

**Queensland State Committee
Royal Australasian College of Surgeons
Leckhampton Offices Level 2 59-69 Shafston Avenue
Kangaroo Point QLD Australia 4169**

29 September 2016

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Research Director
Finance and Administration Committee
Parliament House
George Street
Brisbane Qld 4000

RE: Inquiry into how to improve health and safety outcomes for combat sports contestants in high risk professional and amateur contests in Queensland

Thank you for your consultation for improving health and safety outcomes for combat sports.

As the leading advocate for surgical standards, professionalism and surgical education in Australia and New Zealand, the Royal Australasian College of Surgeons (RACS) is committed to taking informed and principled positions on issues of public health at both state and federal level.

When considering the terms of reference for the inquiry, RACS supports the policy from the Neurosurgical Society of Australasia (NSA) on the Prevention and Management of Head and Spine Injuries in Sport.¹ Key aspects of this position in relation to boxing (and mixed martial arts) are as follows:

That uniform national guidelines and legislation are developed that would exclude people at risk, educate boxers and trainers as to the potential risks, and aim to minimise the risks, this would include:

- Pre-registration assessment of boxers including neurological, neuropsychological assessment and other key testing
- A national boxing register, including a board to oversee regulations
- License renewal conditional upon neurological, neuropsychological assessment and other key testing every three years
- A strict knock out and technical knock out policy
- Amateur and professional boxers included under the same controls, as well as minimum age limits.

Other recommendations include improvement in glove design and further investigation of the use of boxing helmets.

RACS has key concerns around head injury in contact sport, and recommends that any athlete suspected of sustaining concussion must not return to play on the day of injury. It also supports recommendations from the NSA that:



- There is no return to sport until there is complete recovery of symptoms, signs and neuropsychological status
- Educational programs on concussion in sport are developed and enhanced for trainers, coaches and health professionals
- Health professionals such as physicians, sports physicians, neuro-psychologists, neurosurgeons and neurologists are the experts who manage concussion in sport.

Emphasis should be made that repeated concussion in contact sport may be associated with ongoing cognitive deficit and post concessional symptoms and requires careful monitoring and removal from sport.

We look forward to effective strategies that work to improve health and safety outcomes for combat sports contestants in high risk professional and amateur contests in Queensland.

On behalf of the Royal Australasian College of Surgeons Queensland Regional Trauma Committee, we thank you for extending us with the opportunity to provide comment on this important area of public policy.

Yours Sincerely,

Richard Lewandowski
Chair, Queensland Trauma Committee

Reference

1. Neurosurgical society of Australasia. Policy on sport: Prevention and Management of Head and Spine Injuries in Sport. 2013.