

Sports Medicine Roadshow - Cork

River Lee Hotel • 02 November 2019

Roadshow Chairman – Mr Patrick Carton

Programme Co-ordinator – Mr David Filan

UPMC Event Manager – Ms Claire Phelan

...the end of the Road (show)!

Our final event in the Sports Medicine Roadshow landed us in Cork to a packed-out room of interested delegates. With 22 different speakers at this event alone, the extent of informative dialogue and for all involved was well-received.

Player Welfare was the theme of the first Session where Dr Ken Patterson (Interventional Pain Specialist) introduced some evidence-based use of biologics in sports medicine. A man who needed no introduction in Cork – Dr Con Murphy (GP and Cork GAA Doctor) – gave an insightful overview of the changes in sports injury patterns as he has experienced over the past five decades. We then heard from Dr Brendan Murphy (GP, Tipperary GAA Doctor) who spoke about avoiding overtraining and injury in sport.

The 2nd session focused on **Foot/Ankle and Knee**. We heard from Mr James Peckitt (Chartered Physiotherapist) who presented on the conservative management of ankle injury in sport. Mr Ian Kelly (Consultant Orthopaedic Surgeon) then spoke about the surgical management of ankle instability. Three interesting talks on knee-related issues followed on from this and delivered by Mr Tadhg O’Sullivan (Consultant Orthopaedic Surgeon) outlining the surgical treatment of ACL injury with some supporting evidence. Mr Brian Fox (Chartered Physiotherapist) then discussed the possibility of avoiding surgery through ACL injury prevention techniques. Closing this session was Mr Dave Williams (Chartered Physiotherapist) who presented his talk on the management of meniscal injuries in adolescent athletes).

After a quick break, different areas of **Optimising Sports Performance** was focused on. Mr Joey O’Brien (S&C Coach) provided us with an evidence-based approach to strength and conditioning. Ms Shonagh Harpur (Performance Nutritionist) spoke about nutrition following injury and how best to optimise recovery and rehabilitation. A hot-topic area of managing the psychological impact of chronic sports injury was then discussed by Mr Canice Kennedy (Sport Psychologist).

Session 4 focused on some **Common Sport Pathology**. Mr Greg Heffernan (Consultant Orthopaedic Surgeon) opened this session outlining the surgical management of instability and impingement of the shoulder. Dr John O’Riordan (GP) provided a talk on stress-related bone injury in sports. General Practitioner and Cork GAA Doctor, Dr Aidan Kelleher, spoke about hamstring injury and return to play followed by Dr Kieran Carroll (Consultant Radiologist) who explained various imaging techniques for sports injury.

The final session before lunch focused on **Concussion** where we heard from Mr Derek O’Neill (Chartered Physiotherapist, UPMC Concussion Network Lead) who spoke about the signs and symptoms of concussion and Dr Niamh Lynch (Consultant Paediatrician and UPMC Concussion Network Clinical Lead) who spoke about the available baseline testing and treatment.

