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The Distinct Moral Principles of Sports Medicine`

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ABSTRACT

Physicians who practice in the field of competitive sports have particular ethical difficulties, many of which revolve around conflicts of interest. While providing care for the individual athlete, team-employed doctors have a duty to operate in the club's best interests. In order to decide if an athlete can compete safely, they must weigh factors including safeguarding versus disclosing health information, as well as autonomous informed consent against paternalistic decision-making. Additionally, the physician must deal with an athlete's decisions regarding performance improvement and return to play, which may not be in the athlete's long-term best interests but may benefit the athlete and team in the near term. The lack of evidence-based standards in a field where the allure of financial advantages for all parties engaged makes these challenging duties much more onerous.

Keywords: Ethics, Sports Medicine, Conflict of Interest, Sports, Football, Athletes

INTRODUCTION

Physicians who practice in the field of competitive sports have particular ethical difficulties, many of which revolve around conflicts of interest. While providing care for the individual athlete, team-employed doctors have a duty to operate in the club's best interests. In order to decide if an athlete can compete safely, they must weigh factors including safeguarding versus disclosing health information, as well as autonomous informed consent against paternalistic decision-making. Additionally, the physician must deal with an athlete's decisions regarding performance improvement and return to play, which may not be in the athlete's long-term best interests but may benefit the athlete and team in the near term. The lack of evidence-based standards in a field where the allure of financial advantages for all parties engaged makes these challenging duties much more onerous. The medical literature does not adequately address the special medical ethics problems that the world of competitive sports faces. Conflicts of interest, including those involving the club's dual roles as an employer and a medical care provider, the players' desire to compete versus their own best medical interests, and the relative costs of injury prevention versus short- and long-term morbidities, are at the heart of many of these problems. The liberty of the athlete and the doctor's responsibility to advance health might occasionally conflict. The team doctor and the athlete's personal doctor are distinct in the field of sports medicine. An athlete's health is the major concern of their personal doctor. The role of the team doctor is to look after the "team's health" and make sure that the athletes are healthy enough to compete. When an athlete's capacity to compete and his personal health are not supported by the same actions, conflicts of interest result. The health of the athlete and the success of the team often conflict. The team doctor's effectiveness as a club employee could depend on the team's performance and his or her capacity to keep players on the field, which could necessitate promoting short-term advantages. At its most basic level, ethics is the study of what makes a specific action in a specific scenario the appropriate thing to do. The peculiar clinical setting of caring for players within the context of a team whose primary purpose is to win brings several special obstacles to the practice of ethics in sports medicine. The typical doctor-patient interaction is therefore frequently twisted or nonexistent. The common trio of doctor, patient, and team can lead to situations in which the team's priorities may conflict with or even take precedence over the doctor's primary responsibility for the player's well-being. Therefore, the traditional ethical standards that govern the majority of clinical practices, such as patient confidentiality and autonomy, are difficult to apply to sports medicine.

Determination problems:

Sport naturally acts as a medium for leadership, fair play, health, and other socially beneficial concepts. It also plays a crucial role in society. Fairness, which can serve as a metaphor for behavior in daily life, is one of the fundamental tenets of sport. An unofficial motto of the Olympic Games, "The most important thing is not to win but to participate," embodies the fundamental spirit of sport. The administration, instruction, and practice of the sport will determine whether or not this ethos is followed.

Health care determination problem may be paternalistic, autonomous, or communal. The decision should be made for the patient by the doctor, who was thought to be in the best position to understand the risks and advantages of the proposed course of treatment. The development of medical ethics in the latter half of the 20th century has resulted in a shift in viewpoints in favor of the shared determination Problem model over the paternalistic method. Patients desire information about available treatment options as well as participation in the choice-making process. In the model of shared determination Problem, the patient and the doctor exchange information and make decisions together. The patient must inform the doctor about his interests, preferences, cultural background, social status, and financial situation while the doctor must describe all treatment options, their risks, and benefits. The players' decision-making process may be impacted by outside factors in sports medicine. Take the example of a high school football player who was diagnosed with a meniscal injury and given the choice between non-operative treatment, arthroscopic partial meniscectomy, or arthroscopic meniscal repair. A meniscal repair, as opposed to a meniscectomy, was the best choice in the doctor's opinion because it carried a decreased risk of developing knee osteoarthritis later on. The player might lose out on the chance to receive a scholarship if they underwent a meniscal repair because it would take longer for them to heal and they would be unable to play the rest of the football season.