



*Fédération
Aéronautique
Internationale*



Minutes

of the
Annual Meeting
of the
**FAI Medico-Physiological
Commission (CIMP)**

held in Lausanne, Switzerland
on 19 and 20 September 2015
at Holiday inn, Oxford (GBR)

Saturday, 19 September 2015

1. Welcome by President

The President of CIMP welcomed attendees and outlined the schedule for the annual CIMP meeting.

- a) He emphasized the tasks that need to be completed during this meeting. The major mission is to draft a position on mental illness (referring to the German Wing Accident 2015) and the air sport participants and to produce a statement from FAI on this subject.
- b) The World Air Games 2015 medical symposium is still in the preparation phase and due to the resignation of a symposium chairman. A new planning committee will need to be appointed and ongoing planning needs will have to be addressed.

2. Roll-Call

Bareford	David	DB	United Kingdom	Delegate CIA (Ballooning Commission)
Berlo	Jacques	JB	Belgium	Delegate
Dal Monte	Antonio	AM	Italy	Delegate
Garrison	Richard	RG	USA	Delegate / Secretary
Garthe	Hiltrud	HG	Germany	Delegate
Knueppel	Juergen	JK	Germany	FAICIMP President
Lepojarvi	Martti	ML	Finland	Delegate / Vice President
MacCarthy	Geoff	GM	USA	Delegate
Maire	René	RM	Switzerland	Delegate / Pres. of Honour
Mitchell	Stuart	SM	United Kingdom	CAA Observer
Osinga	Marja	MO	Netherlands	Delegate / Vice President
Samuelsson	Samuel	SS	Iceland	Delegate
Saundby	Peter	PS	United Kingdom	Delegate / Pres. of Honour
Schober	Bernhard	BS	Austria	Delegate
Shimada	Kaz	KS	Japan	Delegate / Vice President
Stratten	Peter	ST	United Kingdom	Ext speaker
Villey	Thierry	TV	France	Delegate

3. Flight Safety in Air Sports

- a. **“Specific First Aid in Glider and Powered AC Accidents After Rough Landing” (MO)**
The Netherlands NAC sponsored a course for the gliding community on how to handle the aftermath of an aircraft accident. The instructor was experienced instructor and ICU nurse. The course centered on scene safety. The extraction of the pilot emphasized spinal immobilization. CIMP re-emphasized the need for this type of training and coordination with local EMS resources.
- b. **“FAA GA/Sports Aviation Accidents Statistics 2014”(RG)**
The secretary stated that trends had seen no significant changes in the past year. He also summarized the “Pilots Bill of Rights II” which will relieve private pilots of the need for a third class medical to exercise their privileges.
- c. **“Human Factors Summary: Space –Ship 2 Accident (KS)**
The Japanese delegate summarized the accident, which involved the early deployment of the re-entry wing deployment at high speed and caused the loss of the aircraft and caused an injury and one fatality between the two pilots. This was a pure human factors cause due to the wing being unlocked at a high speed outside of design limits.
The Japan accidents statistics were presented with no clear-cut trends identified.
- d. **“UK Medical for Air Sports: Aspects of Flight Safety from the BGA Point of View”(PS)**
The BGA view was presented and its view on producing a culture of safety. (PS) made an excellent presentation emphasizing the organization’s well planned and executed program to aid clubs in achieving the safest operation possible.

e. **EASA, and FAI: Oxygen Use at 10,000 ft. (plus) in Sports Aviation (JK)**

The president presented anticipated EASA regulations concerning mandatory use of supplemental O₂ above 10,000 ft. It was felt by CIMP that recreational pilots involved in air sports could safely recognize hypoxia and choose at which altitude O₂ will be required. EASA will be urged to look at this situation and CIMP realizes the need to temper good medicine with reasonable legislation that will ensure safety and flexibility in air sports.

