#### SPECIAL CONSIDERATIONS IN SPECIFIC ATHLETIC GROUPINGS

The Senior Athlete Presented by Anne Sorrentino D.C., DACBSP®



**DEFINITION: SPECIAL POPULATIONS** 

 Special populations, by definition, require more health care services and/or specialized health care services than other people.

 ...The greater need for health care services among these populations is generally more costly to the system (especially if care is not managed appropriately.)

# SPECIAL POPULATIONS CONSIDERED IN SPORT

- The Pediatric/Adolescent athlete
- The Female athlete
- The Geriatric athlete (renamed Senior Athlete {by me})
- The Differently Abled athlete
- Special Disease States in Sport
- Special Considerations in Ultra-Sports

#### **CCSP® PROGRAM GUIDELINES**

The Geriatric (Senior) Athlete a. Psychology and motivation b. Exercise and aging c. Underlying systemic disease d. Exercise prescriptions - PARQ



#### SENIOR ATHLETE - INTRO

- Geriatric refers to medical care for older adults
- Age group not easily defined
- "Older" preferred over "elderly;" both are equally imprecise
- International articles refer to the "Ageing" athlete
- > 65 age often used, most people do not need geriatric expertise until age 70, 75, or even 80
- Mean age of those > 65 is now a little more than 75; proportion of those > 85 predicted to increase most rapidly
- AARP starts sending you invitations to join at age 50

## SENIOR ATHLETE - INTRO

According to the United Nations:

- Global population aged 60 years or over, approx. I bln/7 bln
- 1980, was only 382 mln
- 2050 expected to be 2.1 bln
- 2011: the number of people aged 65 years and older 11.2% total pop
- 2050: expected to be 22% total pop
- 1914: girl born in England had 1% chance of living to 100 y/o
- 2020: child born in the west more than 50% chance of living to >105y/o

https://sporttomorrow.com/10-super-trends-in-sports-participation-elderly/

### SENIOR ATHLETE – PSYCHOLOGY AND MOTIVATION – PARTICIPATION

- Prevalence higher for men than women
- Declines with age
- Increases with education and income
- Lower for those widowed



• White non-Hispanic & Asian/Pacific Islanders more likely than black non-Hispanic

#### SENIOR ATHLETE – PSYCHOLOGY AND MOTIVATION -BARRIERS

Ageism 3<sup>rd</sup> greatest prejudice – 1969 - Butler

- <u>Ageism:</u> practice of making unsubstantiated judgments and perceptions about a person's cognitive, physiological and social skills based solely on chronological age
- Still rampant in health care
- Clinical decisions not based on health status, but age

#### SENIOR ATHLETE – PSYCHOLOGY AND MOTIVATION -BARRIERS

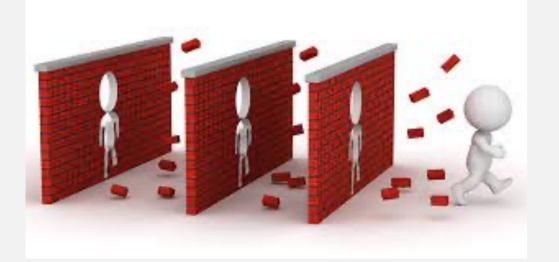
- Cost
- Physical limitations
- Lack of motivation
- Older patients have lower expectations of their own health status - believe they are unable to play

**Conservative Management of Sports Injuries** 

#### SENIOR ATHLETE – PSYCHOLOGY AND MOTIVATION -BARRIERS

Lack of motivation – 4 levers to facilitate change

- I. What a person thinks is true
- 2. What a person thinks is good
- 3. How a person does things
- 4. The person's talents and abilities



**Conservative Management of Sports Injuries** 

#### SENIOR ATHLETE – PSYCHOLOGY AND MOTIVATION -SUCCESS

Athlete must perceive a benefit

• Qualitative or quantitative

Monitoring changes in measurable health indicators

- Ex: BP, DEXA, BMI, glucose
- Balance Tests
- Keep diary to see progress



**Conservative Management of Sports Injuries** 

## SENIOR ATHLETE - EXERCISE AND AGING

 Approx 10% older adults participate in regular physical activity for > 30 minutes 5 times/week (a common recommendation)

