ORGANIZATION OF FIRST AID HELP IN SPORT COMPETITION IN 1945-1955

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Keywords:	Abstract:
• Poland,	Article was created on the ground of the press, which titles are placed by notes and references. Analysis of articles allowed to show process
• medical structure 1945-1955,	of organizing medical-sport first aid procedures during sport
• sport.	tournaments, statute of demanded equipment in first aid kits, procedures of securing sport tournaments.

The risk of injuries in professional sport is higher than in normal live situation. The immediate first aid actions undertaken immediately after accident, results in lowering possibility of live danger and speeding recovery time.

Poland as a country started implementing first aid training for society between 40' and 50' of XX centaury. This action improved knowledge of performing first aid help by coaches, players and paramedics, and increased overall knowledge about first aid, and also about human physiology.

Main rules in first aid actions during sport injuries were:

- Careful and skilful preparation of injured athlete to receive first aid help, without shaking, pulling or setting injured place. This also included estimate of the level of injury and planning of recommended recovery action.
- Securing an injured athlete in secure place
- Performing the first aid action
- If the injury is serious or life threatening, the next step involved organization of transport to place with specialist medical equipment and staff (hospital or field hospital)



Picture 1. Blood pressure control before boxing fight, "Sportowiec", 1951 no 2, p.6.

During sport competition paramedics were involved in the following types of injuries: Scarps, Cuts, Bruises and contusions, Wrings, Sprains, Bones fractures, Pulled muscle, Torn muscle After II World War, organization of first aid during sport competition was poor (inadequate) because shortage of paramedics, nurses, doctors. There was also lack of professional medical equipment that could help with recovery. This state resulted in many situations with increased risk of serious injury or even death of the athlete.

In 1949 during sport competition first aid help protocol and procedures were implemented by:

- professional paramedics
- first aid station
- transport for heavy injured athlete
- emergency equipment (first aid kit etc.)

Organizers of sport tournaments showed that the presence of the qualified doctor is not needed at all times during the tournament. In small local competition or in sports with small risk of serious injury (etc. volleyball) first aiders could be nurse or person with first aid course.

In all cases organization of transport was mandatory due to a risk of occurring heavy injuries. Other task which they had to fulfil was to inform the nearest hospital about date, time and type of tournament to let them know about possibility of the need to transport injured people and let them prepare for it ahead of time. [*Lekarz przyjacielem sportowca. Jak organizować pomoc doraźną na zawodach sportowych, "Sportowiec*", 1949 no 3, p. 15]

The person performing first aid help (nurse or paramedic) had to secure injured athlete, and in case of heavy or life threatening injuries inform the nearest hospital or doctor and organize transportation.

The organizers of bigger sports events were obligated to prepare a special room for medical staff. The room supposed to be marked with red cross on the door, and contain special medical equipment. If the organizers were not able to secure a special dedicated room, they were obligated to prepare fully equipped field hospital able to serve the anticipated number of injured people.

The first aid help protocol required the following equipment:

- a) Dressing equipment:
 - \circ 6 bandages
 - 3 sterile gauzes
 - 25,0 g of cotton wool
 - \circ 50 g of lignin
 - 1 roll of adhesive plaster
 - 5 field dressings
 - 1 triangular bandage
 - Splint for broken limb
 - 1 rubbery tube (tourniquet), in case of haemorrhage
 - 10 eyes (safety pins)
- b) Disinfectants:
 - \circ 50 g of spirit
 - \circ 50 g of denaturant
 - \circ 20 g of iodine (bottle with glass cork)
 - Sulfanilamide powder

Before using disinfectants it was recommended to cut (by surgery) edges of wound and close it before 8 hours of surgery.

Painkillers:

- 20 headache pills

First aid kits was without stomach drops

a) cardiac drops (glycoside) and revive drops:

- Valeric drops (in glass bottle with glass cork)
- 10g of Cardiamid
- 10 g Tonicardiac (Koramina)
- Ammonia (in glass bottle)
- b) Other equipment:
 - Tweezers
 - Scissors
 - Mug and tumbler
 - Water bottle [Dr J. Miller: *Apteczka sportowa*, *"Sportowiec"*, 1949, no 4, p. 14]

First aid kits with standardised content were created and distributed by Polish Red Cross. Before every event, the paramedics were responsible to check the content of the first aid kits and to review the condition of the medical equipment that were included in it. The paramedics were also responsible to review if they have enough personnel on duty.



Picture 2. Example of first aid action (small injury) on Łazarczyk- representative polish cycling team, "Wyścig pokoju" in 1951, "Sportowiec", 1951 no 8, p.8.

Development of first aid help kits, protocols and procedures had great positive influence on safety level of the athletes and spectators during sport events. The first aid kits become essential part of equipment in all Polish sports halls and during even local tournaments.

REFERENCES

- 1. Dr Miller J.: Apteczka sportowa, "Sportowiec", 1949, no 4, p. 14,
- 2. Lekarz przyjacielem sportowca. Jak organizować pomoc doraźną na zawodach sportowych, "Sportowiec", 1949 no 3, p. 15