Sports medicine and the accident and emergency medicine specialist

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Background: Sport and exercise related injuries are responsible for about 5% of the workload in the accident and emergency (A&E) department, yet training in sports medicine is not a compulsory part of the curriculum for Higher Specialist Training.

Aim: To determine how A&E medicine consultants and specialist trainees view their role and skill requirements in relation to sports medicine.

Method: A modified Delphi study, consisting of two rounds of a postal questionnaire. Participants were invited to rate the importance of statements relating to the role and training of the A&E specialist in relation to sports injuries (six statements) and the need for knowledge and understanding of defined skills of importance in sports medicine (16 statements).

Value of research: This provides a consensus of opinion on issues in sport and exercise medicine that have educational implications for A&E specialists, and should be considered in the curriculum for Higher Specialist Training. There is also the potential for improving the health care provision of A&E departments, to the exercising and sporting population.
RESULTS
Seventeen of 19 consultants, and nine of 11 specialist registrars completed round one. Response rate to round two was lower, with 15 consultants and four specialist registrars completing the survey. There was no significant difference between responses to round one and round two, confirming stability of response. Nor was there a significant difference between consultants and those in training grades. The responses to the statements are as shown in figures 1 and 2.

There was strong agreement that A&E specialists should treat acute sports injury, and that they should be able to diagnose overuse injuries. Furthermore, the A&E specialist should possess knowledge and skills in all aspects of SEM care with the exception of two domains: how to access “health regulations in sport”, or “drug regulation in sport”, where there was disagreement by 16% and 32% respectively.

In contrast with the agreement on the importance of SEM, participants did not consider that a postgraduate qualification on February 28, 2022 by guest. Protected by copyright.http://emj.bmj.com/ Emerg Med J: first published as 10.1136/emj.19.3.239 on 1 May 2002. Downloaded from
in sports medicine, or compulsory secondment in sports medicine, as part of higher specialist training in A&E medicine, was necessary. Only 5% agreed that a postgraduate qualification in sports medicine was desirable for an A&E specialist. Consensus was just achieved (58%) in recognising sports medicine as an optional secondment for Higher Specialist Training. There was differing opinion (16% agreed; 47% disagreed) on the appropriateness of running sports injury clinics in A&E specialist time.

**DISCUSSION**

There was widespread agreement on the need for the specialist in A&E to have a role in diagnosis and management of sports injury. There was also agreement that an A&E specialist should have a broad knowledge and understanding of sports medicine issues. Participants believed, however, that qualifications or experience in sports medicine should be optional. This is in contrast with the findings of a study of sports injuries presenting at A&E departments that concluded that A&E staff would benefit from increased training in sports injury management. The reason for this anomaly is unknown, but one can speculate that it is because A&E specialists do not consider sports injury to be any different to other soft tissue injuries; or because there have been few opportunities for A&E specialists to experience "the practice of sports medicine".

Notwithstanding the personal views and the priorities within an A&E department, patients with sports related injury, are an important component of the overall workload within A&E. It seems from the study that sports medicine, a relatively new specialty, which has not yet established a uniform place in undergraduate teaching, deserves special consideration. It is difficult to reconcile the importance attributed to the necessity for knowledge and skills in A&E, when neither group rated education and teaching in this area as important. We recognise that these results identify opinion of a heterogeneous group of A&E specialists in one region only, which may, or may not be representative of the whole of the United Kingdom and Ireland. We hope to confirm our results with a national survey, which is currently underway.

A fundamental question remains about the appropriate training of A&E specialists to deal with sports related problems. A secondment in sports medicine would be an opportunity to acquire "knowledge of the practice", of this related specialty.

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**Contributors**

Liz Abernethy initiated the research, developed the survey tool and wrote the paper. Domhnall MacAuley discussed the study design and edited the paper. Oonagh McNally participated in formatting the study tool, and coordinated data collection. Siobhan O’Neill participated in data analysis and data presentation. Liz Abernethy is guarantor for the paper.

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**REFERENCES**


