

Fédération Aéronautique Internationale

MEDICO-PHYSIOLOGICAL COMMISSION [COMMISSION INTERNATIONALE MEDICO-PHYSIOLOGIQUE - CIMP]

Minutes of the FAI CIMP meeting held in the Army House, Prague, Czech Republic 03 - 04 June 2000

The meeting was chaired by the President Dr. René Maire

Agenda Item 01 welcoming address.

The President welcomed Dr. Valentukevicius from the Republic of Lithuania who was attending for the first time. He then thanked Dr. Truska for the organisation preceding the meeting and for the efficient and comfortable welcome made for those delegates attending. Facilities included the availability of Power Point projection. The meeting papers had contained a letter of welcome from the President of the Aero Club of the Czech Republic.

Agenda Item 02, Roll Call of delegates.

The delegates and others attending were:

Dr. Bernard Schober Austria
Dr. Phivos Christofides Cyprus

Dr. Oldrich Truska Czech Republic Dr. Milos Sokol Czech Republic

Dr. Eero Vapaavouri Finland
Prof. Antonio Dal Monte Italy
Dr. Virgilijus Valentukevicius Lithuania
Dr. Peter Quispel Netherlands
Dr. Janusz Marek Poland
Dr Gregory Marek Poland

Dr. Peter Daxner Slovak Republic

Dr. Vlasta Kunaver Slovenia

Dr. Pedro Ortiz Garcia Spain [Vice President]
Dr. René Maire Switzerland [President]
Dr. Peter Saundby United Kingdom [Secretary]
Mr. Max Bishop General Secretary FAI

Agenda Item 03, Apologies.

Dr. John Grubbström CIA Representative, Alternate delegate for Sweden

Dr. Thierry Villey France
Dr. Ernst Hollmann Germany

Dr. Colm Killeen Ireland [President of Honour]

Dr. Vadim Bogachev Russia

Dr. Hans Hjört Sweden [Vice President]

Dr. John McCann United States of America [Vice President]

Dr. John Rubino United States of America

Dr. Albert van der Merwe South Africa

Dr. Dominik Weibel Switzerland (President of Honour)

Agenda Item 04, Minutes of the last meeting.

The Secretary presented the minutes of the meeting held in the Olympic Museum, Lausanne, on 24-25 April 1999. These had been distributed and are available on the FAI web page. http://www.fai.org/medical/minutes99.html. The minutes were approved and signed by the President without amendment. There were no points arising out of the minutes that were not included in the agenda.

Agenda Item 5, Report of the President.

The President tabled two reports. The first was the report that he had made to the FAI General Conference held in Limassol in October 99, this specifically mentioned communication, both between CIMP and airsports medical professionals within member countries, and with the Airsports Commissions. He reported also on the Olympic Conference on doping and the negotiations on the medical licencing of pilots within the JAA countries. The statement agreed at the previous CIMP meeting was submitted and he announced the medical symposium to be held in conjunction with the World Air Games. In the second report to this meeting he reported progress in communication between CIMP members using the web page and informed delegates of the uneasy process of harmonisation within the JAA. At the recent FAI Council meeting, radical proposals had been made for the future of the organisation. Lastly the President expressed his thanks to the Secretary General, Mr. Max Bishop and his staff for their support. In discussion Max Bishop explained the changes that might result from the evolution of the FAI into a corporate body. It was appreciated by the CIMP delegates that any transformation of the FAI to a more business orientated organisation would change relationships between the Airsports Commissions and the Technical Commissions. Prof Antonio Dal Monte pointed out that CIMP should be realistic in appreciating the limited significance of medical matters to the Airsport Commissions.

Agenda Item 06, Aim of the CIMP meeting 2000.

The President introduced this item by saying that this meeting should identify questions that could be addressed in detail at the Symposium to be held next year. Dr. Ortiz emphasised that CIMP had to provide a service for the Airsports Commissions. Prof Dal Monte raised the question of competition rules for aerobatics, especially the potential hazard of the rapid rate of application of acceleration forces. There were suggestions from Dr. Daxner and Dr. Kunaver for a medical bulletin, or a section in the Air Sports Magazine. It was agreed that two major items for the symposium in 2001 would be:

Medical regulation in Europe Potential hazards of Aerobatics

Further suggestions made during discussions under later agenda headings were:

Accident rates in Ultra Light Aircraft.
Ergonomics and anthropometry
Implementation of doping regulations
Aviation psychology
Flight stress, thermal and hydration
Disabled pilots and the required control engineering.
Special preparation of top competition pilots

Agenda Item 07, International Symposium on Air Sports Medicine, WAG 2001 Spain.

