



OP 9

Cardiovascular risks for participation in competitive sports among the adolescent athletes who are attending selected sports medicine clinics in Sri Lanka - Pilot study

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Objectives: The objectives were to determine the proportion of cardiovascular disease (CVD) among adolescent athletes who attend selected sports medicine clinics in Sri Lanka and to describe the clinical spectrum of CVD among adolescent athletes who attend selected sports medicine clinics in Sri Lanka.

Methods: This cross-sectional study was conducted within six months in three sports medicine clinics (clusters: Colombo, Galle and Kandy) and included all adolescent athletes aged 10-19 years (n=566), who attended these during the said period for medical clearance prior to the competitive sports events. Secondary data was collected from pre-participation examination (PPE) forms using a data extraction form.

Results: Prevalence of CVD among adolescent athletes in Sri Lanka was 1.5%. Most common cardiac abnormality was Mitral Valve Prolapse (MVP). Mitral Stenosis, Ventricular Septal Defect (VSD) and Aortic Stenosis were other cardiac abnormalities detected. An important incidental finding of the study was the higher prevalence of (5%) bronchial asthma among adolescent athletes.

Conclusions: Prevalence of CVD among adolescent athletes in Sri Lanka is relatively low, but may lead to adverse outcomes if undetected early. Further research is needed to inform possible interventions to prevent health adversities arising from CVD in adolescent athletes in Sri Lanka.

OP 10

Identifying risks related to road traffic accidents among vulnerable population in Moneragala district, Sri Lanka

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Objectives: To identify individual and environmental risks related to road traffic accidents (RTA) among elderly (>60 years) and disabled people (>5 years living with physical, sensory or mobility impairment) in Moneragala district.

Methods: Study was designed as community based participatory research. Participants were vulnerable road users (elderly and disabled). Eight focus group discussions (8-10 in each) were conducted with elderly and disabled to identify local and regional destinations that were most important to access, perceived risks related to RTA and needs/suggestions for road safety. Participants were encouraged to photograph the environment barriers and facilitators for road safety. 'Photovoice' is increasingly used as valuable adjunct in participatory research - a voice better heard through.

Results: Frequently visited places identified by older people were the hospital, temple, village houses, community hall and bank. For disabled it varied by age, as vocational training centre, special needs school and community centre. Mostly used travel modes were public bus, three wheeled-vehicles or walking. Transportation barriers for the elderly were identified as poor road conditions, lack of disability-friendly transportation system, financial constraints and negative human factors. Disabled found accessibility to public places a major barrier. These facts were supported by photographs. Suggestions for improvement included awareness programs among people involved in transportation, cost effective transportation modes, mass media acknowledgments of rights of elderly and disabled, more effective legislation and improved road infrastructure.

Conclusions: It is evident that many places the study population frequently travels are located in the city. They face many risks when travelling to these destinations. It is proposed to improve road conditions, modify mode of transportation, rigorous law enforcement and awareness programs among public to minimize the road related risks faced by disabled and elderly.