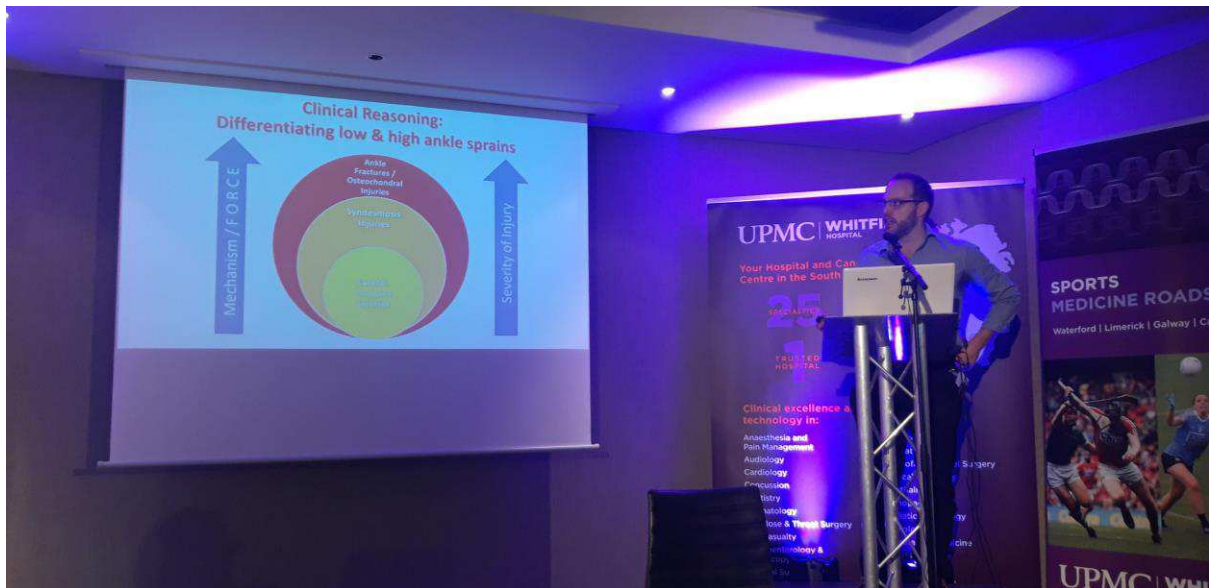
Our 6th and final session related to **Hip and Groin** issues seen among athletes. The session started with a practical demonstration of a clinical examination of the athletic hip by Mr Patrick Carton (Consultant Hip Surgeon) and assisted by Mr Craig Colliers (Theatre Nurse) and Mr Michael Morrissey. An interview with Mr Damien Cahalane (Cork Intercounty GAA Player) provided a great insight into the return to play from injury from a player’s perspective. Dr James Ryan (Consultant Endocrinologist and Limerick hurling Team Doctor) gave an overview on sportsman’s hernia with diagnosis and treatment options. A conservative management approach to treat femoroacetabular impingement (FAI) was presented by Ms Collette Garvey (Chartered

Physiotherapist) followed by the surgical management of FAI presented by Mr Patrick Carton. Mr David Filan (Clinical Research Assistant) then provided some of the evidence-based research available outlining the comparative effectiveness of both these management techniques.

