

Does Canada have it right?

Report by
Dr Polly Baker

Well it all depends on how you measure a better Sport and Exercise Medicine service. In answer to this question it could prove tempting to consider who performed best at the Olympics. Britain came third, racking up 65 medals in total, while Canada ranked 36th with 18 medals. However, the Winter Olympics tell a different story, with Canada in 3rd place with 25 medals, and Britain coming 19th, with four. However, this is perhaps not the fairest comparison considering Canada has just under half the population of the UK, and forty times the landmass. A better way would be perhaps to look at the number of physically active individuals or how quickly those that require the expertise of Sport and Exercise Medicine receive it.

In September I spent two weeks in Vancouver in an attempt to get a taste of the differences between the Canadian and British approaches to our speciality.

I split my time between the University and the Fortius Clinic, a new state of the art SEM Foundation.

University of British Columbia

While at the University I spent time in the musculoskeletal (MSK) clinics run by the Sports Physicians at the Allan McGavin Sports Medicine Centre and also at the Exercise Medicine laboratories.

The MSK service is provided so that any GP can refer to a qualified Sport and Exercise Medicine Consultant. Criteria are simple with any Canadian is access the services free

of charge. Referral on to physiotherapy or other healthcare professionals is dependent on insurance or self-funding. As a result, Sport and Exercise Medicine physicians are highly skilled in exercise prescription. Any advice on exercise is supported by specific patient information leaflets. Typically, patients do not see a physiotherapist.

Exercise Medicine takes a far higher profile in Vancouver compared to the UK. Unsurprising given the impressive volume of research produced by the University on the subject. Notable academics include Professor Donald McKenzie, Professor Karim Khan and Dr Michael Koehle.

I spent the majority of my time with Professor McKenzie whose main interest lies in the role and benefits of exercise in cancer. Over recent years his focus has been on breast cancer and he is widely published in this area. I was motivated to spend time with him as he is one of the few researchers who has translated his findings into practical guidelines, and established services based upon this evidence. He has developed an exercise medicine service that is integrated with the nearby cancer hospital. At their post operative oncology consultation breast cancer survivors are offered the opportunity to participate in an exercise program. Those that choose to take part are assessed by an exercise physiologist and entered into the program most appropriate for that individual. Each program normally encompasses cardiovascular fitness, strength, balance and flexibility training. They are also offered the opportunity to attend the unique 'cancer gym'. This is solely for breast cancer



Dr Polly Baker and Professor Jack Taunton collaborating after a busy clinic

survivors and provides a private space where patients can exercise and meet those with similar experiences. In addition, exercise physiologists are present to monitor and provide advice as needed.

Professor McKenzie's next project will be to look at exercise in those with prostate cancer although he acknowledges significant co-morbidity will make this a much more complicated study.

As a unique and ground-breaking service, I was keen to discover how it came about. Could we reproduce a similar service in the UK? Professor McKenzie's entry into this area of research was somewhat

unusual. He is an exercise physiologist by background and an enthusiast of canoeing and dragon boat racing. Having set up a dragon boat team consisting of solely breast cancer survivors, his initial work focused on establishing whether - as advised at the time - exercise and particularly use of the upper body should be avoided in those with lymphedema of the arm (a common complication of some breast cancer surgery). From there he moved on to look at the effects of exercise in general on breast cancer and, as outlined above, is soon to be expanding this to other forms of cancer.



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The Fortius Clinic, Burnaby, Vancouver

The Fortius Clinic

I was introduced to this clinic by Dr Jack Taunton, a recently retired but truly inspirational sports physician. He was the Canadian CMO for both the Vancouver Winter Olympics/Paralympics in 2010 and the Sydney Olympics in 2000. He also set up the medical cover for the Sun Run and has published extensively. His particular research interests include tendinopathies and the effect of footwear and biomechanics on running

injuries.

The stated aims of the clinic are to enable anyone wanting to participate in sport to do so to the best of their ability. This serves anyone whose goal is to become fitter and healthier right through to the elite athlete with specific performance aspirations. The building is set up so that anyone can access the very best treatment and advice - whether this is the country's experts in biomechanics, sports medicine,

physiotherapy, or strength and conditioning, the latest gym equipment or unique services set up by the foundation.

Two such services stood out to me during my time at the clinic:

The Concussion programme:

This programme offers baseline testing for individuals or teams and then the ability to re-test if a suspected concussion occurs. An individual recovery plan is developed using collaboration from a variety of specialists

including sports physicians, biomechanists and vestibular physiotherapists.

Wellness programme:

This includes bespoke screening programmes. These are tailored to the needs of the profession requesting the screening programme, complete with an action plan and advice about available resources that can be accessed.

So back to the original question: does Canada have the right approach? Certainly I met some impressive people and learnt a lot from the unique services on offer. Whether there is a 'right' approach for all populations is debatable but each country brings something different to the table, and it is through international collaboration including fellowships like these that we can learn from each other and improve the speciality of Sport and Exercise Medicine globally.



Polly is a Sport and Exercise Medicine Consultant. She specialised in Sport and Exercise

Medicine in 2008 and gained her diploma of Sport and Exercise Medicine from the Royal College of Surgeons in Edinburgh in 2010. She is currently working at the Defence Medical Rehabilitation Centre, Headley Court. This involves treating both service man and women injured in battle and/ or those with musculoskeletal injuries. She is also currently the Sports Physician for London Welsh Rugby Football Club. She has previously worked for Northampton Saints, Arsenal Ladies and worked as part of TeamGB at the London Olympics as the Chief Medical Officer for the GB Handball Team.