## Guest editorial

## Football medicine

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Demitri Constantinou completed his medical degree at the University of the Witwatersrand (Wits) and postgraduate qualifications in sport science at UCT. He is a Fellow of the International Sports Medicine Federation and is actively involved in teaching and research. He is a past Board member of the South African Institute for Drug Free Sport and current Chairperson of its Therapeutic Use Exemption Committee (TUEC). He is also vice-chairperson of the International Cricket Council's TUEC. He is a member of the International Sports Medicine Federation's Education Commission.

He has been awarded Life Membership of the South African Sports Medicine Association and is a member of the American College of Sports Medicine. He was Venue Medical Officer for Ellis Park for the FIFA Confederations Cup in 2009 and has also been appointed to this position for the 2010 FIFA World Cup South Africa.

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Hearing and reading the words '2010' in our country, and indeed around the world, conjures up many images and thoughts in many facets, but with one core element - football - and specifically, the 2010 FIFA World Cup South Africa™. Since the announcement in 2004 that we would be hosting the largest sporting extravaganza in the universe, the buzz and activity has now reached its climax. As participation in football at many levels increases and maintains its status as the most popular sport in the world, FIFA (Fédération Internationale de Football Association) uses the many benefits of playing football (the beautiful game) to promote health, community engagement and the betterment of the world. A negative reality is of course that participants are prone to getting injured, and since the announcement that South Africa would be hosting the World Cup, many players at all ages and of both genders will have sustained injuries. Most will fortunately have been minor, while others may have affected not only their careers, but also their lives. In this special edition of CME, dedicated to the game of football, we address many medical aspects, including football-related injuries, emergencies, medical conditions and travel. It is with great pride that I can offer this array of articles by such distinguished academics, clinicians and experienced authors who have an abundant insight in their respective topics, and who have so eloquently conveyed this knowledge in a practical and useful manner to the reader.

Understanding the incidence, the nature and the mechanisms of injury is important in providing best practice management of football injuries. Numerous articles are provided, covering this well: incidence and surveillance of injuries by Constantinou, knee injuries by a sports physician (Dr Collins) and a prominent orthopaedic surgeon in Johannesburg, South Africa (Dr Ferguson); with a combination of both practical and latest trends in theoretical and surgical approaches. With foot and ankle injuries being so common in many sports, and indeed football, this topic is well covered in a simple yet practical paper by Dr Holtzhausen, a prominent sports physician, academic and past president of the South African Sports Medicine Association. The paper on muscle injuries by Professor Schwellnus covers current theory and is at the same time pragmatic for physicians.

Concussion is not common in football, but much of current thinking and consensus is owed to the input of studies in football and the article by F-MARC (FIFA Medical Assessment and Research Centre), and Dr Patricios, a concussion proponent, offers functional advice and information.

No discussion of sport would be complete without covering aspects of doping, and Professor Derman provides the detailed current World Anti Doping Agency regulations and insight in a simple and informative manner for general and other practitioners.

Dr Motaung has contributed two articles, and his clinical experience as a sports physician and former Bafana Bafana team physician has provided us with sensible information on travelling with football teams. As a contributing author to a football emergency medicine manual, he has also covered the potentially tragic issue of the collapsed player in a sobering manner, allaying the fear and panic that can overcome physicians with sensible advice.

The other contributing author to the football emergency medicine manual, Professor Kramer, discusses football emergency medicine in a manner not seen before in either sports or emergency medicine environments, and is very relevant for medical services at the World Cup, as it is for anyone providing medical cover at any football match.

The paper on the female football player looks at some of the unique challenges that female footballers and their attending physicians face.

A heartfelt gratitude is offered to the contributing authors to this edition of CME, and their addition to what could be construed as part of the medical legacy of the World Cup 2010<sup>TM</sup>. The final word is that above all, prevention is paramount. In all our endeavours in dealing with football players we should use injury prevention programme such as the *The 11+ - a complete warm-up programme* to prevent injuries, and be prepared and proactive to reduce risk of other potential medical problems.

