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i) Females participation in sport is often hindered by their participation in sport. They are more likely to experience iron deficiency and bone density issues than males are. This is due to blood released containing iron when a woman menstruates, + this can differ greatly as some bleed more than others. Severe iron deficiency is also known as "anaemia" and results in the quicker fatigue of an athlete, due to lack of iron to muscles. Bone density refers to the strength + thickness of the bones of the body. It greatly affects females participation in sport due to the nature of certain high intensity sports such as netball or gymnastics, where the athlete is constantly placing great pressure on the bones, with jump-like moves. This can also affect the prevalence of conditions such as arthritis + osteoporosis, but can be helped by the supplementation of calcium, And greater amounts of milk. Iron deficient women should eat red meat at least 3 times a week or take iron in tablet form

ii) Sports Medicine addresses the medical conditions of children + young athletes through various management techniques. The major medical conditions affecting performance in young athletes are asthma,

diabetes, and epilepsy. Children with asthma are often born with it and can affect their participation in sport greatly. Asthma is simply the constriction of the lungs and airways, hindering the child's ability to breathe smoothly and without "wheezing", especially during sport. Sports Med addresses asthma by recommending the provision of "puffers" during, ~~also~~, before, and post performance. Nebulisers are also a common short term cure for asthmatics.

Additionally, exercise-induced asthma is simply the inability to breathe normally during or after sport. This is managed through specific breathing techniques + the provision of a "puffer" or ventolin.

Diabetics are also managed through sports medicine for young athletes as various medical situations can occur. Diabetes Type I is the type that one individual is born with, and cannot be cured throughout the course of their life. However, type II is developed through unhealthy eating, obesity + low physical activity, resulting in cases of hyperglycaemia - too much insulin in the blood. Hypoglycaemia, ie Type I is diabetes of too little insulin. Sports can manage these through the provision of glycogen in the form of fruit or a jelly, or on the other end injection to balance the insulin + blood sugar levels. It should not affect an athlete's participation in

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in sport. Epilepsy is a condition of the neuromuscular system causing epileptic attacks. However, these should not stop participation in sports. Supervision from parents and coaches is beneficial so that if a grand-mal seizure were to occur, an ambulance could be called immediately. This can also be managed through the taking of epileptic medication.

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