

Article

Ramey, L., Hayano, T., Blatz, D., et al. (2020). A comparison of self-reported unmet healthcare needs among adaptive and able-bodied athletes. *PM&R*, 12(1), 36-42.
<https://dx.doi.org/10.1002/pmrj.12202>.

Adaptive Sports/Recreation Topic Categories

- Healthcare Access Specific to Adaptive Sports Medicine.
- Musculoskeletal Injuries.

Research Question

- What are the differences in healthcare access, satisfaction, and unmet needs between recreational adaptive and able-bodied athletes in all sports and within a single sport (hockey)?

Methodology

- Participants were ≥ 18 years old enrolled in a recreational sports program (adaptive and able-bodied) in Chicago, IL or Boston, MA and had participated in the recreational sports program within the past 12 years.
- They were excluded if they did not participate at a competitive level or if they classified themselves as “elite” athletes.
- Cross-sectional, survey-based study.
- All participants completed an anonymous survey that included demographic information, the Short-Form Patient Satisfaction Questionnaire (PSQ-18), and a set of de novo questions to assess unmet healthcare needs.
- Primary outcome measures: PSQ-18 accessibility and general satisfaction subscores.
- Secondary outcome measure: Percentage of each group answering yes to the following question: “Was there a time in the past 1 year when you needed to see a doctor for a sports-related issue but did not?”

Results

- Sixty adaptive athletes and 65 able-bodied athletes participated in the study, with no significant difference in the PSQ-18 subscore for accessibility, overall satisfaction, or any other domain in the PSQ-18 between adaptive and able-bodied athletes.
- Unmet healthcare needs were more commonly reported among adaptive athletes as compared to able-bodied athletes, and this reached statistical significance in the hockey group.
- Among adaptive athletes, the majority of unmet healthcare conditions were “physical injury due to overuse”, whereas “physical injury due to trauma” and “general medical issue” were less common. Most injuries involved the spine and the arm, whereas leg and head injuries were rarer.
- Among able-bodied athletes, there was an equal distribution of reports of “physical injury due to trauma” and “physical injury due to overuse”, and no reports of “general medical issues”. Injuries were equally distributed between the arms and legs, no head or spine involvement.

Discussion/Conclusion

- This study highlights a potential discrepancy in healthcare expectations and healthcare seeking behaviors between adaptive athletes and able-bodied athletes.

- Adaptive athletes may benefit from additional healthcare education and support to improve healthcare expectations and promote medical evaluation of sports-related injuries.

Article Strengths

- First published study to compare unmet healthcare needs, access, and satisfaction between adaptive and able-bodied athletes.

Article Weaknesses

- Potential for recall bias and response bias to the survey
- Survey not able to match participants for potential confounding variables, such as age, gender, comorbidities, sport type, and level of participation, and only able to compare adaptive and able-bodied athletes in hockey and not within other sports. The generalizability of this study is limited since structure of support for adaptive athletes' healthcare needs vary by geographic region.

Take Home Messages

- There is a potential discrepancy in healthcare expectations and healthcare seeking behaviors among adaptive athletes vs able-bodied athletes.
- Adaptive athletes may benefit from additional healthcare education and support to improve healthcare expectations and promote medical evaluation of sports-related injuries.