programme, the government had seen a saving of four dollars in injury-related costs.

"The resources already exist, which makes 'The 11+' easy to implement. Players want it, because it helps them enjoy their sport and stay in it longer. Coaches want it because they want to get the best out of their players. →



FIFA Chief Medical Officer Prof. Jiri Dvorak also pulled on some sporting attire to present "The 11+".



**FIFA President Joseph S. Blatter called on football's national leaders to work even more closely with their medical experts.**

Administrators want it because it keeps more players in the game and, from a government perspective, we want it because it brings a massive return on investment," Gianotti concluded.

#### **Public service**

By far the most ambitious section of the conference was the insistence by FIFA's medical experts that world football's governing body was ready to realign its medical focus – to not only emphasise the role which medicine can play in protecting the well-being of football players, but also how it can contribute to public health in general.

The use of football as a hugely popular tool to educate disadvantaged populations about diseases and other health issues was examined and discussed, using the example of F-MARC's own "Football for Health" pilot programme, which is being developed as a means of combining football coaching and health education, with in-built scientific assessment used to ensure that the project is both fun and effective.

"It is an important change of direction for us to use football's popularity to contribute to the

health of the general public," FIFA Chief Medical Officer and F-MARC chairman Prof. Jiri Dvorak told the attendees. "What is different to other programmes that have used the popularity of football in the past is that we are using the exact same scientific rigour that we use in our other F-MARC research to ensure that the results can be measured and hopefully therefore replicated around the world."

Clearly one weekend cannot change the world, especially when there are individual national facets to consider in even the most global medical issues. But while follow-up discussions and further conferences will still of course be necessary, the first FIFA Medical Conference concluded with broad acceptance for a seven-point action plan which began with a call for medical experts to be given more of a say in footballing discussions at a national level. The wide-scale adoption of "The 11+", further expansion of pre-competition medical assessments and the need to increase the number of national anti-doping units also met with general approval.

"It was excellent to have all the member association leaders and

doctors in the same room and to receive such strong support for the full implementation of our programmes," Dvorak told *FIFA World* as the delegates headed off for their flights home. "They have also agreed to use football as an educational platform to improve public health, which will help us to approach various government institutions for even more help."

The verdict from the sports leaders was just as positive with Canadian Soccer Association President Dominique Mastraecchi among the many expressing their satisfaction with the proceedings.

"I think it's fantastic first of all to have all these national presidents brought together with the doctors because it's something we don't always find time to do," Mastraecchi said. "All the presentations touched on different topics that are important not only for Africa or Oceania, but any country, including my own. I think my eyes were already open to the importance of football medicine but this weekend they have been opened even wider to how we can not only avoid injuries but also tackle diseases and work hand in hand with governments to improve public health and further cut health costs." ■