• Approx 35 to 45% participate in minimal activity

• Older adults tend to be less active than other age groups for many reasons, most commonly because disorders limit their physical activity

### SENIOR ATHLETES – EXERCISE AND AGING

- Physically active throughout life: elite or masters level athlete
  - Care focuses on sprain/strain injuries

Weekend warriors: occasional athlete
 Requires more supervision

Those starting to engage in physical activity to halt declines
 More a function of physical disuse and atrophy

#### SENIOR ATHLETE – EXERCISE AND AGING BENEFITS OF PHYSICAL ACTIVITY FAR EXCEED RISKS

- Declines in loss of skeletal muscle strength, aerobic capacity, and bone density, contributing to greater mobility and independence
  Aerobic exercise specifically a blood pressure lowering strategy
  Aerobic endurance training lowers BP and alters plasma lipoprotein profiles
- Reduced risk of obesity
- Reduced mortality rates, even for smokers and the obese

### SENIOR ATHLETE – EXERCISE AND AGING BENEFITS OF PHYSICAL ACTIVITY FAR EXCEED RISKS

 Prevention and treatment of cardiovascular disorders (including rehabilitation after myocardial infarction), diabetes, osteoporosis, colon cancer, and psychiatric disorders (especially mood disorders)

• **Prevention of falls** and fall-related injuries by improving muscle strength, balance, coordination, joint function, and endurance

#### SENIOR ATHLETE – EXERCISE AND AGING BENEFITS OF PHYSICAL ACTIVITY FAR EXCEED RISKS

- Improved functional ability
- Opportunities for social interaction
- Enhanced sense of well-being
- Possibly improved sleep quality



 Physical activity is one of the few interventions able to restore physiologic capacity after it has been lost

#### SENIOR ATHLETE – UNDERLYING SYSTEMIC DISEASE

• Effects of aging must be considered during diagnosis and treatment of older adults

• Do NOT mistake pure aging for disease (e.g., slow information retrieval is not dementia)

• Do NOT mistake disease for pure aging (e.g., ascribe debilitating arthritis, tremor, or dementia to old age)

### SENIOR ATHLETE - UNDERLYING SYSTEMIC DISEASE CONCERNS

 Do NOT ignore the increased risk of adverse drug effects on weak-link systems stressed by illness

• Do NOT forget older adults often have multiple underlying disorders (e.g., hypertension, diabetes, atherosclerosis) accelerating the potential for harm

• Comorbidities incl CVD, Metabolic, Hyperlipidemia, Immunologic/Hematologic

https://www.merckmanuals.com/professional/geriatrics/approach-to-the-geriatric-patient/introduction-to-geriatrics Athletic Training and Sports Medicine

### SENIOR ATHLETE - UNDERLYING SYSTEMIC DISEASE

Problems associated with aging:

- Obesity
- Cardiovascular disease
- Respiratory changes
- Neurological decline
- Neuropsychiatric changes
- Gastrointestinal and genitourinary changes
- Musculoskeletal changes

Special Circumstances:

- Recovering stroke
- Cancer
- Osteoporosis

### SENIOR ATHLETE - UNDERLYING SYSTEMIC DISEASE

 Chronic disorders may need a complete medical examination before starting an activity

 Some experts recommend an exercise stress test, for patients who have ≥ 2 cardiac risk factors (e.g., hypertension, obesity) and who plan on starting an activity more strenuous than walking

#### SENIOR ATHLETE – EXERCISE PRESCRIPTIONS

 Older patients/athletes starting an exercise program <u>should be screened</u> to identify chronic disorders and determine appropriate activities

• Physical activity is inappropriate for only a few older people (e.g., those with unstable medical conditions)

#### SENIOR ATHLETE – EXERCISE PRESCRIPTIONS

 Anyone can begin brief periods of walking, increased to 30 minutes 5 times a week