4. WADA / FAI Anti-Doping Programme
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a. **WADA/FAI Anti-Doping Program FAI TUE AD Panel (GM)**

The panel has handled essentially the same TUE requests as the previous year with aero-modeler making up the majority of TUE requests. There will be no change in the committee membership this year with elections due at the 2016 CIMP meeting.

b. **Update on WADA Strategies (GM)**

The committee chairman related there was an increase in awareness and the ethics of relating to athletes findings on tests that may indicate disease process. The use of testosterone has also increased and there is no issue if clinically indicated and medical evidence is given to indicate the need for supplementation.

c. **Anti-Doping Promotion, Friedrichshafen, De, 2015 (JK)(HG)**

CIMP was represented at this large annual event with two presentations of the FAI-WADA doping programs there was interest from a small number of participants. It was felt that having these presentations was important and should be continued.

d. **Development in anti-doping pharmacology (JB)**

Discussion: The Belgium delegate and TUE committee member gave an overview of the cutting edge developments in anti-doping program. The two major issues are "oxygen carrying enhancement" and "gene doping". Both are extremely effective and hard to detect. There are new biomarkers that may detect autologous transfusions given increase RBC mass which include microRNA, and fetal HGB. The detection of gene doping to enhance performance is still evolving, but is much more problematic and requires sophisticated detection methods. Detection of vectors such as viruses and liposomes are being investigated. Other cellular changes have been identified which may signal gene doping. These changes are complicated by the fact that they may also be an indicator of other disease states and brings in the ethical question of reporting.

5. Pilot Mental Health:

a. **EASA final report on history and findings GW accident (JK)**

Discussion about the official report on paper.

b. **Systematics in examining Pilot Mental Health (RG)**

An overview of the examination and detection of mental health problems in pilots was presented. A historical review of the issues and incidents was given. It related expert opinion over the years and differing attitudes regarding mental illness and the pilot. Current regulation and FAA and world wide initiatives were covered. Special emphasis was given to airline operations and in particular the German Wings accident in 2015.

c. **Management of Psychiatric Disease in air sport (PS)**

The UK delegate presented the BGA experience with dealing with pilots who manifest mental illness and their scheme for allowing the pilots to obtain care and be able to continue flying in many cases, but in any case nurture the pilots and allow the BGS to advocate for them and give needed personal support. The detection these pilots and how to oversee their care and resolution of the illness to the best outcome for all concerned

6. Clinical Aviation Medicine and Regulations

- a. **Swiss Concept for Single Commercial Helicopter Pilots Aged 60 to 65 Years (RM)**
The use of EASA exception that allows single pilot commercial helicopter operations with pilots 60 to 65 years old has been in effect in Switzerland. The study shows as the use of risk stratification for cardiovascular disease as a basis for continuing this exemption going forward. The findings of this study show that accepted risk profiling and use of arterial calcium screening gives a reliable indicator of risk of incapacitation in the pilot population
- b. **EASA Medical Expert Group “What’s New ?” (MO)**
The expert group is awaiting the 2013 NAA with new CRO being approved by legal.
- c. **Dutch protocol: The Use of SSRI’s in Glider Pilots, Balloonist and Powered Hang Gliders (MO)**
The use of SSRI’ and SNRI’s has been regulated by the NAC in the Netherlands and has had great success. Proper selection and defined usage for mood disorders and other selected diseases is key. The policy will continues with further surveillance as deemed necessary
- d. **Developments in Sports Aviation Medical Requirements: EASA, LAPL, UK and USA (RG).**
A review of the differing certification of pilots and aircraft were presented in consideration of their effect on international air sports competitions. The medical requirements of pilots in different countries also has an impact on the participation of international pilots in competitions outside their own country. A more uniform classification of aircraft and pilot requirements in regards to air sports would encourage more participation without increasing risk. It was felt that FAI should champion this concept and a resolution was proposed for presentation to the FAI general commission.

