

MEDICAL CARE IN INTERNATIONAL FOOTBALL: INSIGHTS, CHALLENGES, & THE ROAD AHEAD

FEATURE / DR SHANE WORTHINGTON

Sports & Exercise Medicine Registrar, London

Introduction — The Complex Reality of International Football Medicine

The international football ecosystem is convoluted (Figure 1), and delivering medical care within this environment is a task marked by considerable complexity. Transitions between club and country can disrupt continuity and pose challenges for effective communication between medical teams (Weiler et al.). International windows are typically short and congested, requiring clinicians to rapidly assess and manage players who arrive from diverse club environments with varying training loads and medical histories (McCall et al.). Once abroad, clinicians must also adapt to unfamiliar medical infrastructures, with variable access to equipment, imaging, and specialist support, all of which demand rapid logistical planning and flexibility (Schumacher et al.). These clinical and organisational pressures are further intensified by extensive travel,

with movement across multiple time zones adding to recovery demands and elevating injury risk (Janse Van Rensburg et al., Van Rensburg et al.). Travel can also pose issues relating to acclimatisation and heat-related illness (Nassis et al.). Furthermore, resource disparities, particularly within the women's game, continue to influence the quality and consistency of medical support (Bolling et al., Geertsema et al.)

Despite these issues, there has been minimal systematic exploration of what clinicians themselves perceive as best practice, or the challenges they routinely face. Against this background, our recent qualitative study provides timely insight (Worthington et al.). Through interviews with twelve clinicians from FIFA top-50 ranked men's and women's national teams, we identified key factors that support effective medical

care, alongside persistent structural and contextual barriers. This editorial reflects on these findings, situating them within the broader landscape of international football medicine, and offers practical considerations for clinicians navigating this demanding environment.

Insights From Our Study: What National Team Clinicians Report

Our study explored the perceptions of clinicians working within this unique domain. Five themes emerged that help illuminate the realities of international football medicine: (1) communication and relationships, (2) governance, (3) navigating risk-taking, (4) delivering medical care abroad, and (5) resource impact.

Communication and Relationships: The Cornerstone of Effective Practice

Across interviews, clinicians consistently described communication as the foundation

The International Football Medical Ecosystem

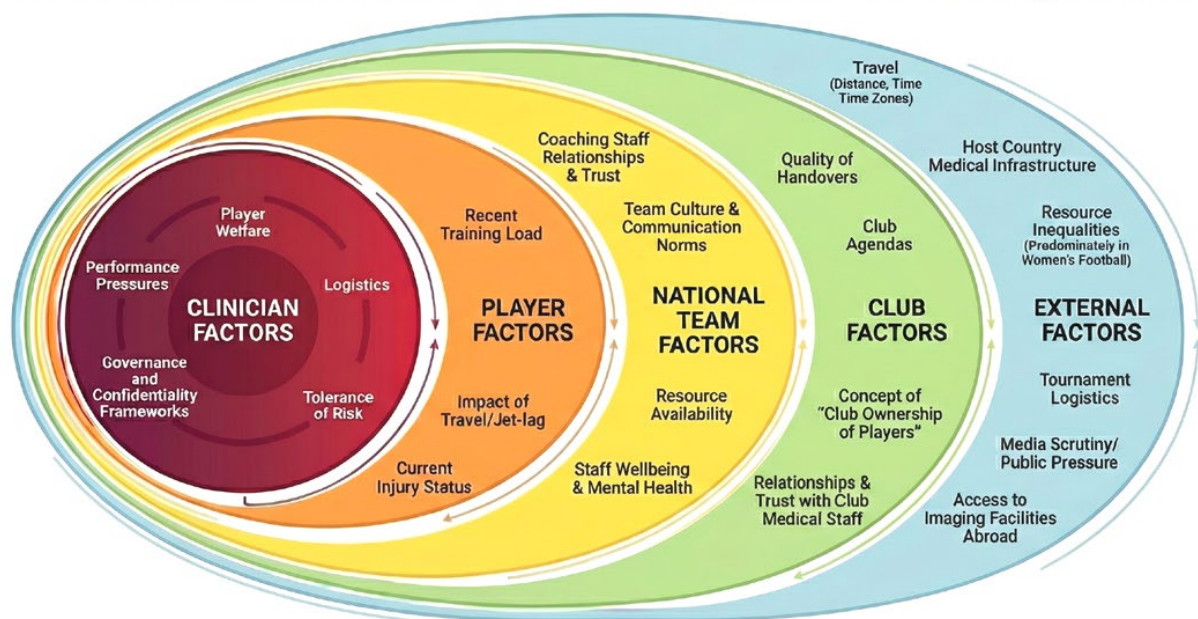


Figure 1: The International Football Medical Ecosystem



upon which safe and effective care is built. This includes internal communication within the national team's medical department, interactions with coaching staff, and the relationship with club medical teams.

Trust with coaches was cited as essential for navigating conflicts that may stem from the differing agendas at play (such as players being called up or playing whilst injured). When rapport is strong, clinicians feel empowered to exercise medical judgement without undue pressure.

