DOI: 10.18311/ijsdps.1.2.2026.i-iii Vol 1(2), 2026 | pp. i-iii

The International Journal of Sports Dentistry and Performance Science

**Editorial Message**

# Message from Editor-in-Chief

**Reena Kumar**

**Editor-in-Chief**
*International Journal of Sports Dentistry and Performance Science*
*Academic Director, Indian Academy of Sports Dentistry*
*Academic Director, ICanCaRe Academy*
*Scientific & Education Committee, European Association for Sports Dentistry (EA4SD)*
*Regional Clinical Adviser, Special Smiles, Special Olympics Asia Pacific*
*National Clinical Adviser, Special Olympics Bharat (India)*
*Email: editorinchief.ijsdps@gmail.com*



# Beyond Silos: Integrating Science around the Athlete

Athletic performance is often reduced to visible outcomes: Speed, strength, endurance, scores, rankings and medals. Yet every performance is produced by a far more complex interaction of training, physiology, biomechanics, nutrition, recovery, sleep, mental readiness, injury history, environment, coaching and healthcare. No single discipline can fully explain, protect or optimise that system.

***The future of sport science lies not in the dominance of individual disciplines, but in their meaningful integration around the health, safety, wellbeing and performance of the athlete.***

This principle should shape the next phase of research, clinical practice and performance support. It should also define the identity of the International Journal of Sports Dentistry and Performance Science. IJSDPS was not conceived as a journal limited to one professional domain. It was created as a shared scientific platform where different disciplines can contribute to a more complete understanding of the athlete.

The athlete is one person, not a collection of separate systems. However, sport science and athlete care have often developed in fragments. The physician manages illness and injury; the physiotherapist guides rehabilitation; the physiologist studies adaptation; the nutritionist addresses fueling; the psychologist supports mental readiness;

This is an open access article under the terms of the CC BY: Allows others to copy, distribute, and build upon the work for any purpose, provided they credit the original creator

© 2026 The Author(s). *The International Journal of Sports Dentistry and Performance Science* published by Informatics Publishing Limited

the sleep specialist examines recovery; the biomechanist analyses movement; and the dentist addresses oral and craniofacial health. Each area is important, but its value is reduced when it functions in isolation.

Athletes do not experience these concerns separately. Poor sleep can influence reaction time, mood, recovery and injury risk. Inadequate energy availability can affect multiple physiological and psychological systems while also impairing performance. Pain can disturb sleep, alter movement and reduce concentration. Psychological distress can affect motivation, recovery and communication. An apparently local problem may therefore have consequences across the athlete's entire health and performance profile.

This is why multidisciplinary presence alone is not enough. A support team may include highly qualified professionals and remain fragmented. Separate assessments, reports and priorities do not automatically create integrated care. Research on interdisciplinary practice in performance sport has identified recurring barriers such as unclear roles, inconsistent language, weak communication and difficulty translating knowledge into shared action. More recent work has similarly highlighted the need for common principles, a shared language and continuous knowledge exchange if multidisciplinary teams are to function as one system rather than as parallel services[1,2].

True integration begins with a different question. Instead of asking, "Which discipline owns this problem?", the team should ask, "What does this athlete need, and how can we respond together?" That shift places the athlete, rather than the profession, at the centre of decision-making. It also requires clear communication, mutual respect, agreed goals and a willingness to look beyond traditional professional boundaries.

An integrated approach also changes how we understand the relationship between health and performance. In competitive sport, health is sometimes valued only when it supports availability for training or competition. Yet athlete health cannot be treated merely as a means to achieve results. It is an outcome that sporting systems have an ethical responsibility to protect.

A health-systems perspective in high-performance sport offers a useful framework. Athlete health should be supported through coordinated structures involving leadership, service provision, resources and governance, operating within the broader performance system. Sustainable sporting success depends not only on individual expertise but also on how effectively services are organised, connected and evaluated[3].

