Nautilus
Bulletin #1
Professional Medical Attitudes on Training

Throughout the medical profession a whole, a widespread – although by no means unanimous – attitude of doubt exists on the subject of physical training of any kind; and even if understandable, this is regrettable – leading, as it does, to a great number of confrontations between coaches and doctors. Part of this situation has arisen from the fact that the field of medicine has simply grown too broad for much more than a general knowledge outside the rather narrow limits of various subfields of specialization; but in no small part, it is also due to a prejudicial attitude not unlike that of the average layman.

While a few doctors have made rather limited attempts to investigate the possibilities of exercise, most of these efforts have been narrow in scope and shallow in depth – and very little in the way of widespread attention has been called to the few published reports that have been produced; as a result, it is extremely difficult to find any published reports on such investigations – and almost impossible to find any such reports with real significance.

Part of this apparent lack of interest is obviously a direct result of the presently widespread concentration upon attempts to discover specific chemical treatments for every sort of illness or injury; but it is also a result of the fact that a number of practitioners of fringe branches of medicine have attached themselves very firmly to some types of physical training – and members of the American Medical Association have shied away from exercise in a rather natural, if unjustified reaction to the statements of people that they look upon as quacks.

In many cases, such an attitude is perfectly justified – within the last six months, I read an article by a man calling himself a doctor, in which he made the flat statement that colds were not a result of "germs", that colds were attempts on the part of the body to rid itself of mucus that resulted from eating the wrong type of foods; he then went on to say that such mucus would eventually work its way out through the top of the head, and would then be called dandruff.

In the face of such published statements as that, it is certainly easy to understand the attitude of the average doctor; but in this case, the baby has almost literally been thrown out with the bath water – since most doctors seem to be totally unaware of the possibilities from physical training. And while such ignorance is at least understandable in this age of greatly specialized medicine, the average doctor is not at all hesitant about giving his opinions on the subject – obviously considering himself an expert, even though totally unaware of any of the significant developments that have taken place in the field of physical training during the last fifty years.

Nor is that an exceptional attitude – on the contrary, it is a far too typical attitude; and in a high percentage of cases, doctors are almost violent in their opposition to exercise of any kind. There are exceptions, of course, but one encounters them very rarely indeed.

To at least some degree, this attitude is changing – but it is changing very slowly; another two centuries of such change might produce a situation where the average doctor would admit that exercise was not "entirely bad."

In spite of simply enormous evidence that such treatment is almost the worse possible type of treatment, the average doctor still favors total immobilization of injured body parts – which, in some types of injuries, is the treatment of obvious choice; but which, in the case of most minor muscular injuries, is exactly the opposite approach to full recovery.
More than this, the average doctor still supports the same myths and superstitions encountered in the average layman – in regard to physical training, at least; and in most cases, their advice will be very brief on the subject of exercise, "... don't."

I can offer no constructive advice on this situation – except to say that great care should be used when selecting a physician. In any sport involving violent body contact, numerous minor injuries will inevitably result – and as any coach knows, many good athletes will play an entire season with some sort of minor injury. And while I am certainly not suggesting that anyone should engage in violent activity while suffering the effects of a serious injury, I am trying to clearly say that many muscular injuries can and should be exercised.