Communication with club medical staff presents its own challenges. While some clubs provide detailed, timely, and transparent information, others offer minimal or incomplete data in handovers. Furthermore, differences in opinion commonly arose regarding injury management. Clinicians discussed the importance of building relationships to mitigate these conflicts, with shared decision-making seen as an ideal scenario. Some clinicians suggested that advice was best offered to clubs in a diplomatic and supportive manner.

Effective medical care in this setting is therefore relational as much as technical. The ability to communicate diplomatically, establish mutual respect, and maintain

consistent contact (with both players and external stakeholders) emerged as a central pillar of best practice.

Governance: Confidentiality, Consent, and Professional Responsibility

Clinical governance in international football is complex, shaped by the dual identities of players as both patients and elite performers. Clinicians repeatedly emphasised the need for rigid adherence to confidentiality and informed consent, particularly when discussing player health with coaching staff or other non-medical parties.

Many clinicians described formalised consent processes that specify what information can be shared with whom, and under what circumstances. These processes are essential for protecting player autonomy.

Another aspect of governance relates to the effects of public scrutiny. High profile medical decisions can become media narratives, and clinicians described feeling moral and professional pressure when their actions are publicly questioned. This scrutiny also affects staff well-being; clinicians noted that psychological support is often offered to players but rarely to medical teams, despite the demanding

emotional landscape, particularly during major tournaments.

Navigating Risk-Taking: Tournament Pressure and Performance Demands

Risk-taking was felt to be inherent within elite sport, but clinicians noted that risk thresholds shift significantly in international football. In tournament settings, where opportunities for success are compressed into days or weeks, there is heightened pressure to return players quickly, even when uncertainty remains. Individual clinician attitudes towards risk tolerance were found to vary significantly. Furthermore, the concept of 'club ownership' of players was noted to have influence upon clinician risk tolerance. This concept relates to the idea that players are "on loan" to national teams, reinforcing a sense of responsibility to avoid decisions that could jeopardise longer-term recovery.

The interplay between risk, match importance, injury type, and player preference creates a landscape where medical decisions rely heavily on experience, communication, and ethical framing.

Delivering Medical Care Abroad: Logistics, Adaptability, and System Variability

Delivering medical care abroad introduces

numerous practical barriers. Clinicians cited challenges such as:

- Location-specific concerns i.e. climate, food, infection risks
- Reliability of local medical facilities
- Availability of imaging and specialist care
- Licensing and regulatory differences
- Travel fatigue and jet lag

Planning becomes a central task; identifying appropriate hospitals, arranging emergency pathways, anticipating environmental demands, and preparing for potential complications. The logistical complexity involved underscores the importance of advance reconnaissance, meticulous contingency planning, and flexible decision-making frameworks.

Resource Impact: The Case for Equity, Especially in the Women's Game

Resource disparities were a frequently discussed challenge for women's international teams. Clinicians working in women's national teams described environments with fewer medical staff, limited equipment, and less structured operational support. For some players, these financial limitations are mirrored at club level.

These disparities directly affect player safety and rehabilitation, and they place additional burden on national-team clinicians asked to compensate for chronic under-provision. Addressing these inequities is essential for advancing global standards in football medicine.

The Future of International Football Medicine

Drawing on these insights, several practice-informed recommendations emerge (Figure 2). These considerations do not substitute for local expertise and experience but provide a useful scaffold for clinicians working in high-pressure international contexts.

Looking forward, several areas warrant attention:

- There is a clear need for consensus-based best practice guidance, ideally derived through Delphi processes involving diverse clinicians, performance staff, and researchers. National-team practices remain highly variable; a shared framework could support more coherent, safer, and more efficient approaches worldwide.
- Future research should incorporate perspectives beyond doctors and physiotherapists by also including coaches, sport scientists, analysts, and players. Understanding cross-disciplinary viewpoints will improve the integration of medical care within broader performance systems.
- Governance structures, particularly around confidentiality, workload management, and club-country collaboration, require ongoing refinement. Building transparent, fair, and player-centred systems will reduce conflict and support consistent medical decision-making.



Figure 2: Towards Best Practice Practical Considerations for International Football Clinicians

- Greater attention to staff well-being is warranted. International football clinicians operate under intense pressure with high public visibility and limited downtime. Support mechanisms for psychological resilience, workload management, and mentorship are increasingly necessary.

Conclusion: Advancing Safe, Ethical, and Equitable Care in International Football

Medical care in international football takes place in a fast-paced, high-pressure environment shaped by diverse stakeholders, significant logistical demands, and structural inequalities. Clinicians hold a pivotal role in safeguarding player welfare while enabling performance, yet they often navigate conflicting expectations, incomplete information, and variable resources.

Insights from clinicians in our recent study highlight both clear examples of best practice (particularly around communication and clinical governance) and persistent systemic challenges that require organisational solutions. As the international game continues to grow, the need for coherent, evidence-informed, and ethically grounded medical practice becomes increasingly urgent.

By strengthening communication pathways, refining governance structures, addressing resource inequities, and fostering deeper collaboration between club and national-team medical staff, the football community can continue to advance the safety, fairness, and quality of care for players at the highest levels of the sport.

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