



Development of Paratriathlon Specific Classification System for ambulant and wheelchair user athletes



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Quest for inclusion in the Paralympic programme.

Adoption of the Profile System (2009) - used impairment rather than functional ability or activity limitation to group athletes into sport classes

December 2010:

Acceptance into the 2016 Rio de Janeiro Paralympic Games **conditional** to striving towards IPC Code compliance



- principles
- Special Budget provisions
- □ Hiring of dedicated staff
- Research Working Group



GOALS & OBJECTIVES



The classification system had to change to:

Use the International Classification of Function Disability and Health (ICF) as a guideline
Be based on scientific evidence.
Define eligible types of impairments.
Define minimum impairments criteria.
Classify individuals according to the extent of activity limitation caused by their impairments.



ACTION ITEMS



Literature review – Key Movements identification

- Re-evaluation of Current ITU Scorecard & elements
- □ Variables and tests to be considered
- Review of the eligible impairment types
- Requirements for eligibility for athletes with Neurological related impairments
- □ Hypothesis Testing
- Selection of athletes for the study (Data Collection)
- Assessments tests technical part
- □ Statistical analysis

University CEU, Cardenal Herrera - Valencia-SPAIN → Ethics Committee endorsement



KEY BODY ELEMENTS



AMBULANT ATHLETES

	FLEXION-20 FL
NECK	EXTENSION
	ROTATION
TRUNK	ROTATION
FINGERS	FLEXION
	FLEXION
SHOULDER	EXT. ROTAT.
	INT. ROTAT.
	EXTENSION
ELBOW	FLEXION
TRUNK	UPPER ABDOMIN FLEX
IKUNK	LOWER ABDOMIN FLEX
	FLEXION
HIP	ABDUCTION
	ADDUCTION
SHOULDER	EXTENSION
TOUNK	UPPER ABDOMIN EXT
IKUNK	LOWER ABDOMIN EXT
HIP	EXTENSION
KNEE	FLEXION
ЫЮ	Ext ROTATION
nir	Int ROTATION
KNEE	EXTENSION
	DORSIFLEX
FOOT	Plantar FLEX
FUUT	Ext ROTATION-Eversion
	Int ROTATION-Inversion

		SWIM	BIKE	RUN		SWIM	BIKE	RUN
PT2-PT4		IMP.	IMP. SCORE	IMP. SCORE		IMP.	IMP. SCORE	IMP. SCORE
		IMP	IMP	IMP		IMP	IMP	IMP
	FLEXION-20 FL	3	2	1		0	0	0
NECK	EXTENSION	3	2	1		2	2	1
	ROTATION	3	1	1		3	1	1
TRUNK	ROTATION	3	0	2		3	0	2
FINGERS	FLEXION	1	3	0		1	2	0
	FLEXION	3	3	2		3	1	1
SHOULDER	EXT. ROTAT.	3	0	0		3	0	0
	INT. ROTAT.	3	0	0		3	0	0
	EXTENSION	3	2	3		3	2	0
ELBOW	FLEXION	3	2	3		3	2	1
TOUNK	TRUNK FLEXION		2	2		2	2	1
IRUNK			2	2	$\langle \rangle$			
	FLEXION		3	3	$\langle \rangle$	3	3	3
HIP	ABDUCTION	3	0	3		1	0	2
	ADDUCTION	3	3	3		2	1	1
SHOULDER	EXTENSION	3	1	2		3	1	2
TRUNK	EXTENSION	3	2	2		3	2	2
IRUNK	IRUNK		2	2				
HIP	EXTENSION	3	3	3		3	3	3
KNEE	FLEXION	2	3	3		2	3	3
цір	Ext ROTATION	0	0	3		0	0	1
ΠIP	Int ROTATION	0	0	3		0	0	1
KNEE	EXTENSION	2	3	3		2	3	3
	DORSIFLEX	0	3	3		0	2	3
	Plantar FLEX	1	3	3		2	3	3
FOOT	Ext ROTATION- Eversion	0	0	3		0	0	1
	Int ROTATION- Inversion	0	0	3		0	0	1

NEUROLOGICAL IMPAIRMENTS paratriathion

HYPERTONIA, ATAXIA, ATHETOSIS PROFILE

Family Name:	First Name:	N F:
Congenital:	Type: Oplosia/Hemiplegic/Quadriplegia/Athet	osis/Ataxia/Dystonia
Acquired: (Date):	Cause:	