• No screen needed for this unless balance issues



A seven-question health screen for identifying pre-existing health conditions

#### Aims to cover Seven aspects of fitness:

- Aerobic capacity
- Anaerobic capacity
- Cardiorespiratory endurance
- Strength
- Flexibility
- Neuromuscular function
- Functional performance

PAR-Q+

Designed for ages 15-69

Purpose to determine if athlete/exerciser-to-be should have a complete medical evaluation before participating in vigorous or strenuous exercise

Entirely subjective

Can identify pre-existing medical conditions that might be aggravated by an increase in physical activity - specifically consistent exercise

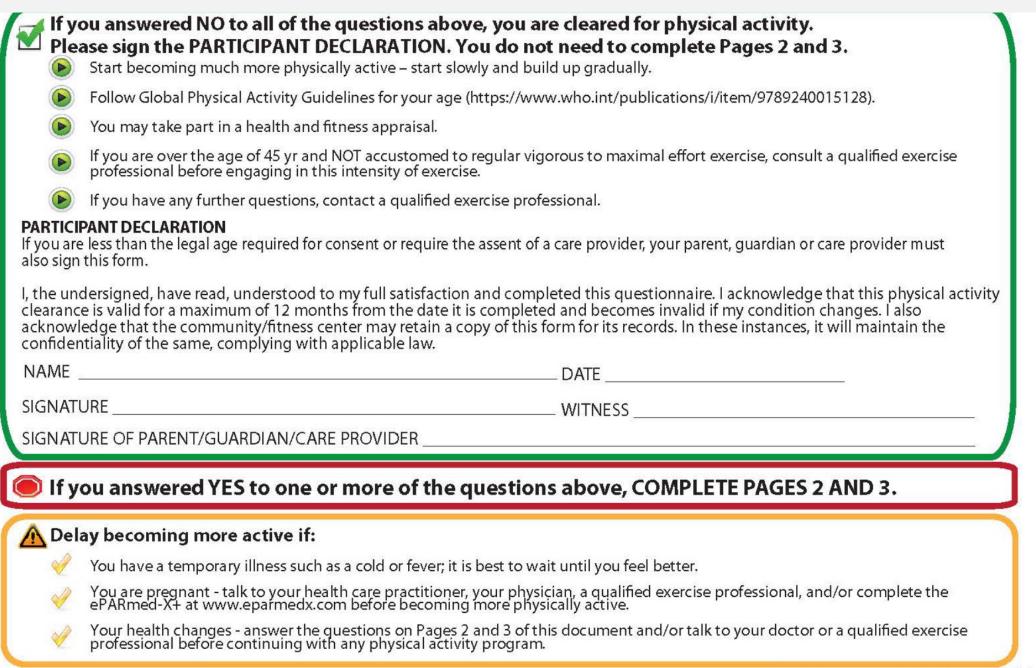
Athletic Training and Sports Medicine

#### The Physical Activity Readiness Questionnaire for Everyone

The health benefits of regular physical activity are clear; more people should engage in physical activity every day of the week. Participating in physical activity is very safe for MOST people. This questionnaire will tell you whether it is necessary for you to seek further advice from your doctor OR a qualified exercise professional before becoming more physically active.

#### **GENERAL HEALTH QUESTIONS**

Please read the 7 questions below carefully and answer each one honestly: check YES or NO.	YES	NO
1) Has your doctor ever said that you have a heart condition <b>OR</b> high blood pressure <b>?</b>		
2) Do you feel pain in your chest at rest, during your daily activities of living, OR when you do physical activity?		
3) Do you lose balance because of dizziness OR have you lost consciousness in the last 12 months? Please answer NO if your dizziness was associated with over-breathing (including during vigorous exercise).		
4) Have you ever been diagnosed with another chronic medical condition (other than heart disease or high blood pressure)? <b>PLEASE LIST CONDITION(S) HERE:</b>		
5) Are you currently taking prescribed medications for a chronic medical condition? PLEASE LIST CONDITION(S) AND MEDICATIONS HERE:		
6) Do you currently have (or have had within the past 12 months) a bone, joint, or soft tissue (muscle, ligament, or tendon) problem that could be made worse by becoming more physically active? Please answer NO if you had a problem in the past, but it does not limit your current ability to be physically active. PLEASE LIST CONDITION(S) HERE:		D
7) Has your doctor ever said that you should only do medically supervised physical activity?		