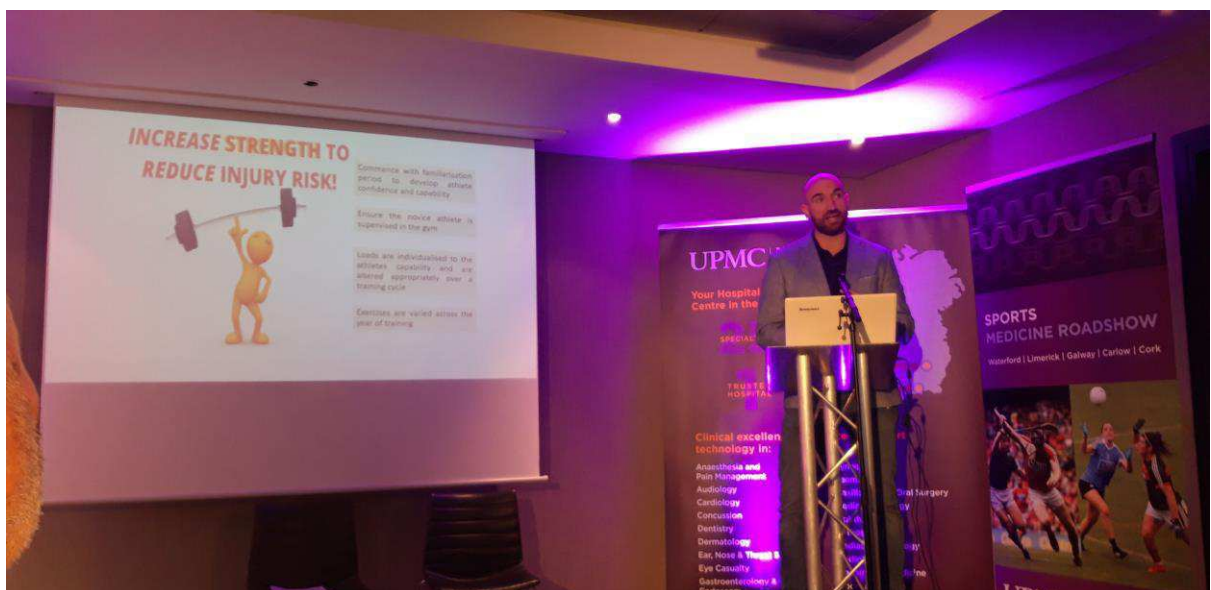
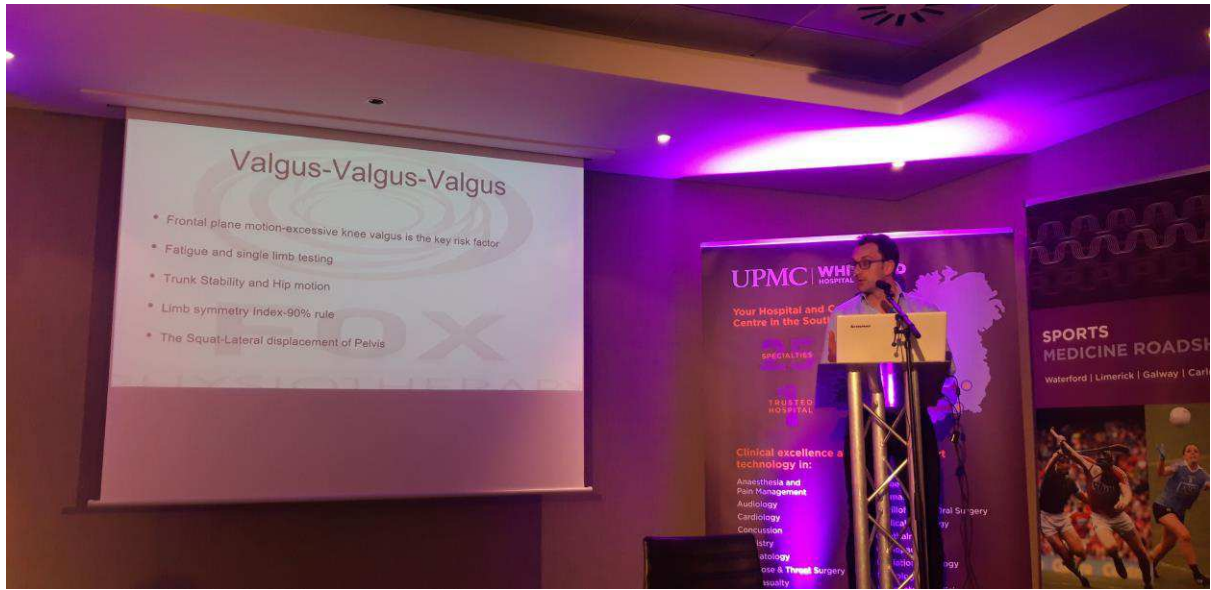
The meeting was rounded up by a lively Panel Debate and Open Floor Discussion with great input from speakers and registered delegates alike.

