

Senate Committee on Aging
Lessons from the Field: How Sports Medicine Can Improve Health Outcomes for Seniors
SD-G50
6/25/25
3:30pm

Dr. E. Lyle Cain, Jr. Testimony

Thank you Chairman Scott, Ranking Member Gillibrand and members of the committee for inviting me to testify in the hearing today.

My name is Lyle Cain. I am the Managing Partner and Orthopaedic Surgeon at the Andrews Sports Medicine and Orthopaedic Center in Birmingham, Alabama. I have been a Team Physician for several high school, college, and professional teams, including the University of Alabama Crimson Tide, for over 25 years. ROLL TIDE! I firmly believe that the lessons learned while providing care for athletes at All Ages, especially in the field of injury prevention and management, can help improve the HealthSpan of our aging population.

As you know, the combination of increased lifespan and demographics of the “Baby Boomer” generation have led to a dramatic shift in the number of senior adults in the United States with nearly 20% of our population now 65 years and older. This has tremendous consequences for our HealthCare system, both with increased utilization and increased costs. A true “Team approach” to the individual, using the Sports Medicine system as a model, can help our senior population maintain a better quality of life as they age.

What is a “Team Physician”? The American Orthopaedic Society for Sports Medicine (AOSSM) defines a Team physician as someone who provides comprehensive health services for the care of athletes and active people at all ages. The Team Physician is ultimately responsible for the health, safety, and performance of our athletes. Our duties include injury prevention and risk reduction, acute injury evaluation and management (both during competition and training), chronic condition and illness treatment, coordination of care between providers and performance optimization. In sports medicine, we also attempt to prevent injury by encouraging rules changes and development of protective gear for each sport. We accomplish these duties through the work of a large Team of Providers, and as I will outline, sports medicine is truly a “Team Effort”. The modern Sports medicine Team includes Certified Athletic Trainers (who are generally the primary point of contact for the athlete), Physical Therapists, Dietitians, Primary Care Physicians, Orthopedic surgeons, Psychologists, Chiropractors, Sports Performance Specialists, Certified strength and conditioning coaches, and many others.

Our relationship with the athlete generally begins when we perform a pre-participation physical examination to assess their health and physical readiness to play. This is a crucial step and allows the physician and athletic trainer to identify issues that may predispose the athlete to future injury. We obtain a health history, do a thorough examination, and often perform additional testing (such as cardiac testing with echocardiogram) to develop an individual risk profile for each athlete. In the

aging population, the annual examination with your primary care physician can provide this level of risk assessment; but the reality is that issues that put the senior adult at significant risk, such as balance loss, muscle loss (sarcopenia), cardiovascular fitness and endurance, and fall risk are generally not evaluated. Employing athletic trainers, physical therapists and other health care personnel to assist in annual risk assessment could likely prevent future falls and the associated health compromise in the older population. In my own family's experience, my wife's 90 year-old father has seen tremendous results and better balance by participating in a local fall prevention program provided by physical therapists.

Why is fall prevention so important? Falls are the #1 cause of injury-related death in adults over 65. Up to 30% of adults die within one year of a hip fracture sustained from a fall, and many patients that survive past the first year never regain independence, requiring expensive care from rehabilitation or long-term care facilities. It is estimated that falls alone add \$50 billion annually to the US healthcare system costs. The old orthopedic adage wisely states "we are brought into this world through the brim of the pelvis, and often leave through a fracture of the neck of the femur", emphasizing the risk of mortality from hip fractures in the older patient. Many of these falls are preventable with risk assessment, regular physical activity including resistance training and fall prevention programs.

How do we implement this program? It definitely takes a Team. The medical team should be empowered to treat the aging patient with individual risk evaluation, medical optimization, fitness and performance improvement just like we treat our athletes. Primary care physicians are often the healthcare "gate keeper", so we must train these doctors in musculoskeletal medicine. The American Sports Medicine Institute, and many programs like it, train primary care physicians in non-surgical care of the active person, but this requires an extra year of post-graduate training. Certified athletic trainers are a valuable part of the team, but we are seeing a critical shortage of young people entering the field due to the time commitment in training (now requiring a Masters level degree), long work hours, and relatively low pay. Physical therapy visits are generally limited by insurance plans, and many do not include fall prevention coverage. We must continue to advance programs that educate the aging population on the benefits of exercise, muscle mass improvement, and fall prevention. NIH funding is also critical, especially in my home State of Alabama. In fact, just two weeks ago, the American College of Sports Medicine (ACSM) Exercise is Medicine program launched the Active Aging Initiative for Older Adults with a mission to integrate physical activity into routine healthcare by enhancing collaboration between healthcare providers and exercise professionals and expanding access to evidence-based exercise opportunities. Wearable Technology, such as fitness trackers and Apple watches, can provide feedback concerning individual performance progress and gains.

In closing, we give our athletes the best care possible to prevent injury and optimize performance. We should do the same for our senior citizens.