• The PARQ+ has follow up questions to those initial 7 questions

 Bottom line is if there are questions an athlete answers yes, send for full evaluation

• It's become SOOO complicated...dang!

• I just wanted to go for a hike with my friends...



Sorrentino 2022



1.	Do you have Arthritis, Osteoporosis, or Back Problems?	
	If the above condition(s) is/are present, answer questions 1a-1c If <b>NO</b> go to question 2	
1a.	Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer <b>NO</b> if you are not currently taking medications or other treatments)	
1b.	Do you have joint problems causing pain, a recent fracture or fracture caused by osteoporosis or cancer, displaced vertebra (e.g., spondylolisthesis), and/or spondylolysis/pars defect (a crack in the bony ring on the back of the spinal column)?	
1c.	Have you had steroid injections or taken steroid tablets regularly for more than 3 months?	
2. Do you currently have Cancer of any kind?		
	If the above condition(s) is/are present, answer questions 2a-2b If <b>NO</b> go to question 3	
2a.	. Does your cancer diagnosis include any of the following types: lung/bronchogenic, multiple myeloma (cancer of plasma cells), head, and/or neck?	
2b.	Are you currently receiving cancer therapy (such as chemotheraphy or radiotherapy)?	
3.	Do you have a Heart or Cardiovascular Condition? This includes Coronary Artery Disease, Heart Failure, Diagnosed Abnormality of Heart Rhythm	
	If the above condition(s) is/are present, answer questions 3a-3d If <b>NO</b> go to question 4	
3a.	Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer <b>NO</b> if you are not currently taking medications or other treatments)	
3b.	Do you have an irregular heart beat that requires medical management? (e.g., atrial fibrillation, premature ventricular contraction)	
3с.	Do you have chronic heart failure?	YES NO

4.	Do you currently have High Blood Pressure?	
	If the above condition(s) is/are present, answer questions 4a-4b If <b>NO</b> go to question 5	
4a.	Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer <b>NO</b> if you are not currently taking medications or other treatments)	
4b.	Do you have a resting blood pressure equal to or greater than 160/90 mmHg with or without medication? (Answer <b>YES</b> if you do not know your resting blood pressure)	
5.	Do you have any Metabolic Conditions? This includes Type 1 Diabetes, Type 2 Diabetes, Pre-Diabetes	
	If the above condition(s) is/are present, answer questions 5a-5e If <b>NO</b> go to question 6	
5a.	Do you often have difficulty controlling your blood sugar levels with foods, medications, or other physician- prescribed therapies?	
5b.	Do you often suffer from signs and symptoms of low blood sugar (hypoglycemia) following exercise and/or during activities of daily living? Signs of hypoglycemia may include shakiness, nervousness, unusual irritability, <b>YES</b> abnormal sweating, dizziness or light-headedness, mental confusion, difficulty speaking, weakness, or sleepiness.	
5c.	Do you have any signs or symptoms of diabetes complications such as heart or vascular disease and/or complications affecting your eyes, kidneys, <b>OR</b> the sensation in your toes and feet?	
5d.	Do you have other metabolic conditions (such as current pregnancy-related diabetes, chronic kidney disease, or liver problems)?	
5e.	Are you planning to engage in what for you is unusually high (or vigorous) intensity exercise in the near future?	

6. Do you have any Mental Health Problems or Learning Difficulties? This includes Alzheimer's, Dementia, Depression, Anxiety Disorder, Eating Disorder, Psychotic Disorder, Intellectual Disability, Down Syndrome

If the above condition(s) is/are present, answer questions 6a-6b

6a. Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? YES NO (Answer NO if you are not currently taking medications or other treatments)

6b. Do you have Down Syndrome AND back problems affecting nerves or muscles?