Sunday, 20 September 2015

1. Welcome by President + Roll Call

The meeting was opened by the President of FAI CIMP

The Secretary CIMP (RG) performed the roll call of delegates

Bareford	David	DB	United Kingdom	Delegate CIA (Ballooning Commission)
Berlo	Jacques	JB	Belgium	Delegate
Dal Monte	Antonio	AM	Italy	Delegate
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2. National Reports

a. USA (GM)

The highest fatality rates have been in gyrocopters, weight shift and para-planes. Aerobatics have been responsible for 5 fatalities. The glider and balloon accidents along with GA aircraft have been stable as compared to 2013. There was 1 airshow fatality. Parachuting has the lowest fatality rate

b. UK (PS)

The relaxation of medical requirements for recreational pilots is now in the comment phase and the final decision is pending. The airshow crash of the Hunter jet has placed more restrictions on exhibition flying.

c. Finland (ML)

Cost of medical certification is increasing. Number of AMEs is dropping after the implementation of EMPIC. Accident statistics are stable as compared to 2013.

d. Netherland (MO)

National license validity has been extended to 2018. More sport physicians have become qualified as AMEs this past year. UK LAPL standards are not accepted in the Netherlands unless the pilot has class 1 or 2 medical certificate. This is an ongoing discussion. NAC membership is decreasing.

e. Germany (HG)

All accident rates and statistics have showed no significant change since 2013

f. Japan (KS)

Red Bull Air Races were well received. Hot Air balloon international championship will be in Japan in 2016. UAV accidents are still common place. A GA accident at the Tokyo airport has caused a ban of GA aircraft from this airport. The Japanese delegate informed CIMP that he was removed from CIMP by the NAC and thanked the group for allowing him to participate.

g. Switzerland (RM)

Ultralight aircraft are now allowed, but must be electrically powered. Regulation of UAV's has become a pressing issue. New policies regarding coronary artery disease have been implemented.

h. Austria (BS)

The Austrian Aerospace Medical Association met in Niederöblarn. Red Bull Air Race on June 9, 2015 in Spielberg . One airshow accident involving a Pitts Special with a question of G-LOC. The CAA is using the EMPIC system.

i. Czech (OT)

General Aviation accidents: Total 66/ 8 fatalities
Pilot certification and medical requirements are becoming less restrictive.

j. Italy (AD)

Accident statistics unchanged. Aviation regulations are in flux and awaiting changes. There has been an increase in the number of aircraft. Most of the increase is in uncertified aircraft. The Italian delegate has also tendered his resignation from CIMP. This will be his last meeting.

k. France (TV)

	Nb of accidents		/ Nb of Injuries	
	Total	Of which fatal	Fatal	Serious
Aeroplanes	101	14	22	19
Helicopters	7	1	5	2
Glider (of which motorised)	18	4	5	3
Ballons	6	0	0	7
ULM (of which autogyros)	99	13	21	23
Total	231	32	53	54

3. Minutes of Meeting 2014 (Lausanne – SUI)

The minutes of the last CIMP meeting were distributed and reviewed and no additions or deletions were required.

4. Proclamations

(RG): That FAI requires all sanctioned events to have standard accident and safety reporting system. This should be required at all FAI events and have data be held by CIMP for evaluation and use for advising on safety issues.

Request that FAI proclaims that all airlines be required to have employed physicians who are aerospace medicine qualified. These physicians would interface with flight crews and be integral in the health maintenance of pilots and other flight essential personnel.

5. Important issues in Air Sport

a. Upcoming Conferences and Dubai (JK) (RM)

The upcoming symposium in Dubai UAE was discussed. The responsibilities for administration of this event have been delegated to (JK, GM, MO and RG).

(RM) has withdrawn from the planning of this event. Issues at hand included firming up speakers and arrangements for their visit. The hotel situation with respect to location and cost are being refined and will be addressed in the near future. The symposium is starting to be widely subscribed to and has had full FAI support in addition to the UAE hosts.

6. Date and place of next CIMP Meeting

Lausanne, Switzerland 3-5, June 2016
FAI HQ – Maison du Sport International