'Big Five' of sports medicine: preparation, teamwork, passion, mentorship and collaboration

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As *BJSM* Senior Associate Editor for Sports Cardiology since 2008, I have witnessed our discipline of sports medicine come of age. *BJSM*'s goal of helping to unite our field is coming into sight, and the world of sports medicine has never felt closer. As I write this, 23 *BJSM* affiliated societies from 16 countries are celebrated on a prominent international stage. Collaboration among countries has become both the norm and the foundation of new learning, strategic partnerships and key initiatives for athlete safety and health promotion.

'BIG FIVE'

The power of international collaboration was on prominent display at the recent South African Sports Medicine Association (SASMA) conference where Congress Convenor Dr Jon Patricios and SASMA President-elect Dr Phatho Zondi combined gracious South African hospitality with a premier scientific programme to inspire sports medicine professionals at every level.

I was honoured to participate in the SASMA congress and am grateful for my entire experience; undoubtedly a professional highlight and a personal ambition to explore their historic country and natural wonders. The 'Big Five'—traditionally assigned to the five most threatening animals (lion, leopard, rhino, elephant and buffalo)—took on new meaning at the SASMA congress as new themes emerged that represent the underpinnings of sports medicine for all of us.

Interwoven among the vibrant learners and leaders at SASMA, I would propose, the 'Big Five' of sports medicine include preparation, teamwork, passion, mentorship and collaboration. Few things are accomplished without proper preparation and teamwork. From emergent sideline care to successful research, a well-

Correspondence to Dr Jonathan A Drezner, Department of Family Medicine, Center for Sports Cardiology, University of Washington, Box 354060, Seattle, WA 98195, USA; jdrezner@uw.edu structured team approach is always more effective, and of course more enjoyable. We search for areas within our discipline that we are wholly committed to and where our passion overcomes apparent obstacles to success. In this search for direction, true mentorship from respected colleagues with a shared interest can ignite a career in patient care, teaching or scholarship, all of which are fortified by valuable collaborations near and far.

BRITISH JOURNAL OF SPORTS CARDIOLOGY?

BISM is a leader in sports cardiology through international collaboration. This sports cardiology theme issue features two state-of-the-art reviews. The first by Professor Mathew Wilson covers the scientific foundations for the cardiovascular benefits of exercise (see page 93) and the second by Dr Andrew Cheng examining Marfan syndrome, aortopathies and the proper exercise prescription (see page 100). Professor Efraim Kramer also summarises key areas from the European Resuscitation Council Guidelines (see page 81) relevant to treatment of sudden cardiac arrest on the field-of-play. Further advances in our sports cardiology knowledge are provided by original research validating modern ECG criteria through a comparison in student athletes and a cohort of patients with hypertrophic cardiomyopathy (see page 105). Novel data are also presented that redefines the significance of a short QT interval (see page 124) and the incidence of sudden cardiac death in US military personnel (see page 118). And, lastly, a thought-provoking case series is presented to start our understanding of the significance of late gadolinium enhancement on cardiac MRI in endurance athletes (see page 111).

Within sports cardiology, no area has evolved faster in recent years than ECG interpretation in athletes. Anchored by the international collaboration that produced the Seattle criteria, the critical importance of lateral T wave inversion is again highlighted in a commentary fit for

every sports physician (*see page 72*). Challenging issues related to playing with an internal cardioverter defibrillator are highlighted in a presentation of hypertrophic cardiomyopathy (*see page 105*).

IS KNOWLEDGE ENOUGH?

Many terms are promoted as having profound meaning or even influencing behaviour change. For instance, it remains undisputed that regular physical activity is the best medicine. Yet have we really captured the true essence or pathway to meaningful change? One term, admittedly absent from the 'Big Five', may carry more significance than all others—inspiration.

We all want to be inspired—from the young clinician to the accomplished professor. Sports are inspiring, both in winning and losing, and in feats of heroic athletic achievement. Likewise, a moment of genuine mentorship given to a young learner, the completion of new scientific research, or the seamless assembly and presentation of complex data into a dynamic presentation are all inspiring. Perhaps inspiration is what we need to drive successful and rewarding professional careers. Perhaps inspiration, not antagonism, is what our policymakers and patients need to positively impact change. Inspiration, simpler said than achieved, but always welcome when presented to fuel our passion and direction.

International conferences, like SASMA, AMSSM (Dallas, Texas, USA—16–20 April 2016), the IOC World Conference on Prevention of Injury and Illness in Sport (Monaco—16–18 March 2017), and many others, provide the perfect forum to experience the 'Big Five' of international collaboration, exchange ideas and be inspired.

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