An Inventory of Women's Sports Medicine Programs across the United States

Gabriella Ode¹, Tyler N Kelly, Madison Hopkins, Olivia Louise Lynch, Theresa A Chiaia¹, Polly De Mille¹, Moira Margaret McCarthy

¹Hospital For Special Surgery INTRODUCTION:

A rise in women's athletic participation, as well as research demonstrating higher incidence of musculoskeletal issues in women athletes, has led to increased focus on offering women's sports medicine (WSM) specialty services in healthcare systems and institutions across the country. The first WSM program within an orthopaedic department was established 25 years ago. Since then, comprehensive WSM programs have continued to arise and evolve. The purpose of this study is to assess the current landscape of WSM centers in the United States. Specifically, the study aims to determine the current number of WSM centers and their program characteristics, identify the most represented subspecialties within their programs, and develop recommendations for emerging programs.

METHODS:

This study was designed as a scientific study with a concurrent review of current literature. The primary investigation was performed via a detailed search of identified healthcare databases using specified search terms. The US News and World Reports Best Hospitals for Orthopaedics, listing 1,670 hospitals in the United States, was utilized as the primary reference. This list was then cross referenced with Becker's Hospital Review's list of Top 100 Orthopaedic Hospitals and FREIDA [™] AMA Residency and Fellowship Programs Database. Each program or hospital website identified from these databases was searched using the following search terms: 'women' AND 'sports medicine.' If a WSM program was identified on the website, information collected was analyzed to determine the overall number of WSM centers, regional distribution, and the subspecialties included in these programs for the care of active women. RESULTS:

Of the 1,676 healthcare centers reviewed, 29 WSM programs were identified. An additional 8 health systems had websites which specifically indicated services for "women's sports medicine services," "care for the female and pregnant athlete," "women's health," or "care for female athlete triad," however, no additional details regarding a WSM program or subspecialty services were reported. A total of 18 subspecialties were identified across WSM programs. The mean number of specialties offered within a program was 5, with 15 programs listing more than 5 subspecialties. The most common subspecialties were Orthopaedic Surgery (96.6%), Primary Care Sports Medicine (65.5%), Physical Therapy (65.5%), Nutrition (62.1%), and Physical Medicine and Rehabilitation (62.1%) (Table 1). The Northeast region has the highest concentration of WSM programs (n=13), with New York State having the most WSM programs (n=5) (Figure 1). Of the identified programs, 12 listed a specific program leader. The most common specialty among program leadership was Orthopaedic Surgery Sports Medicine. Specialties involved in a WSM program fell into three broad categories: Musculoskeletal Pathology, Performance, and Nutrition. This interdisciplinary collaboration between these specialties is illustrated in Figure 2.

DISCUSSION AND CONCLUSION: WSM programs continue to develop within healthcare centers across the United States. These programs and their contributions to the care of active women and the field of sports medicine are an important area of study. A comprehensive WSM program should ideally incorporate a variety of specialties that provide holistic care in the preventative, acute, and long-term management of active women and athletes and address fundamental pillars of performance, nutrition, and musculoskeletal pathology.

in a a non a a	pina		- pu		i i di di i di ori i,	ana	maccalocitorola
Table 1: Distribution of Subspecial	ties Amongst Identified	WSM Programs				Figure 3: Women's Sports Medicine: The In	tegrated Approach to the Care of Active Girls and Wome
Specialty Offered	Number of programs (n) offering specialty	% of programs offering specialty	Figure 1: Distribution	of Women's Sports Medicine Programs Across	the United States	Physical Theory Physical Section 1	Tatomity
Orthopedics	28	96.6		Distributrion of WSM Programs		Atlanz	
Primary Care Sports Medicine	19	65.5	1	Number of P	regrams Northeast (D)	Performance	Nutritiee Door Hoat
Physical Therapy	19	65.5	Midweek (6) 14. (Detweek of M) 16. (Detweek of M) 16. (Detweek of M)		MA (Braine Children, Brigham, Manadoueris Chronic) Net (Vaccourit) (heighter Haghts' Mill) Mill (Vaccourit) (heighter Haghts' Mill)	Dorna Physiogr	
Nutrition	18	62.1	 WE (Presider At the Medical College of V University of VE) 		 NY #100, Moard Sinsi, SYU Langon, Northwell, Xiory Brook) F4.(You, Extense) 	Physical Medican and	
Physical Medicine and Rehabilitation	18	62.1	Watt (4) CARCENOLUSE.UC Jan Displ		Southeast: (6) - 0.5 (Darry) - 1.4 (Darry)	Relations	
Psychology or Psychiatry	14	48.3	. 00.00		MD (20) NC (204c) NC (2010) Primi	(Mascaleskaletal Pathalary
Obstetrics and Gynecology	10	34.5	1	Prozentilo firm E-isotarea, Microsoft Tarrhen			
Endocrinology	8	27.6	1			Sheumablegy	$\neg \bigcirc$
Athletic Training	6	20.7	1				Primery Care Sports
Exercise Physiology	6	20.7	1				Maca
Bone Health	5	17.2	1				
Cardiology	5	17.2	1				
Rheumatology	4	13.8	1				
Neurology	3	10.3	1				
Radiology	3	10.3	1				
Other* Braintric Surgery (2) Internal Medicine (3) Gastroenterology Urogynecology (1) Occupational Therapy (1) Sport: Conditioning (1) Social Services (1)	7	24.1					