Health and performance should therefore not be positioned as competing priorities. Sustainable performance is more likely when the athlete is physically well, psychologically supported, adequately recovered and able to participate in informed decisions. Equally, a responsible sporting system must value safety, dignity, career longevity and quality of life, even when these do not produce an immediate competitive advantage.

The same principle applies to scientific research. Important developments in areas such as sleep and Relative Energy Deficiency in Sport demonstrate that athlete health concerns are rarely one-dimensional. Expert recommendations on athlete sleep emphasise individualised assessment rather than universal prescriptions. The International Olympic Committee consensus on Relative Energy Deficiency in Sport describes a multifactorial syndrome that can affect physiological and psychological functioning as well as health and performance[4,5]. These examples reinforce why isolated measurements, interpreted without context, cannot provide a complete picture of the athlete.

Technology adds another layer to this challenge. Wearables, digital monitoring systems, artificial intelligence and predictive analytics can generate valuable information. However, more data do not necessarily create better decisions. Data collected by separate departments may increase fragmentation when there is no shared framework for interpretation. Technology should connect the team, strengthen clinical and coaching judgement and support the athlete's understanding of their own health and performance. It should not replace human communication or reduce the athlete to a dashboard of numbers.

The next frontier in sport science is therefore not only discovery, but integration and implementation. Evidence must move beyond laboratories and publications into training environments, clinics, schools, federations and communities. Researchers must work more closely with clinicians, coaches, administrators and athletes when defining questions and designing interventions. Journals must value not only controlled studies but also implementation research, field-based evidence and practical models that can improve real-world athlete care.

As IJSDPS enters its second issue, its responsibility is to create these connections. Sports medicine; exercise physiology, rehabilitation, psychology, nutrition, sleep science, biomechanics, dentistry, public health, technology and coaching science should not compete for ownership of the athlete. Each should contribute its perspective towards a shared purpose.

This inclusivity must extend across the entire sporting continuum. The future of performance science cannot be built only around elite and well-resourced athletes. Women athletes, young athletes, para-athletes, Special Olympics athletes, recreational participants and athletes from resource-constrained settings must be visible in our research, policies and professional conversations.

The athlete should never be viewed merely as a collection of systems to be measured. The athlete is a person whose health, aspirations, experiences and rights must remain central.

The future of sport science will not be defined by which discipline speaks the loudest. It will be defined by how different disciplines listen, communicate and act together.

***That is the scientific culture IJSDPS seeks to advance: Many disciplines, one athlete and one shared commitment to healthier, safer and more sustainable performance.***

## REFERENCES

1. Burns A, Collins D. Interdisciplinary practice in performance sport: A scoping review of evidence of collaboration. Eur J Sport Sci. 2023; 23(9):1877-1891. https://doi.org/10.1080/17461391.2023.2201812
2. Hydes S, Strafford BW, Rothwell M, Stone J, Davids K, Otte F. A Department of Methodology: A feasible framework to integrate the applied practice of multidisciplinary support teams. Int J Sports Sci Coach. 2026. https://doi.org/10.1177/17479541251409729
3. Drew MK, Toohey LA, Smith M, Baugh CM, Carter H, McPhail SM, *et al.* Health systems in high-performance sport: Key functions to protect health and optimize performance in elite athletes. Sports Med. 2023; 53:1479-1489. https://doi.org/10.1007/s40279-023-01855-8
4. Walsh NP, Halson SL, Sargent C, Roach GD, Nedelec M, Gupta L, *et al.* Sleep and the athlete: Narrative review and 2021 expert consensus recommendations. Br J Sports Med. 2021; 55(7):356-368. https://doi.org/10.1136/bjsports-2020-102025
5. Mountjoy M, Ackerman KE, Bailey DM, Burke LM, Constantini N, Hackney AC, *et al.* 2023 International Olympic Committee's consensus statement on relative energy deficiency in sport. Br J Sports Med. 2023; 57(17):1073-1097. https://doi.org/10.1136/bjsports-2023-106994