ELIGIBLE IMPAIRMENT (Must Show evidence in 1 or more Impairment Types)

(A) SPAST	ICITY:					
Clonus	Left 🗖	Right 🗆	Bilateral 🗆	No. of	beats	
Babinski	Unilateral Left 🗖	Right 🗆	Bilateral 🗆			
SPACTICIT	Y GRADE (ASHWORTH)* (*1	in one of these movem	sents.)		40	(12)
E V	vrist (flexors)				(L) (L)	(R) (R)
R	nee (quadriceps, sitting posi	tion)			(L)	(R)
B.	inee (rectus femoris, supine	position, Knee ove	er edge of bench)	(L)	(R)	
B	inee (hamstring, supine posi-	tion)			(L)	(R)
A	inkle (gastrocnemius, sitting	position)			(L)	(R)

A clear difference between active and passive ROM (ankle and wrist months)*

Yes NO (* Velocity in passive would be rapid (RPM) and active ROM is likely to be slower.)

Comments:

ITU

(B) ATAXIA:

 Finger-Nose Test
 (L) Accurate
 Inaccurate
 Tremor
 (R) Accurate
 Inaccurate
 Tremor

 Finger-nose-finger
 (L) Accurate
 Inaccurate
 Tremor
 (R) Accurate
 Inaccurate
 Tremor

 Heel-Shin
 (L) Accurate
 Inaccurate
 Tremor
 (R) Accurate
 Inaccurate
 Tremor

Single Leg Support	(Lopen eyes)	10 sec	Yes 🗆	NO 🗆	
	(L closed eyes)	10 sec	Yes 🗆	NO D	
	(R open eyes)	10 sec	Yes 🗆	NO D	
	(R closed eyes)	10 sec	Yes 🗆	NO 🗆	

Dysarthria	Yes	No 🗆
Dysdiadochokinesia (signs of)	Yes 🗆	NO D

Comments:

(C) ATHETOSIS:		
Facial Movement (involuntary cout's around the mouth)	Yes	No 🗆
Involuntary movements of limbs	Xes 🗆	No 🗆
Inability to hold still	Yes	No 🗆



HYPOTHESIS TESTING



Hypothesis 1: The proposed score card defines key movements in the sport of Triathlon

Hypothesis 2: The proposed score card defines minimum eligibility requirements. The factoring matrix accounts for impairments which do and do not impact performance in the sport of Triathlon.

Hypothesis 3: The inclusion of sport specific tests will better reflect how impairment relates to activity limitation in triathlon and the transition component.

SPORT SPECIFIC TESTS



1 Both arms (or residual limb) able to move through a functional range of motion with continuous arm action

2 Able to catch water with both hands

- 3 Able to rotate the trunk to breath to at least one side
- 4 Able to initiate a propulsive kick with both legs in a symetrical manner (needs a 1 in both propulsion and symmetry
- 5 Able to exit the water without assistance.
- 6 Able to ride a conventional bike without any ITU approved bike adaptation
- 7 Able to maintain a steady symmetrical and coordinated body position with a cadence at 80-90rpm

8 Able to pedal out of the sadle.

- 9 Able to have a functional grip with both hands on the handlebar.
- 10 Able to adopt an aero position on the bike or have the potential to do so
- 11 Able to run without the use of ITU approved assistive devices (ie. crutches/canes/prosthetic/orthosis)
- 12 Able to maintain a symmetrical and coordinated runing stride for 3 minutes at 10km/h
- 13 Able to perform a counter-movement jump with both feet





VARIABLES CORRELATION SUMMARY



Pearson Correlation:r < 30 low correlation $0,3 \le r \le 0,70$ moderate correlationr > 0,70 strong correlation