**7. Do you have a Respiratory Disease?** This includes Chronic Obstructive Pulmonary Disease, Asthma, Pulmonary High Blood Pressure

If the above condition(s) is/are present, answer questions 7a-7d

If **NO** go to question 8

If **NO** go to question 7

- 7a. Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? YES NO (Answer NO if you are not currently taking medications or other treatments)
- 7b. Has your doctor ever said your blood oxygen level is low at rest or during exercise and/or that you require supplemental oxygen therapy?
- 7c. If asthmatic, do you currently have symptoms of chest tightness, wheezing, laboured breathing, consistent cough (more than 2 days/week), or have you used your rescue medication more than twice in the last week?

7d. Has your doctor ever said you have high blood pressure in the blood vessels of your lungs? YES NO

8. Do you have a Spinal Cord Injury? This includes Tetraplegia and Paraplegia If the above condition(s) is/are present, answer questions 8a-8c If NO

go to question 9

(Answer NO if you are not currently taking medications or other treatments)	3a.	Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer <b>NO</b> if you are not currently taking medications or other treatments)	YES N
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8b. Do you commonly exhibit low resting blood pressure significant enough to cause dizziness, light-headedness, and/or fainting?

8c. Has your physician indicated that you exhibit sudden bouts of high blood pressure (known as Autonomic YES NO

9.	Have you had a Stroke? This includes Transient Ischemic Attack (TIA) or Cerebrovascular Event If the above condition(s) is/are present, answer questions 9a-9c If NO go to question 10		
9a.	Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer <b>NO</b> if you are not currently taking medications or other treatments)	YES 🗌	
9b.	Do you have any impairment in walking or mobility?		
9c.	Have you experienced a stroke or impairment in nerves or muscles in the past 6 months?		NO
10.	Do you have any other medical condition not listed above or do you have two or more medical co	ondition	s?
	If you have other medical conditions, answer questions 10a-10c If <b>NO</b> read the Page 4 re	ecomme	ndations
10a.	Have you experienced a blackout, fainted, or lost consciousness as a result of a head injury within the last 12 months <b>OR</b> have you had a diagnosed concussion within the last 12 months?		
10b.	Do you have a medical condition that is not listed (such as epilepsy, neurological conditions, kidney problems)?		NO
10c.	Do you currently live with two or more medical conditions?		
	PLEASE LIST YOUR MEDICAL CONDITION(S) AND ANY RELATED MEDICATIONS HERE:		

## GO to Page 4 for recommendations about your current medical condition(s) and sign the PARTICIPANT DECLARATION.

#### If you answered NO to all of the FOLLOW-UP questions (pgs. 2-3) about your medical condition, you are ready to become more physically active - sign the PARTICIPANT DECLARATION below:

- It is advised that you consult a qualified exercise professional to help you develop a safe and effective physical activity plan to meet your health needs.
- You are encouraged to start slowly and build up gradually 20 to 60 minutes of low to moderate intensity exercise, 3-5 days per week including aerobic and muscle strengthening exercises.
- As you progress, you should aim to accumulate 150 minutes or more of moderate intensity physical activity per week.
- If you are over the age of 45 yr and **NOT** accustomed to regular vigorous to maximal effort exercise, consult a qualified exercise professional before engaging in this intensity of exercise.

#### If you answered YES to one or more of the follow-up questions about your medical condition:

You should seek further information before becoming more physically active or engaging in a fitness appraisal. You should complete the specially designed online screening and exercise recommendations program - the **ePARmed-X+ at www.eparmedx.com** and/or visit a qualified exercise professional to work through the ePARmed-X+ and for further information.

#### \Lambda Delay becoming more active if:

- You have a temporary illness such as a cold or fever; it is best to wait until you feel better.
- You are pregnant talk to your health care practitioner, your physician, a qualified exercise professional, and/or complete the ePARmed-X+ **at www.eparmedx.com** before becoming more physically active.
- Your health changes talk to your doctor or qualified exercise professional before continuing with any physical activity program.

