

TITLE: Disability and sport: a two years experience from Modena, Italy.
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INTRODUCTION

The "Disability and Sport" project has begun in November 2007 at the Service of Sports Medicine of the Local Health Unit of Modena. It was created with assistance of institutions both public and private: uses facilities and health personnel of the Regional Health Service of Emilia-Romagna. It takes care of disabled people who play sports with sports associations, disabled involved in physical activities through social services and voluntary associations and disabled not yet included in any sport. Physical inactivity is one of the leading causes of illness and death mainly for determining damages on the cardio-vascular equipment. In disabled population, low motor activity and the consequent weight gain determines reduction of residual abilities and further compromising autonomy, as has already been reported (Edouard et al, 2007). Unlike sport inappropriate to the disability may cause health or psychological problems.

DEVELOPMENT

The project consists of a multidisciplinary assessment (medical, physiatrists, nutrition, cardiology) for people with motor or mental disabilities and combination of both. The basic objective is to foster the practice of sport in safety, according to Pillet et al (2009). The second objective is to create a local network for disabled persons, their families, sports clubs. Finally we wish to prepare health and sports technicians in assistance to disabled athletes. The experimental phase includes two periods of 18 months each from November 2007 to May 2011. They are wholly funded by private donors and by public bodies; the total budget is € 100.000. Expenditure control is exercised by the Department of Public Health of Modena. From November 2007 to November 2009 we performed 196 visits, 131 first visits (male: 101, female 30) and 65 controls. Average age was 31.3 years (maximum 64, minimum 11). Competitive athletes were 37, non-agonists 94. The prevalence group was the mentally disabled (70), compared to motor (39) and to mixed disabilities (22). Most represented sport was riding, followed by swimming and athletics.

CONCLUSION

The project is allowing us to study the correlations between sport, health status and social integration in disabled people, as Wilhelm (2000) has proposed. During the period under review there were 2 cases of abandonment of sport: one for personal problems, one stopped because of us for health reasons (hypertension not adequately controlled by medication). In seven cases it was necessary to amend or supplement the sport practiced; in disorders of the spine of individuals with Down Syndrome, we associate swimming with riding. Particular attention was paid to cardiovascular patients with spinal cord injury practicing handybike. The main line of development involves collaboration with high schools of Modena for disabled students aged between 14 and 19 years. Our goal is to control the safety of sport in schools and ensure the continuation of activity even after the completion of studies.

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PREFERRED METHOD OF PRESENTATION: oral

MAJOR FUNDERS OF THE PROJECT

Fondazione Cassa di Risparmio di Modena
Panathlon International Club Sezione di Modena
Assessorato Politiche per la Salute Regione Emilia-Romagna
Azienda USL Modena
Azienda Ospedaliero-Universitaria Modena
Comune di Modena
Comune di Carpi
Coop Bilanciai Campogalliano
Lions Club Modena

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