IMMDA'S HEALTH RECOMMENDATIONS FOR RUNNERS & WALKERS

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As Medical Directors (IMMDA: International Marathon Medical Director's Association) of the world's largest marathons and endurance events, it is our desire to educate and ensure that our participants remain healthy and perform well. With increased numbers of participants of both marathons and half marathons throughout the world, and increased attention to Sudden Death by the media and lay public, we have focused our efforts to understanding this phenomena and how it can be prevented.

Rational:

Marathon and Half marathon participation is an extreme endurance sport with intrinsic risks inherent in understanding and respecting these distances. Current theory behind Sudden Death in these athletes, based on preliminary research and observations include:

- Underlying Conditions not previously found in the athlete
- There is evidence that exercise can increase the risk of cardiac events, including heart attack and death. The risk is reduced by regular exercise. Attempts to exceed the intensity or duration of an established level of exercise may induce compensatory mechanisms that are deleterious.
- Endurance exercise releases muscle enzymes which may activate platelets and produce a thrombus and cardiac ischemia.
- There are studies that indicate an increased risk associated with increased caffeine consumption above 200mg during endurance exercise.
- Hyponatremia is a preventable condition if participants drink sports drinks or its equivalent for thirst, don't take non steroidal anti-inflammatories (NSAIDs) during running and consume salt.
- Sprinting the last mile may increase adrenaline and take a susceptible myocardium into an abnormal rhythm.

Recommendations:

In an attempt to reduce the risks of Sudden Death, IMMDA has developed the following guidelines. We have attempted to use the best available scientific research to support these guidelines with the understanding that we are conducting new research worldwide and may modify these recommendations in the future.

- 1. Participants should not only be sufficiently trained, but equally important, they should have a goal and corresponding race plan that is appropriate for that level of training and fitness. If not, do not attempt the distance.
- 2. Have a yearly physical examination being sure to discuss your exercise plans, goals and intensity at that visit.

- 3. Consume one baby aspirin (81mg) on the morning of a long run/walk of 10k or more if no medical contraindication.
- 4. Consume less than 200mg caffeine before and during a 10K or more.
- 5. Only drink a sports drink or its equivalent during a workout of 10k or more.
- 6. Drink for thirst.
- 7. Do not consume a NSAID during a run or walk of 10k or more.
- 8. Consume salt (if no medical contraindication) during a 10k or more.
- 9. During the last mile, maintain your pace or slow down; do not sprint the last part of the race unless you have practiced this in your training. Run/walk as you train.

The International Marathon Medical Directors Association (IMMDA) was formed as the Consulting Medical Committee of the Association of International Marathons (AIMS). The International Marathon Medical Directors Association (IMMDA) was formed as the Consulting Medical Committee of the Association of International Marathons (AIMS). AIMS is a global organization of marathons and distance races, formed in May 1982. The purpose of AIMS is to i) foster and promote distance running throughout the world, ii) work with the International Association of Athletics Federations (IAAF) as the sport's world governing body on all matters relating to road running, and iii) exchange information, knowledge, and expertise among its member events. AIMS' current roster numbers approximately 300 events which are conducted in more than 90 countries and all seven continents, and among which are some of the world's largest and most prestigious marathons.

The purpose of IMMDA is to i) promote and study the health of long distance runners, ii) promote research into the cause and treatment of running injuries, iii) prevent the occurrence of injuries during mass participation runs, iv) offer guidelines for the provision of uniform marathon medical services throughout the world, and v) promote a close working relationship between race and medical directors in achieving the above four goals.

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