paratriathlon





SCORECARD



		SWIM						В	IKE	F	UN	FUNCTIONAL ATHLETE PROFILE
		M/PC RAW 5 1-	OWER SCORE -5	MP VAL LEFT	MP VAL RIGHT	MP VAL LEFT	MP VAL RIGHT	MP VAL LEFT	MP VAL RIGHT			
E		LEFT	RIGHT	0	0		0	0	0	1 Both arms (or residual limb) able to move through a functional range of motion with continuous arm action		
		<u>+</u>		0	0	0	0	0	0	2 Able to catch water with both hands and back a		
NECK	ROTATION		r -	0	0	0	0	0	0	S Able to rotate the truth to breath to alleast one side		
				0	0	0	0	0	0	A Able to avit the water without assistance		
				0	0	0	0	0	0	6 Able to ride a converticed bike address of the ad		
FINGERS				0	0	0	0	0	0	T Able to maintain a steady symmetrical and coordinated holy position with a cadence at 80-90mm		
				0	0	0	0	0	0	Able to padal out of the adle		
	NT. ROTAT.			0	0	0	0	0	0	9 Able to have a functional arin with both hands on the bandlebar		
F	EXTENSION			0	0	0	0	0	0	10 Able to adopt an aero position on the bike or have the potential to do so		
ELBOW	FLEXION			0	0	0	0	0	0	11 Able to run without the use of ITU approved assistive devices (ie. crutches/canes/prosthetic/orthosis)		
U	UPPER ABDOMIN FLEX			0	0	0	0	0	0	12 Able to maintain a symmetrical and coordinated runing stride for 3 minutes at 10km/h		
TRUNK	LOWER ABDOMIN FLEX	i i i		0	0	0	0	0	0	13 Able to perform a counter-movement jump with both feet		
F	FLEXION			0	0	0	0	0	0			
HIP A	ABDUCTION			0	0	0	0	0	0			
A	ADDUCTION			0	0	0	0	0	0	TOTAL		
SHOULDER E	EXTENSION			0	0	0	0	0	0	MEDICALINFORMATION		
U	UPPER ABDOMIN EXT		11	0	0	0	0	0	0	DIAGNOSIS/HEALTH CONDITION		
TRUNK	LOWER ABDOMIN EXT			0	0	0	0	0	0			
HIP E	EXTENSION			0	0	0	0	0	0	CONGENITAL ACQUIRED DATE PROGRESSIVE FLUCTUATING		
KNEE F	FLEXION			0	0	0	0	0	0			
E	Ext ROTATION			0	0	0	0	0	0	ATHLETES DESCRIPTION ON HOW IMPAIRMENT HAS AN IMPACT ON THE SPORT		
HIP	nt ROTATION			0	0	0	0	0	0			
KNEE E	EXTENSION			0	0	0	0	0	0			
	DORSIFLEX			0	0	0	0	0	0			
P	Plantar FLEX			0	0	0	0	0	0			
FOOT	Ext ROTATION-Eversion			0	0	0	0	0	0	OTHER FACTORS THAT MAY IMPACT CLASSIFICATION		
Ir	nt ROTATION-Inversion			0	0	0	0	0	0			
				0	0	0	0	0	0			
					0		0		0			
										SECONDARY CONDITIONS		
0 51	WIM RAW POWER		POWERS	3SEG%	i							
0,164 si	WIM WEIGHT		TOTAL					$\langle \rangle$	0	EPILEPSY ASTHMA AUTONOMIC DYSREFLEXIA		
0 11	TOTAL SWIM VALUE		TOTAL A	THLET	E SCOR				0			
		CLASSIFI	ERS			Date (dd/mm/	уууу)	$\langle \rangle$			
0 B/	BIKE RAW POWER									CURRENT MEDICATIONS		
0,528 BI	BIKE WEIGHT						M/T					
0 10	TOTAL BIKE VALUE	Signature	2						())			
									$\boldsymbol{\cdot}$	WHEELCHAIR USE ALWAYS SOMETIMES NEVER		
0 TO	TOTAL POWER + ROM						M/T					
<i>0,294</i> RI	RUN WEIGHT	Signature	2						$\neg \downarrow$			







PT1 (handbike and racing wheelchair users)
PT2 (score up to 455)
PT3 (score from 455 to 495)
PT4 (Score from 495 to 557)
NE (Score above 557)
PT5 (Vision Impairment)

Is there a clear profile of impairments in each class?



NEXT STEPS



- □Review of the scorecard
 □Increasing Sport Specific/NovelTests
 □Mathematical adjustments
 □Correcting "errors"
 □Use of inertia sensors for the assessment in the swim, bike and run → Current Agitos Foundation funded Research
- Specific Tests for PT1 athletes (SCI specific analysis)
- Sport Specific Research on Vision Impairment

