

THE MAINE FRAME

The limits of a healthy obsession.

I recently listened to an inspirational montage of Kobe Bryant's life philosophy. He was one of the NBA's best players before he passed away in a helicopter crash in 2020.

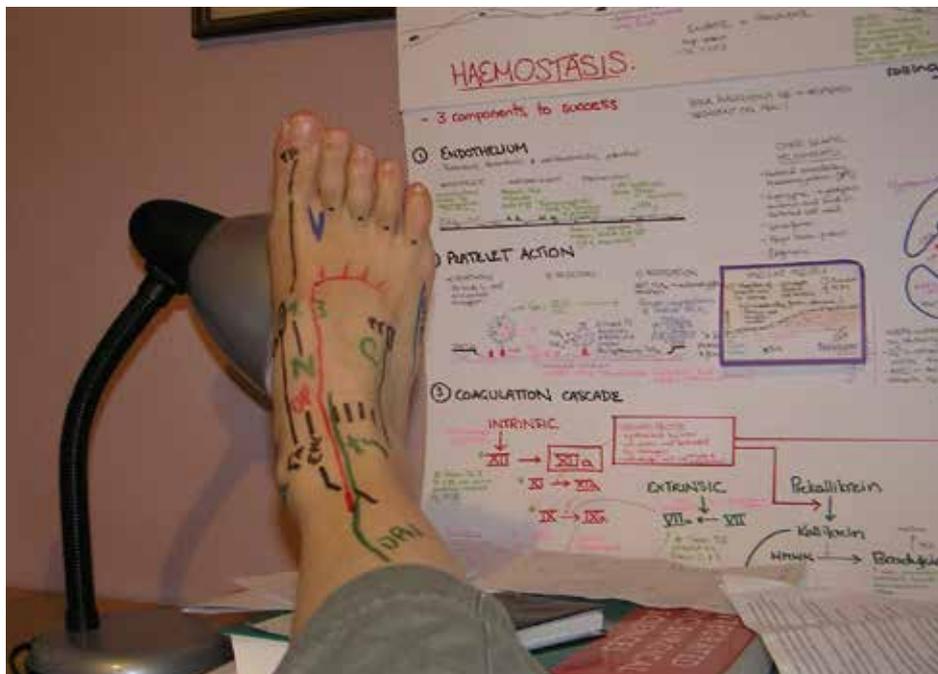
Bryant was well known for an incredible work ethic combined with single minded determination and self belief. The #metoo movement had not yet been born and as the father of four daughters, the allegations of sexual assault levelled against him were largely forgotten at the time of his death. Love him or not, his character and renowned "killer instinct" facilitated his achievements both on the court and later off the court as an entrepreneur and business owner.

One statement that Bryant made in particular surprised me. He said that he surrounded himself with obsessive people. I had to stop and think - obsession is not something I usually associate as being a positive character trait. And why would he want to have such people around?

Then it dawned on me that I too had, shall we say, obsessive tendencies.

One of my most unhealthy obsessive states was while studying for the surgical primary exam where we sat a 4 week prep course in Dunedin just prior to the paper. With no family distractions, work or activities that could drag us back to the reality of a normal existence, we breathed, ate and dreamt anatomy, pathology and physiology.

We woke at 6am, did 2 hours of multiple choice questions before breakfast, then studied all day. After this, it was practice papers before dinner and another 4 hours before bed at 11.30pm or midnight.



Pictured: My foot during that exam prep period

I have a pictorial brain and I learn by drawing. I draw on everything and often create large wall covering posters that integrate a number of different elements of a topic. At the end of the 6 weeks, my room looked like something out of a crazed serial killer movie. I have always sat every exam with the intention of sitting it once and I have thankfully never needed to sit one twice.

Successful people are often so because they are obsessed with a topic. So I'm not surprised Bryant surrounded himself with them - it meant he has the best around him. The best physiotherapist, trainers, doctors, other athletes. That would allow him to perform at his best.

As doctors, surgeons and clinicians we're all a little obsessed with what we do, are we not? I can confidently say from personal experience

"I have a pictorial brain and I learn by drawing..."

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that I could never have done that without the support network I had around me - many as obsessed as I was. A certain level of obsession is essential, however, too much and it can lead to unhealthy behaviour and an unpleasant experience of life. Moderation is the key. Having people around us who can both tolerate and promote that it key.