You are encouraged to photocopy the PAR-Q+. You must use the entire questionnaire and NO changes are permitted.
 The authors, the PAR-Q+ Collaboration, partner organizations, and their agents assume no liability for persons who undertake physical activity and/or make use of the PAR-Q+ or ePARmed-X+. If in doubt after completing the questionnaire, consult your doctor prior to physical activity.

#### PARTICIPANT DECLARATION

All persons who have completed the PAR-Q+ please read and sign the declaration below.

If you are less than the legal age required for consent or require the assent of a care provider, your parent, guardian or care provider must also sign this form.

I, the undersigned, have read, understood to my full satisfaction and completed this questionnaire. I acknowledge that this physical activity clearance is valid for a maximum of 12 months from the date it is completed and becomes invalid if my condition changes. I also acknowledge that the community/fitness center may retain a copy of this form for records. In these instances, it will maintain the confidentiality of the same, complying with applicable law.

NAME	DATE
SIGNATURE	WITNESS
SIGNATURE OF PARENT/GUARDIAN/CARE PROVIDER	
For more information, please contact  www.eparmedx.com  Email: eparmedx@gmail.com  Citation for PAR-Q+  Warburton DER, Jamnik VK, Bredin SSD, and Gledhill N on behalf of the PAR-Q+ Collaboration.  The Physical Activity Readiness Questionnaire for Everyone (PAR-Q+) and Electronic Physical Activity  Readiness Medical Examination (ePARmed-X+). Health & Fitness Journal of Canada 4(2):3-23, 2011.  Key References	The PAR-Q+ was created using the evidence-based AGREE process (1) by the PAR-Q+ Collaboration chaired by Dr. Darren E. R. Warburton with Dr. Norman Gledhill, Dr. Veronica Jamnik, and Dr. Donald C. McKenzie (2). Production of this document has been made possible through financial contributions from the Public Health Agency of Canada and the BC Ministry of Health Services. The views expressed herein do not necessarily represent the views of the Public Health Agency of Canada or the BC Ministry of Health Services.
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36(S1):S266-s298, 2011.	

3. Chisholm DM, Collis ML, Kulak LL, Davenport W, and Gruber N. Physical activity readiness. British Columbia Medical Journal. 1975;17:375-378.

4. Thomas S, Reading J, and Shephard RJ. Revision of the Physical Activity Readiness Questionnaire (PAR-Q). Canadian Journal of Sport Science 1992;17:4 338-345.

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### SENIOR ATHLETE – EXERCISE PROGRAMS

- Exercise programs more strenuous than walking should include combination of 4 types of exercise:
  - I. Endurance
  - 2. Muscle strengthening
  - 3. Balance training (e.g., Tai chi)
  - 4. Flexibility
- Combination of exercises recommended depends on the patient's medical condition and fitness level



#### SENIOR ATHLETE – EXERCISE PROGRAMS

Stillwater, Oklahoma Medical Center, 5<sup>th</sup> Floor Joint Replacement Center

Beginning exercises after knee replacement Note\* performed every hour Can always do something to start moving!



## SENIOR ATHLETE – EXERCISE PROGRAMS

 Seated exercise programs using cuff weights for strength training and repeated movements for endurance training may be useful for patients who have difficulty standing and walking

 Aquatics exercise program may be suggested for patients with arthritis



## SENIOR ATHLETE – EXERCISE PROGRAMS

 Patients should select activities they enjoy but be encouraged to include all 4 types of exercise

• Endurance exercises (e.g., walking, cycling, dancing, swimming, lowimpact aerobics) have well-documented health benefits for older adults.

https://www.merckmanuals.com/professional/geriatrics/approach-to-the-geriatric-patient/introduction-to-geriatrics

# SENIOR ATHLETE – BASIC EXERCISE GUIDELINES

- Mode: Aquatics, chair-based resistance, cycle, basic or beginner yoga
- Frequency: 3-5 days/week moderate, 3 days vigorous
- Intensity: 40-85% peak VO2
- Duration: 30-60 min/day or 8-10 min bouts