Dr. Ortiz presented the arrangements and distributed copies of the advance programme, the symposium is to be held in Jerez de la Frontera, Spain over 25 - 27 June 2001. It was stressed that delegates should publicise this meeting in their own countries and endeavour to recruit those who could present papers or simply attend. The symposium was aimed at health care professionals but depending upon space, there would be no objection to others attending. It would be possible to convene workshops on specific matters. Because much of the debate would be concerned with regulatory matters, it was hoped to coordinate arrangements so that representatives of regulatory bodies could attend. Dr Jordan of the FAA had agreed to be the principal guest speaker. The Scientific Committee was confirmed as:

Dr. Eero Vapaavouri Finland. Prof. Antonio Dal Monte Italy

Dr. Peter Saundby United Kingdom

Agenda Item 08, Scientific Presentations.

08.1. Altitude tests for Glider Pilots, Dr. Schober, Austria.

Dr. Bernhard Schober presented a resume of the problems encountered by glider pilots flying at high altitude and gave an account of hypoxia training using a chamber. Discussion centered on the availability of these valued but expensive training facilities to civilian pilots.

08.2. Air Sports accident investigation in Czech Republic, Dr. M Sokol.

Dr. Milos Sokol told of his experience as an aviation pathologist in investigating airsports accidents. This included site inspection, autopsy and toxicology. It was agreed in discussion that there was no difference between airsports accidents and other aviation acccidents and that they are best investigated under the same national arrangements. It was noted that alcohol and the aging pilot are both problems in the Czech Republic.

08.3. FAI-CIMP as a body not only for discussion but for action, Dr. Truska.

Dr. Truska outlined air safety problems in the Czech Republic and proposed a more proactive role for CIMP. Problems existed with all three age groups of pilots, and both the abuse of alcohol and the many pilots without licences indicated unacceptable responsibility. It was agreed in discussion that these related more to training and supervision than disease, and there was a need for participation by doctors who were both proficient and respected within the airsport.

08.4. Biological age as an index of health risk assessment. Dr. Daxner, Slovak Republic.

Dr. Peter Draxner presented a comprehensive paper which proposed that chronological age be factored by cardiac risk factors to produce a biological age. This could be either higher or lower. He discussed the increasing prevalence of disease in middle age and the importance of minor or undiagnosed illness. In discussion it was agreed that this would be a useful tool in persuading aircrew to modify their life style before the adverse effects caused a loss of licence.

08.5. The 1% rule and medical fitness of pilots, Drs. Maire and Saundby.

Dr. René Maire reviewed the evidence that had led to the adoption of the 1% rule in the assessment of pilots and confirmed that experience had demonstrated the validity of the rule for commercial and private pilots. Dr. Peter Saundby tabled a paper written for the JAA which extended the statistical analysis of pilot incapacity and concluded that the major danger was to the passengers or pupils in small aircraft with a single pilot. He confirmed the 1% rule for private and commercial pilots. The hazard to those on the ground following incapacity of a solo pilot was small, so also was the risk when two pilots flew together. The standard for these could be relaxed with safety by an order of magnitude.

Agenda Item 09. Conclusions of Scientific Presentations.

The President summarised the presentations and thanked the presenters for their work.

Agenda Item 10. CIMP Home Page, FAI Internet Facilities. Dr. Ortiz/Mr. Bishop.

The new CIMP home page is available on http://www.fai.org/medical/. The FAI net allows communication with all other Airsports Commissions. The CIMP address listing permits either closed messages to other CIMP delegates, or open information to any interested subscriber. Delegates are encouraged to use this modern means of communication.

Agenda Item 11, Airsports Accident Investigation, Dr Ortiz and delegates.

Accidents remain a major problem. Aviation is unforgiving and the risk is high when compared with other sports. Rotor craft exhibit the highest risk. Reference was made to the FAI Guidance to Competition Directors produced by CASI on action to be taken following accidents causing death or injury. Fatality statistics are the best known, but the reporting to the FAI has been very incomplete with major countries failing to make a return. Total numbers of accidents are of limited value without a denominator to calculate rates. An accurate knowledge of where and how the accidents are occuring must be the first step to prevention. CIMP delegates were urged to check that their countries make returns. Further measures would include airworthiness standards with special reference to human factors, and testing to ensure that standards are implemented. Self regulation is effective but must be based on knowledge.

Agenda Item 12, European Medical Requirements. President.

A table had been produced of the medical requirements for the various airsports and this is available on the CIMP web page. A copy was passed round the table for updating. The national reports and known information on behalf of unrepresented countries were:

AustriaJAR Class 2 not yet implemented, gliders and balloonists, ICAO.

Cyprus Implementation of JARClass 2 lagging

Finland Implementing JAR Class 2, retaining a national licence.

France Non implementation of JAR Class 2, will maintain ICAO standard.

Germany Serious criticism of the JAR reported.

Italy Implementation under discussion, the JAR is an improvement.

Lithuania National rules ICAO, gliders, Ultra Light & parachutists self regulating.

Norway Implementing JAR Class 2

Netherlands JAR Class 2, extending to glider and Ultra Light

Poland Implementing JAR Class 2, new rules are easier.