Luckily for me, the exams always had an end date. At the same time, without the people

in our lives to ground us, and support us, our obsessions can take over. There is a significant part of me that yearns for the immersion that obsession creates, however as an older and hopefully wiser part of me recognises that a healthy approach to life and the welfare of the people around me are just as, if not more important.

Managing the expectations of an Aging Athlete.

I would love to write this article without the benefit of experience.

Although I work mostly with young athletes, the reason that I decided to put fingers to keyboard is that the discussions I have had with many of my maturing patients seem to mirror my own emotional angst.

While this provides me a wonderful platform on which to connect with my patients, and subsequently incur the ire of my incredibly organised practice manager, Bek, by running late with appointments, I do find that the patients I see are usually hard working members of the community that have an interest in sport outside of their professional lives. They're usually damn good at it too!

And if I'm talking to them it means you are too. So I thought this may be of use:

There are 4 main challenges in being an amateur athlete that I perceive to be a problem.

1

The emotional expectations of the athlete are not that dissimilar to that of a professional sportsperson – they train their bodies to their mental and physical limit.

2

Unlike a professional sportsperson, an amateur or junior athlete does not usually have access to the sports specific training programs that are accompanied by being a member of a professional team.

3

The amateur athlete is juggling work, sport, a family, as well as injuries – not suggesting for a second that a professional doesn't - but the amateur doesn't have the same support around them that a professional may have.

4

When a professional is injured they have the benefit of immediate treatment including investigation, rehabilitation programs to prevent deconditioning, and expedite recovery of the injured limb. Our amateur athletes, weekend warriors, and most concerningly our junior athletes are often plunged into the pool of patients who are not diagnosed or treated emergently and then go on to decondition further as they await appropriate management.

As we get older, it seems that our emotional desire to achieve and push ourselves beyond what our bodies are capable of doing does not change.

Unfortunately our bodies capacity to heal and recover does. This irritating reality sets us up for failure unless we are prepared to acknowledge and adapt our training programs to our aging bodies... which is something that I for one certainly don't want to admit I have to do.

So how do we navigate this spiral of aging calamity??

The answer is an ugly one.

We do have to adjust our expectations if we choose to continue getting the most out of our physical performance. This may not actually be settling for a slower time, or being happy that we "gave it a go but didn't win", but we do need to accept that the training programs that used to get us results in our 20's will not be the ones that smash us through the finish line in our 40's and 50's. We now have a much better understanding of periodising training schedules to allow for recovery and we should be using this to our advantage.

My passion for this is what drives my practice.

I want every patient regardless of their age to know that whether they achieve their goals or not, they could not possibly have done anything more physically or mentally to get there. The satisfaction of knowing you did your absolute best means that the outcome doesn't matter and usually your best means that you won – in one way or another.



Team Spotlight

In order to provide our athletes with the best care we often need to address the medical side of their treatment. For that we have the amazing Dr Stacey Compton working with us.

Stacey is a Sports and Exercise Medicine Physician, with a special interest in relative energy deficiency in sport, bone stress injuries, menstrual disturbance in athletes (including amenorrhoea), endurance sports, dance medicine, and paediatric sports medicine.

*Thanks
Stacey*

*Pictured above: Dr Stacey Compton
Sports and Exercise Medicine Physician*



Facing fears & making it fun.

Recently our practice manager extraordinaire, Bek, and her 11 year old daughter challenged themselves with a zip line experience that had both ladies feeling very proud of themselves.

Well done to both of you!

Young athletes and their knees:

The Brisbane Children's Hospital states that, "Australia has the highest incidence of ACL injuries in the world, and sports injuries are now primary reasons for admission of youths to hospital." The BCH have embarked on one of the world's first paediatric ACL registries. It's something I'm passionate about and will hopefully be able to share the results shortly!

To see the latest information about this, visit our website www.qldlrc.com.au.

In the meantime, here's a photo from a 9yo who's ACL I reconstructed recently:



Drawing above: By the 9 year old who's ACL I reconstructed recently



"You think you've got a bad knee? Let me tell you about a bad knee, my brother."

Did you know?

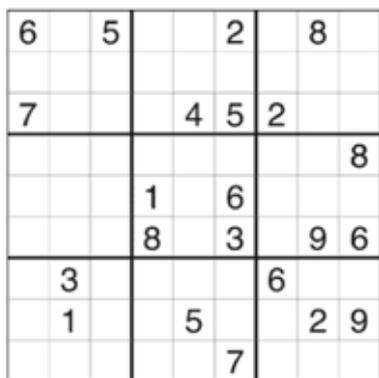
We offer emergency consultation for acute knee injuries. Just call Bek at the clinic to make a booking.

