

EXPERIENCES AND CONCERNS

UANA SPORTS MEDICINE COMMISSION

SEPTEMBER 2020

#### **OBJECTIVES**

 SHARE EXPERIENCES AMONG COUNTRY MEMBERS IN THE RETURN TO TRAINING PHASE DURING PANDEMICS

• DISCUSS MAIN CONCERNS AND POSSIBLE SOLUTIONS OF THE RETURN TO TRAINING PHASE.

 PREPARE FOR THE RETURN TO COMPETITION PHASE (EVENTUALLY)

#### **AGENDA**

• Experiences in Return to training: Challenges and approaches

Dr. Jim Miller MD/FAAFP/Sports Medicine (USA), FINA and UANA Sports Medicine Commission member

 Round table: Main Challenges on Return to Training and Solutions proposal

**UANA Sports Medicine Commission** 

Key messages and closure

### DR. JAMES MILLER FAAFP, SPORTS MEDICINE



#### UANA SPORTS MEDICINE COMMISSION MEMBER

• As a physician, he has served as Chairman of the USMS Medical Committee, as team physician for USA Swimming at the Olympics, World Championships and at open water events since 1996. He has been a member of the FINA Medical Committee since 2001 and lectures around the world on the benefits of Masters sports, nutrition and shoulder injuries for FINA and the International Olympic Committee.

# DR. MILLER'S KEY MESSAGES

• FINA back to water guidelines are available in FINA website, and includes topics such as testing and sports specific recommendations.

• "Stay tuned until tomorrow" should be the way to see the information. It's a changing situation.

## DR. MILLER'S KEY MESSAGES

- Consider the effects of detraining.
- Psychology and nutrition assessment are useful.
- Social Distancing and masks work and should be used. World is expecting the vaccine, and we should want to know short- and long-term safety and efficacy.

#### ROUND TABLE

Dr. Margo Mountjoy (CAN)

Francisco De la Rosa, md (DOM)

Steve Keeler, md (CAN)

James Miller, md (USA)

Juan Carlos Quinceno, md (PAR)

Morgan Luker (TCI)



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#### MAJOR CONCERNS

(thru Attendees registration Forms)

- Evaluation and recommendations for POST-COVID19 athletes.
- Safety and disinfecting protocols.
   Compliance.
- Athletes screening. (ideal testing and frequency)



#### MAIN CONCLUSIONS

Evaluation and recommendations for POST-COVID19 athletes.

 Cardiovascular and respiratory assessment are necessary, looking for myocardiopathies and pericarditis in athletes post COVID19.

 Stratify patients for return to training in those who had mild, moderate or severe symptoms.

Stay tuned for posts on cardiovascular risk.
 Electrocardiogram, echocardiogram and
 labs workup should be considered.

#### MAIN CONCLUSIONS

Safety and disinfecting protocols.

Compliance.

- Chlorinated water reduces the risk of infection. The main concern is in contact before or after training. Closed environments should have additional care.
- The preventive isolation of athletes after a known contact, would be considered regarding the safety of the environment in which they are training.
- "Bubble" type models would be ideal.

#### MAIN CONCLUSIONS

Athletes screening. (Ideal testing and frequency)

 The test of choice is RT-PCR. (nasopharyngeal swab)

- The frequency testing ranges from daily to weekly. In other cases they use questionnaires and perform tests before congregations.
- Not taking follow-up tests until negative could pose a problem when randomizing tests for these athletes later.



### KEY MESSAGES



- We should promote multidisciplinary groups in each country
- COVID-19 pandemics has changed the way we experience Aquatics, and it demands continued education and information review.
- Return to competition should be the next phase and we should start planning so, along the way.



Francisco De la Rosa, MD

UANA Sports Medicine Commission Chair

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