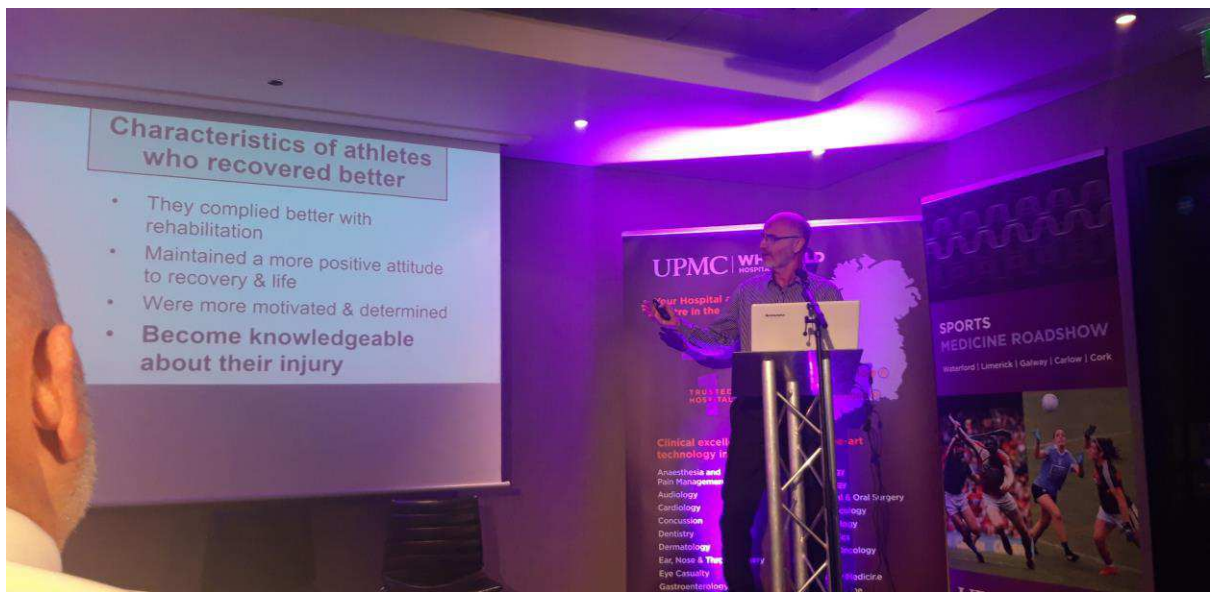
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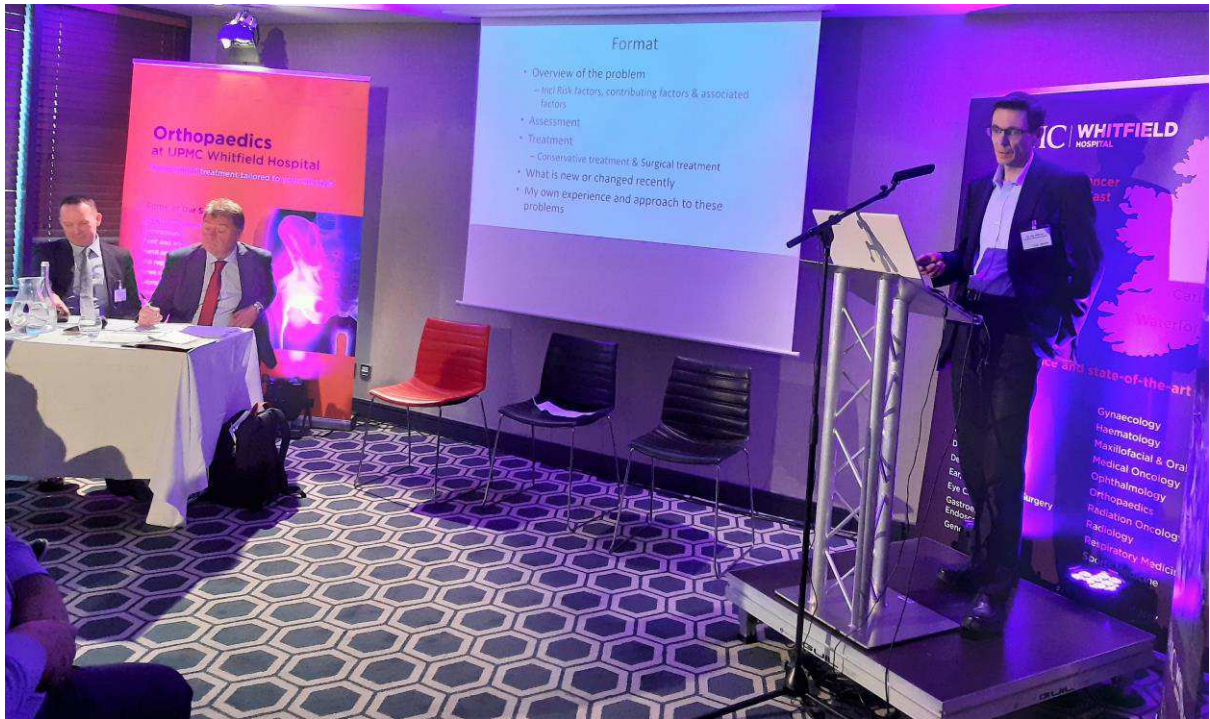