This news is all about you...

With Heartfelt Thanks For Your Referrals.

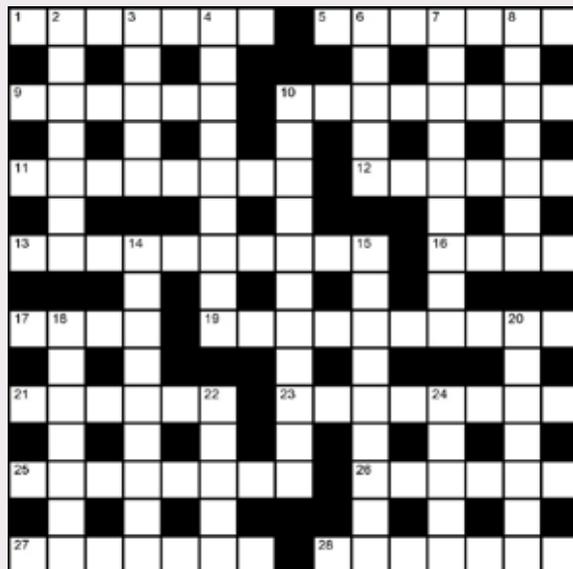
There's no question I have the BEST patients and referring doctors on the entire planet:

- Dr Z. Ahamad, Dr A. Badger, Dr W. Baig,
- Dr M. Bellmere, Dr J. Cantrill, Dr L. Clyne
- Dr S. Compton, Dr H. Fuentes, Dr S. Gonzo
- Dr R. Griffiths, Dr K. Groeneveld, Dr P. Hackney
- Dr K. Horsnell, Dr D. Makeren, Dr R. Melville,
- Dr C. Nissen, Dr S. Nunn, Dr C. Nwufoh,
- Dr P. Parker, Dr M. Psaltis, Dr A. Quail
- Dr S. Rajaretnam, Dr V. Ramachandran
- Dr J. Saleem, Dr A. Singh, Dr R. Singh, Dr V. Siu
- Dr J. Tran, Dr L. Watson, Dr P. Wilson,
- Dr S. Woods, Dr B. Adeli, Dr J. Parasuraman,
- Dr R. Mulcahy.



Across

- 1 Gulps of air (7)
- 5 Assistance for the needy (7)
- 9 Big commotion (6)
- 10 Exploit (3,2,3)
- 11 In an emergency, it doesn't come second (5,3)
- 12 Small wave (6)
- 13 Field hockey player with Olympic gold and bronze medals (5,5)
- 16 Land of ayatollahs (4)
- 17 It may be half-baked (4)
- 19 Corresponding (10)
- 21 Sunk (6)
- 23 It goes, according to Cole Porter (8)
- 25 A dishonest flyer, by the sound of it (8)
- 26 Gum arabic (6)
- 27 Simulated on a computer (7)
- 28 Hang in there! (7)

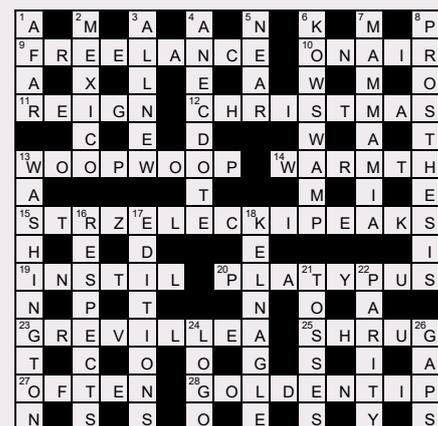


Answers will be in next months newsletter!

Down

- 2 Knockoff (7)
- 3 Tiny particles (5)
- 4 White-flowered NE Queensland rainforest tree (4,5)
- 6 Go in (5)
- 7 Clue in the dirt (9)
- 8 Parrot variety (7)
- 10 Burnett River dry spot? (5,6)
- 14 Directly (2,1,6)
- 15 Bellarine Peninsula swamp (5,4)
- 18 Genuine (5-2)
- 20 Catholic welfare organisation (7)
- 22 Subject of Professor Higgins' experiment (5)
- 24 A lot (5)

Last month's crosswords answers:



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