Slovakia Implementing JAR Class 2, pilots content because it is a relaxation.

Slovenia Transferring to JAR Class 2 in September.

Spain JAR Class 2 is law. It is a relaxation over the previous system.

Switzerland JAR Class 2 is law. Glider and Balloon national sub ICAO standard.

UK JAR Class 2 in force. Introducing a national licence with Driving Licence Group

2 [professional] as the medical standard with Group 1 for solo flying.

In discussion it was considered that there were two basic problems, the harmonisation policy used by the JAA meant that there was no scientific justification for the resultant compromise regulations and pilots complained of the high cost. It was thought that the options would be to accept the development of national standards, or to propose a new medical standard. The first is in accordance with the Europe Airsports policy on national delegation, and does not exclude the development of a common European standard at a later date. It was felt that this should be the subject of a major debate at the Symposium.

Agenda Item 13, Minimum common medical requirements for sports. Dr. Christophides.

Dr. Phivos Christofides reported that in Cyprus, following the unexpected deaths of some competitors in athletic sports, their Sports Federation had introduced a mandatory medical test for all competitors. This was for the age range 6 - 50 and required a full medical examination with Chest X-ray every three years. It is complicated, costly and, as was pointed out, breaches ionising radiation guidance. It was not based on evidence but the Cyprus Sports Federation wishes it to be extended to the airsports.

Agenda Item 14, Doping, Prof Dal Monte.

Prof Antonio Dal Monte distributed a comprehensive and superbly printed booklet in both Italian and English on the >Use of drugs and training in flying activity:problems and advice=. This will be the standard reference for a long time. It was reported that although some countries require screening, no serious doping had been detected. The strict application of >out of competition= suveillance would be an expensive counter measure to what has never been demonstrated as a problem within the airsports.

Agenda Item 15, Meeting Reports.

Dr. Peter Saundby reported that Europe Airsports was in the process of drafting a medical policy document. This would be notified to CIMP delegates when approved.

Agenda Item 16, National Reports.

These items are additional to the reports on the implementation of the JAR 3 reported under Agenda Item 12.

Austria Training in an altitude chamber available.

A NATO meeting to be held 19-20 June, Occupational Medicine on the Flight Line.

Cyprus The use of lasers in physiotherapy.

Finland Commercial pilot training is being centralised at one location.

Poland Work on accident investigation.

Slovakia Three fatal accidents, two pilots showing off. I glider & I military.

Spain Work on organising the WAG and medical symposium.

UK Reported incapacity death of a glider tug pilot.

Agenda Item 17, Advice to the FAI Council.

No formal advice this year. The symposium would address problems identified this year and the outcome could result in recommendations. With reference to correspondence that had taken place between the President FAI and the President of CIMP, it was confirmed that there was no medical professional disagreement, any differences had been in relation to the political tactics to be employed.

Agenda Item 18, Any other business.

The question of disabled pilots was raised. Delegates were reminded that the established policy was that no individual should be restricted without good reason. The modification of aircraft control systems was a well established procedure.

Agenda Item 19, Election of Officers.

The President, Dr. René Maire was re-relected unopposed.

Following an election the following was re-elected as Vice President:

Dr. Pedro Ortiz Garcia Spain

The following were elected as Vice Presidents:

Dr. Eero Vapaavouri Finland

Dr. Oldrich Truska Czech Rupublic

The following was re-elected unopposed as Secretary:

Dr. Peter Saundby

Agenda Item 20, CIMP programme 2000 - 2001.

The work for this year will be directed towards the Symposium in Spain.

Agenda Item 21, Function of Working Groups.

CIMP confirmed the Scientific Committee for the WAG Symposium set out under agenda item 07

Agenda Item 22, Date and Place of next meeting.

For 2001, the official part of the CIMP meeting would be held in association with the Symposium in Spain. The proceedings of the Symposium would replace the scientific section of the routone meeting. For 2002 it was noted that an offer would be made by Cyprus, and Dr. Valentukevicius stated that the Baltic States would be likely to make a joint proposal for the CIMP meeting in 2003.

The meeting ended with thanks to our new Vice President, Dr. Oldrich Truska for hosting the meeting in Prague. Every opportunity had been provided for delegates and their wives to see this beautiful and historic city. The visit to the aviation museum was memorable, many of the aircraft exhibited are great rarities and not to be seen elsewhere.

Peter Saundby Secretary.

List of papers tabled. Copies can be made available on request to the author or the Secretary.

- 1. JAA-FCL MSC Information Paper : The mathematical basis for pilot fitness. Dr. Peter Saundby.
- 2. Altitude chamber tests for pilots (airsport) . Dr. Bernhard Schober.
- 3. Use of drugs and training in flying activity: problems and advice. (in Italian and English). Prof. Dal Monte.
- 4. Biological age as an index of health risk assessment. Dr. Peter Draxner.