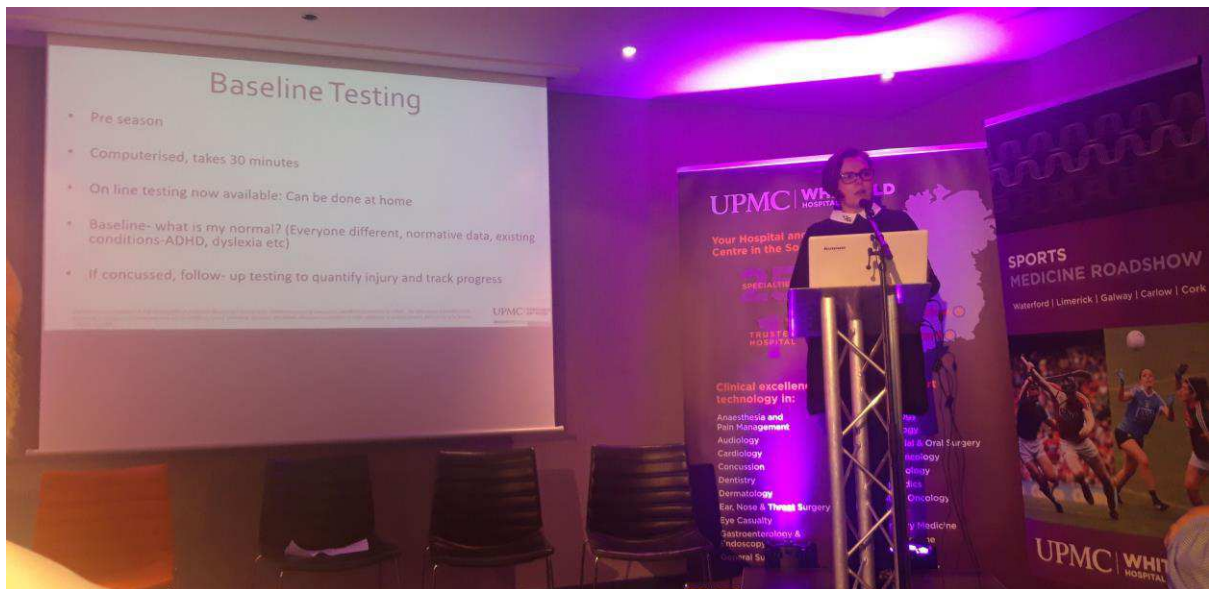


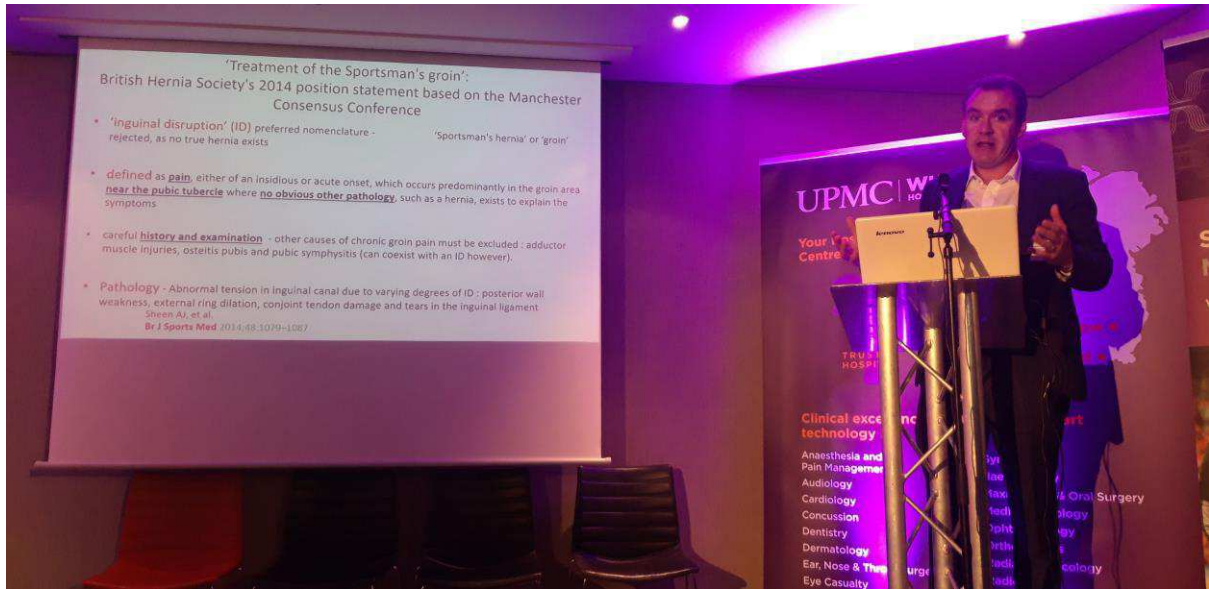












"Treatment of the Sportsman's groin":
British Hernia Society's 2014 position statement based on the Manchester
Consensus Conference

- 'Inguinal disruption' (ID) preferred nomenclature - 'Sportsman's hernia' or 'groin' rejected, as no true hernia exists
- defined as pain, either of an insidious or acute onset, which occurs predominantly in the groin area near the pubic tubercle where no obvious other pathology, such as a hernia, exists to explain the symptoms
