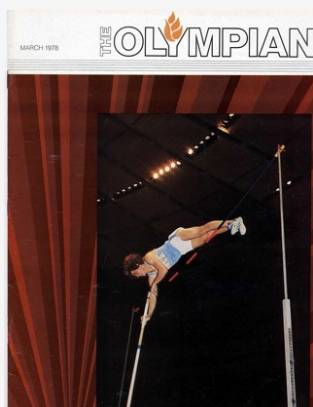




Sports Medicine

The First Sports Medicine Commettee meeting at Squaw Valley Olympic Training Center



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In March 1978, the U.S. Olympic Committee (USOC) appointed a committee on sports medicine, led by Irving Dardik, M.D., to centralize sports medicine in the U.S. and encourage research and educational programs. The committee's goal is to develop and coordinate sports medical programs for athletes across the country, with a focus on improving performance for the 1980 Olympic games. The committee will work with athletes from various Olympic sports in a scientific program aimed at improving performance without sacrificing the individual athlete's dignity. The committee has also appointed "special services" committees to assess immediate needs for athletes in areas such as exercise physiology, biomechanics, sports psychology, and nutrition. The committee is composed of experts in various fields, including biomechanics, sports medicine, exercise physiology, and sports psychology.

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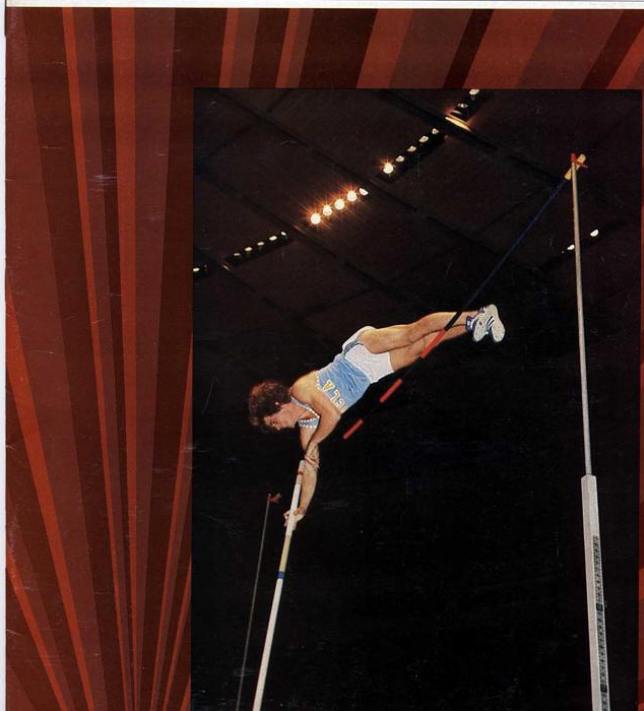
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Below find a reprint of the 3 relevant pages of the article "Sports Medicine" in "The Olympian":



SPORTS MEDICINE

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they may more effectively concentrate on productive training methods important to high level performance.

The prestigious Olympic Sports Medicine Committee, of which Dr. Dardik is chairman, is composed of the following: Dr. Gideon Ariel, Computer Scientist and expert in the field of Biomechanics and its relation to the world class athlete. Tenley Albright, M.D., a general surgeon in Boston who is also a well known lecturer on sports medicine. Dr. Albright was a 1956 Olympic figure skating champion and several times world champion, and a member of the President's Council on Physical Fitness. Dr. David Costill, a leader in the field of exercise physiology. He is the immediate past president of the American College of Sports Medicine. Dr. Anthony Daly, Chairman of the Sports Medicine Committee of the Amateur Athletic Union of the United States. Dr. Daly has been a physician for the United States Olympic team and has attended to the needs of many of the nation's top ranked athletes for years. Anita DeFrantz, a member of the bronze medalist women's eight with coxswain at Montreal. Anita is a recent graduate of the University of Pennsylvania Law School, who remains in competition looking ahead to the 1980 Olympic Games. Daniel E. Hanley, M.D., of Bowdoin, Brunswick, Maine is a member of the International Olympic Medical Commission and was head physician for the United States Olympic Team in 1964 and 1968. David Roberts, 1976 bronze medalist and world record holder in the pole vault. A third year student at the University of Florida Medical School, David is one of the first recipients of Olympic medical scholarship fund provided under the ongoing U.S.O.C. scholarship program. Allan Ryan, M.D. a long time member of the medical staff of the University of Wisconsin is editor of the popular magazine, "The

Physician Sports Medicine." Dr. Robert A. Singer, a sports psychologist is professor and director of the motor behavior resource center at Florida State. Dr. LeRoy T. Walker, President of the American Alliance for Health, Physical Education and Recreation and a strong mover to increase the activities of the AAHPER, as a professional group in the area of sports medicine. Dr. Walker is well known as the head track coach of the track and field team for the United States Olympic team at Montreal. Also working with Dr. Dardik is Jerry Lace, Director of Operations for the United States Olympic Committee. He serves as administrator for the committee's plans and practices.

