Sport and Exercise Medicine

The Sport and Exercise Medicine (SEM) Department was opened in 1991 when the sports medicine clinics began. The services provided by the RNOH have gradually expanded since then.

The philosophy

The department focuses on the understanding of the effect of exercise on the body.

Sports injuries often occur as a result of errors in training and activity and can often be prevented by understanding how the body responds to exercise. Poor quality equipment can also play a role. Once an injury has occurred, early diagnosis is important. This can usually be achieved with good history taking and examination but imaging is often necessary. Most injuries can be treated by applying relative rest, physical therapy and the principles of rehabilitation. Occasionally orthoses, medication and injections are required. Only rarely is surgery necessary. This approach requires a multidisciplinary team.

Exercise has a profound effect on many systems in the body. This can be utilised in health promotion. It can also be used as a treatment for many chronic diseases and is often more effective than medication in the treatment of these conditions. We are therefore very keen to encourage our patients to exercise in a safe and effective way to improve their wellbeing and to reduce their medication requirements.

The team

The department is headed by Dr Roger Wolman, Consultant in Rheumatology and Sport and Exercise Medicine. He has worked in SEM since 1987 when he was appointed to the British Olympic Medical Centre. During his time there he wrote his MD thesis on osteoporosis in female athletes (awarded in 1991). He continued to work at the centre until it was closed in 2009. In addition to working for the British Olympic Association, he has worked for the British modern pentathlon team, a premier division football club and several dance companies (and schools).

His main interests are running an NHS Sports Medicine department providing treatment for injuries and developing an exercise prescription service. He is also working with One Dance UK to develop the Dance Medicine clinic. Dr Wolman was one of the first doctors in the UK to be put on the GMC Specialist Register in Sport and Exercise Medicine.

Dr Wolman is supported by the following colleagues:

- Dr Richard Keen - Bone diseases
- Dr Helen Cohen - Hypermobility
- Tony Betts and team - Physiotherapy
Clinical services

1. Two sports medicine clinics per week

These are for patients who have injuries and medical problems related to sport. Referral can be made through the GP to Dr Wolman (or specialist) at the RNOH. The clinics take place at both hospital sites (Stanmore and the Outpatient Assessment Centre in central London). The clinics are supported by the Physiotherapy Department headed by Mr Tony Betts and the Orthotics Department where Mr Jim Ashworth-Beaumont has a particular interest.

2. Weekly dance medicine clinic

These are for patients who have injuries and medical problems related to dance. Referral can be made through the GP (or specialist) to Dr Wolman at the RNOH. The clinics take place at both hospital sites (Stanmore and the Outpatient Assessment Centre in central London) and are supported by the Lead Physiotherapist for dance Caroline Jubb, the Physiotherapy department and the Orthotics Department where Mr Jim Ashworth-Beaumont has a particular interest.

3. Weekly exercise prescription clinic

These are for patients who wish to exercise in the presence of medical problems either for the general health benefits of exercise or to use exercise as a treatment for the medical disorder they have. Referral can be made through the GP (or specialist) to Dr Wolman at the RNOH. The clinics take place at both hospital sites (Stanmore and the Outpatient Assessment Centre in central London).

4. Athletes bone clinic – every two months

These are for athletes with bone stress injuries and other bone problems related to sport where the diagnosis is unclear or where the problem has not responded to standard treatment. Referral can be made through the GP (or specialist) to Dr Wolman or Dr Keen at the RNOH. The clinic is run by both Dr Wolman and Dr Keen and takes place in the RNOH’s central London Outpatient Assessment Centre.

5. Weekly hypermobility clinics

These are for athletes and patients with problems related to hypermobility (excessive joint laxity). Referral can be made through the GP (or specialist) to Dr Wolman or Dr Cohen at the RNOH. The clinics take place at both hospital sites (Stanmore and the Outpatient Assessment Centre in central London).

6. Compartment pressure measurement

This service is available to investigate the possibility of chronic compartment syndrome in athletes with exertional leg pain. We occasionally use it to investigate exertional symptoms in the forearm. We do a monthly clinic and use the Stryker system to measure compartment pressures. The measurements are performed by Matt Thornton and Dr Roger Wolman.

7. Computerised motion analysis
This service is available to assess movement, in particular abnormalities of the walking gait, although it can be used to assess other movements. We use the CODA system with force plates although we are also able to provide video analysis. The measurements are performed by Matt Thornton and Roisin Delaney.

Research

1. The use of bisphosphonates in bone stress injuries

We have been using bisphosphonates for management of bone stress injuries for several years. We monitor our outcomes and report our findings through conferences and publications.

2. Vitamin D deficiency in dancers and athletes

We are currently investigating the effect of vitamin D deficiency on bone and muscle function in athletes and dancers.

3. The management of tendinopathy

We are actively involved in tendinopathy research publishing on the use of eccentric-loading exercise training and the use of platelet-rich plasma injections.

4. Proprioception measurement and proprioceptive training

Proprioception impairment is a prominent feature of many musculoskeletal disorders including osteoarthritis, back pain and the hypermobility syndrome. It is also present in the athletes during recovery from injury. We are assessing ways of measuring proprioception and then measuring the effect of proprioceptive training.

Referrals
All referrals should be addressed to Dr RL Wolman at Stanmore

Key contacts
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