

book reviews

Emergencies in Sports Medicine

Edited by Julian Redhead and Jonathan Gordon.
Oxford University Press; Oxford: 2012.
336 pages, pbk; £24.99

What a great summer for sport. The London Olympics may take 'gold' on the sporting podium, but Wimbledon, Silverstone, the domination of Euro 2012 football by Spain *et al.* will all be competing for the lesser medals. Sadly, as in any walk of life, accidents happen, equipment fails, humans make mistakes and the unexpected presents itself. The highest profile sporting medical emergency in recent times was the sudden cardiac arrest of the Bolton footballer Fabrice Muamba and, more importantly, the successful resuscitation both on and off the field and his subsequent discharge from hospital.

Emergencies in sport will rarely get the media exposure seen in the Muamba case, yet they are not uncommon. In addition, they are obviously not just a part of elite sport; most sport in the UK is played at community level, so everyone involved in sports medicine at any level must be trained, equipped and competent to deal with any emergency they might be exposed to in the particular sport they are covering.

Emergencies in Sports Medicine is a great little addition to the 'Emergencies in' series. Packed with nuggets of detail and edited by clinicians with real experience in the area, it covers almost all emergencies that sports medics could be exposed to. Unfortunately, 'little' also refers to the size of the print, which is a real issue for anyone optically challenged.

From planning and preparation to collapse during exercise, from altitude sickness to airway injuries, all the key areas are covered in sufficient detail to enable the reader to use this pocket book more as an aide memoir, rather than as a textbook. It

makes effective use of bullet points to get the key messages across and many of the key texts are referenced anyway so that the reader will know where to look for further in-depth information if required.

Although it contains all the latest resuscitation advice, readers must be cognisant of the fact that guidelines change and they should use the references (or website addresses when provided) to confirm that they remain up to date. For example, one area that is shortly to change is the use of long boards to transfer patients with suspected spinal injury. The recommendations will be to use the new EXL thermoplastic Scoop stretchers, which will require only a 10° 'tilt' as opposed to a 90° log roll both pre-hospital and again in the emergency department. Equipment improves, guidelines change, but textbooks do not automatically update.

My one criticism of this fine book is that the authors have included some conditions for completeness that would never meet the criteria of an emergency, in any sporting environment. A bursitis, even if infected, needs to be managed in a timely and effective manner, but will never be an emergency.

I hope that, in time, the authors revise the running order of the book, so that it flows better and true emergencies are focused on first, with albeit important chapters such as 'Athletes with Pre-existing Conditions' given a lower priority.

I would strongly recommend this little gem to anyone involved in sports medicine. One never knows where or when one will be exposed to the next medical emergency; that being the case, this is a very useful number to have in your acute medical bag. You might just need a magnifying glass to assist you in reading it!

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