



## Medical Information

### BEFORE THE RACE

All runners and race participants should have a medical evaluation by their personal physician before training for and competing in a marathon or relay event. This is especially important for individuals suffering from heart disease, hypertension, diabetes, epilepsy, chronic pulmonary (respiratory) disease or kidney disease. If you suffer from a chronic condition and are cleared to run by your physician, wear a Medic Alert tag and try to run with a friend. All participants should fill out the personal medical information section on the back of their race number. With proper training you will be prepared for the physical demands of the marathon. Nevertheless, it is possible you may suffer from problems like cold or heat stress or dehydration. The following information guide contains some simple ways to avoid those problems.

### RUNNING SAFELY

Listen to your body and know your limits. Do not run through pain, especially chest pain or discomfort, or breathing difficulty. If you are having difficulties continuing or cannot finish the race, ask for help from volunteers about aid stations, runner pickup vehicles or ambulance. Dozens of medical personnel volunteers will be along the course and at finish line. Dress according to weather conditions. Wear layers and remove or replace as needed. Do not stop running immediately after you cross the finish line. Continue jogging or walking slowly. Massage and stretch your muscles. Change into fresh dry clothes as soon as possible.

### IMPAIRED RUNNER POLICY

We authorize our medical personnel to remove any runner deemed medically impaired from the race. We will use these criteria to determine whether you should continue. You must be able to:

- Proceed in a straight path toward the finish line.
- Say who you are, where you are on the course, and what you are doing.
- Look clinically fit to proceed:
  - (a) Good color.
  - (b) Reasonable runner posture.

A medical evaluation will not disqualify you from the race and you may continue if deemed medically fit.

### DEHYDRATION / HYPONATREMIA

Drinking a sufficient amount of water or suitable sports drink (fluid replacement and energy drink) before and during the race is your best protection against severe dehydration on the course or at the finish. During your training you may want to practice drinking the same fluids you plan to use in the marathon. You should be appropriately hydrated when you step to the starting line. Avoid alcoholic and caffeinated beverages the day before the race that may act as diuretics. The USATF advisory recommends 500-600 ml (17-20fl oz) of water or sports drink 2 -3 hrs before exercise and 300 – 360 ml (10 – 12 fl oz) of fluid up to 10 min. before exercise. Urine color should be pale yellow like lemonade not dark like apple juice. Clear urine is a sign of overhydration from overdrinking and must be avoided. Overdrinking may also lead to severe complications due to the development of Exercise Associated Hyponatremia (EAH). EAH occurs when sodium levels in the blood drop to dangerously low levels due to excessive fluid

intake during prolonged physical activity such as a slow marathon (>4hours). If untreated, EAH can be fatal. Some experts recommend drinking only when thirsty to avoid EAH. Others suggest the best way to avoid dehydration and EAH is to calculate sweat rate and weight loss during training runs. Refer to “The Right Way to Hydrate for Marathons (Q&A sheet)” provided by the AMAA and American Running Association for additional information. All participants should write their pre – race weight on the back of their race number (bib) to assist medical personnel in determining if injuries are due to dehydration or hyponatremia.

### HEAT STRESS

You should know what your tolerance is for heat stress and consider dropping out if conditions are above your safe level. The faster you run the higher you will push your body temperature, so slow down if it's too hot for you. You are especially at risk for heat stress if you're obese, unfit, dehydrated, unacclimatized, ill, previously heat injured, or if you've been training in cold weather. Early symptoms of heat illness include clumsiness, stumbling, excessive sweating, no sweating, chills, loss of judgment, headache, nausea, dizziness, apathy and impairment of consciousness. We will display our color-coded flag system at the start banner to let you know what the relative heat stress is. Watch for one of these signals:

1. Extreme High Risk (black flag): Above levels recommended for any competition.
2. High Risk (red flag): Runners with previous heat stress problems or cardiac disease probably should not run. All runners should run at a slower pace.
3. Moderate Risk (yellow flag): Heat stress will increase during a morning race.
4. Low Risk (green flag): Heat stress injury can still occur.
5. Hypothermia Risk (white flag): There is a risk for hypothermia.

### COLD STRESS

The average temperature in Myrtle Beach during late February and early March is 60 degrees Fahrenheit. Cool, wet, windy, cloudy days (white flag at the start) put runners at a greater risk of hypothermia. The symptoms are similar to heat stress with shivering and euphoria as well. Body temperatures may fall after the finish when blood energy supply is low, the temperature regulation system is impaired (often by dehydration), and you are unable to generate muscle heat from exertion. Seek shelter and dry clothing quickly. Drink fluids immediately.

### YOUR SKIN

Skin in high friction areas (armpits, nipples, groin and feet) should be well lubricated. Petroleum jelly works well. Wear shoes that are broken in. Thin socks may decrease foot friction. Polypropylene liners help keep your feet dry. After the race, clean any blisters with alcohol and drain them from the side with the skin cover left intact. If you are unsure of this, seek medical attention and certainly seek medical care if signs of infection appear.

### GENERAL

If you are ill on race day or a few days prior to the race, your risk of injury increases and you should consider withdrawing. Remember, chest pain / discomfort, breathing difficulties or fluid imbalance should not be ignored, and if they develop, you should seek medical assistance immediately. Your health is too important. There will always be another race. Medical personnel will be available along the marathon course to provide first aid. Participants with more serious needs will be transported to or referred to appropriate facilities. Once discharged, participants who require first aid or more extensive medical assistance are advised to follow up with their personal physician.