Much of the success of our short-range program depends on the nomination of top ranked athletes to attend the regional training centers," Dr. Dardik pointed out. A sports medicine representative from each national governing body will be appointed to act as liaison to the Olympic Sports Medicine Committee; so as to provide an effective means of communication and for assuring practical implementation of programs. With the cooperation of the sportsmedical community, the national governing bodies and particularly the coaches and athletes, the future of our amateur Olympic program is indeed both challenging and bright.

INTERNAT'L DEVELOPMENTS

... from preceding page

Roland Mesmeur, France
Le Figaro

I hope that the future of the Games may be delivered of two serious handicaps as soon as possible.

Firstly, that the political powers put an end to the ambition, which they have gone so far as to raise within UNESCO, to ruin the IOC's prestige as a supranational power.

Secondly, the coalition of Socialist and African countries must revise their position regarding South African sport. Do these relentless critics really believe that they are beyond reproach in responding faithfully to the provisions of the charter?

A New Deal in Track and Field

... from page 11

first National Sports Festival, conducted by the USOC, at Colorado Springs, Colo., July 27-30 this summer. Specifically for elite-class athletes, the potential Olympians, will be divided into four teams — representing the four main areas of our country: the East, Midwest, South, and Far West.

Our athletes training for the 1979 Pan American Games and 1980 Olympic Games will be given more opportunities than ever before for international competition against the same men and women they can be expected to meet at San Juan and Moscow. It is imperative that these men and women operate under brilliantly conceived and executed plans, and programs designed and implemented by the many fine minds working with the Track and Field Division of the AAU.

Ever since the results were posted at Dusseldorf, we must not be complacent and conduct business as we did in previous years preparing for the Pan American and Olympic Games. In other words, now is the time to broaden the base of our program to include every athlete with an Olympic potential. We owe it to the athletes, and to our country.

SPORTS MEDICINE



More than a dozen years ago, the USOC was challenged to use its authority and prestige to bring about some centralization of sports medicine in the United States and to encourage research and educational programs, which in turn should benefit the Olympic effort." Today, more than ever, athletes recognize the role that sports medical science is playing as they strive to achieve their full athletic potential. Robert J. Kane, president of the U.S. Olympic Committee, following a study that spanned the better part of the year, recently appointed a committee on sports medicine under the direction of Irving Dardik, M.D., himself a former outstanding runner at the University of Pennsylvania.

In accepting the chairmanship of the United States Olympic Sports Medicine Committee, Dr. Dardik says, "the charge of the Olympic Sports Medicine Committee is to act as an umbrella sports-medical organization in developing and coordinating both short-range and long-range sports-medical programs for athletes throughout the country." However, Dr. Dardik emphasizes the more immediate needs of our elite athletes pledging to concen-

trate efforts which may have a significant impact on the overall performance of U.S.A. athletes at the 1980 Olympic games.

The committee is blueprinting an ambitious program for the next two years. According to Dr. Dardik, major work will be done with athletes from various Olympic sports, including bobsledding, fencing, canoeing, track and field, and many others in a scientific program aimed at improving performance without sacrificing the dignity of the individual athlete. Although Dr. Dardik and other members of the committee have plunged into the work with enthusiasm, they nevertheless tend to be cautious and are not forecasting immediate solutions to many of the major problems which confront them.

The United States Olympic Sports Medicine Committee has appointed "special services" committees to assess those immediate needs for our athletes relating to the basic sciences — exercise physiology, biomechanics, sports psychology, nutrition and others. When national sports governing bodies name top rank athletes to attend the national regional training centers, a cadre of sports medicine experts will use their re-

search data in teaching and demonstrating training programs for the coaches and athletes involving such areas as strength training, endurance training, nutrition, technique — all tailored to the specific sport and to the individual athlete. A close liaison with coaches will be essential for the overall success of the programs.

Particularly intriguing work is being done in the field of biomechanics where computer technology has already led to dramatic improvements in performance for athletes in many different sports. Such was the case with Mac Wilkins and Terry Albritton who broke world records in the discus and shot put, respectively, with the technical assistance applied by such modern scientific methodology.

Many elite athletes and coaches have already availed themselves of this valuable scientific tool at the Olympic Regional Training Center in Squaw Valley. The expansion of this program is now under way. Programs including sports psychology, exercise physiology and nutrition should help to dispell the many myths prevalent among athletes so that

(continued on page 13)

At the first Sports Medicine Conference at the Squaw Valley Olympic Training Center are from left to right: Anita DeFrantz, Dr. Tenley Albright, Dr. Irving Dardik, Dr. Gideon Ariel, Dr. Anthony Daly, David Roberts, Dr. Robert Singer and Dr. Allen Ryan.