- careful history and examination - other causes of chronic groin pain must be excluded: adductor muscle injuries, osteitis pubis and pubic symphysis (can coexist with an ID however).
- Pathology - Abnormal tension in inguinal canal due to varying degrees of ID; posterior wall weakness, external ring dilation, conjoint tendon damage and tears in the inguinal ligament
Sheen AJ, et al.
Br J Sports Med 2014;48:1079-1087

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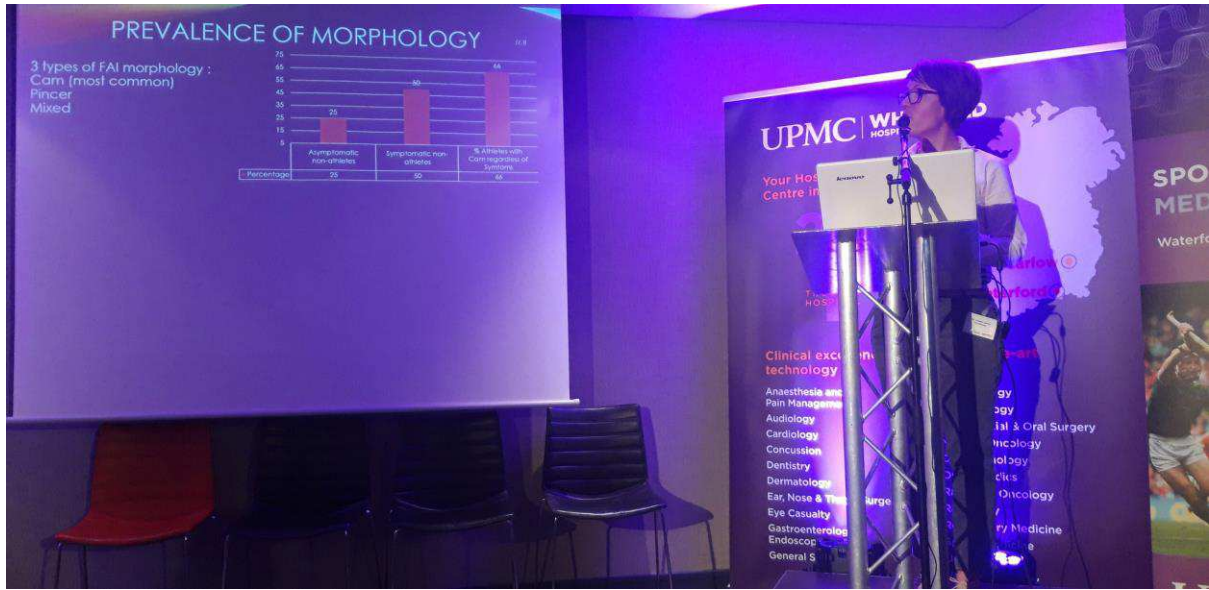
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