# SENIOR ATHLETE – BASIC EXERCISE GUIDELINES

- Special Considerations: Progress slowly, monitor well
- Progress towards free sitting (no support) or standing
- Breathe normally, avoid holding breath & Valsalva
- Use slow, rhythmic active or dynamic stretches if static or SMR not tolerated



# SENIOR ATHLETE - TRENDS

Present and future trends for senior athlete sports participation:

- Wish for a longer life and healthier lifestyle
- Health insurance companies will start to incentivize sports participation as this will reduce the general health bill
- Older women increasingly becoming active in sports
- Need for social cohesion
- Generational impact Gen X, which will start aging to 60y/o
  - were raised with sports and exercise
  - like their sports and realise its importance https://sporttomorrow.com/10-super-trends-in-sports-participation-elderly/

## SENIOR ATHLETE – TRENDS TO EMERGE

I.An increase in number of products specifically made for elderly

2. Health insurance companies and governments likely to stimulate sports participation of elderly

3. Technology will play a bigger role

- modern senior citizen will be much more tech savvy
- E-health and sports participation will go hand in hand
- Expect wearables, sensors (also in smart textiles), voice technology and easy apps specifically made for seniors tracking both health and fitness parameters

https://sporttomorrow.com/10-super-trends-in-sports-participation-elderly/

## SENIOR ATHLETE – TRENDS TO EMERGE

4. Artificial Intelligence will start to play a bigger role in the future

- Wearables and sensors will collect a wide variety of data
- Algorithms will determine tailor-made programs for seniors
- 5. Sports- and fitness clubs and federations will increasingly target senior citizens

6. Expect senior playgrounds, places made specifically for the older generation

7. Individual sports golf, fitness, cycling, walking, cross country, yoga, pilates, will continue in popularity

https://sporttomorrow.com/10-super-trends-in-sports-participation-elderly/

## SENIOR ATHLETE – TRENDS TO EMERGE

8. Expect several team sports to become more popular, but adjusted to this specific age group.

- good example is Walking Football

9. More senior games and senior world championships likely to be organized

10. New senior social platforms will emerge providing specific information and education related to health and sports for senior citizens with a healthy lifestyle

#### FOOTBALL GUEENSLAND WALKING FOOTBALL FOOTBALL

ANBEIM

TA

#### SENIOR ATHLETE – INTERNATIONAL SENIOR\* SPORTS COMPETITIONS

#### World Masters Games

- an international multi-sport event held every four years
- has developed into the largest of its kind
- open to sports people of all abilities
- minimum age criterion ranges between 25-35 y/o depending on sport
- anyone can participate if over the age of 35
- participants compete for themselves -- no country delegations
- no competition qualification requirements.

https://www.oss.scot/wp-content/uploads/2020/05/Sports-Participation-and-Ageing-Paper.pdf

## SENIOR ATHLETE - INTERNATIONAL SENIOR SPORTS COMPETITIONS

#### The Huntsman World Senior Games

- began in 1987 as the World Senior Games, an international senior sports competition.
- began with vision of an international sports event for men and women ages 55 and better
- founders decided the golden years were better when good health and physical fitness became a way of life, not an occasional hobby
- age reduced to 50 in second year to increase participation

#### SENIOR ATHLETE - INTERNATIONAL SENIOR SPORTS COMPETITIONS

#### The Huntsman World Senior Games

- largest annual multi-sport event in the world for athletes aged 50 and over
- includes over 30 different sports
- has taken place for two weeks each October in St. George, Utah, USA for over 30 years

#### SENIOR ATHLETE - INTERNATIONAL SENIOR SPORTS COMPETITIONS

- Is there an International Senior Olympics?
- Today the meet is known as the Senior Games (or Senior Olympics)
- The Senior Games are **now held in every state in the USA**.

- Perhaps an International Senior Games will be the next trend?
- And the next event for us to work through FICS?