RE: THE USE OF KINESIO TAPING IN SHOOTING

Dear Athletes,

Further to the impressive presentation made before it by the ISSF Athletes Committee in the course of its Munich meeting in November 2015, the ISSF Medical Committee has gone to great effort and given great attention to the issue of the use kinesiotape in shooting sport.

Further to your presentation, the Medical Committee agreed that it seemed that the effect of the application of kinesiotape to skin overlying musculature on measurable athletic based performance outcomes had not yet been well established.

Therefore, the ISSF Medical Committee researched the matter in science peer reviews and various medical publications in order to decide whether or not it would grant athletes competing in shooting the right to compete whilst supported by kinesiotape, the use of which has long been prohibited in shooting sport.

The basic conclusion that the ISSF Medical Committee has come to is that definitive evidence is lacking either to support the use of kinesiotape as a successful measure for improving athletic based performance, or to support the fact that its impact may be negative, or to support the fact that it may act as a performance enhancer in light of the increased stability, strength, torque, flexion, range of motion, proprioception, postural control, pain relief or other physical, if not mental, benefits that it can provide.
As you may or may not know, it has been suggested by its creator Dr. Kendo Kase that kinesiotape has the following effects:

1) Increasing proprioception by providing constant stimulation through the skin
2) Realigning fascial tissue function by normalizing muscle tension
3) Creating more space for improving circulation of blood and lymph flow by eliminating extra fluid, edema or bleeding beneath the skin
4) Correcting muscle function by strengthening muscle weakness
5) Decreasing pain through neurological suppression.

Keeping in mind the increased stability kinesiotape certainly appears to offer, if the Medical Committee was to have accepted all of these suggested benefits of kinesiotape without reference to concrete medical evidence, our decision would have automatically been to not allow its use in shooting.

So, in order to be thorough, we then pondered the conclusions and findings of literature and various studies performed on a wide range of athletes. (See among 15-20 other articles considered, The effects of Kinesiotape on athletic-based performance outcomes in healthy, active individuals: a literature synthesis (Drouin, McAlpine, Primak Kissel) ISSN 1715-1681 2013 356-365.)

Even if admittedly sometimes conflicting, the evidence seems to indicate that the use of kinesiotape is likely to or could provide performance enhancement to shooting athletes in varying ways.

Therefore, in order to ensure a level playing field and in order to preserve the integrity of shooting sport, the Medical Committee has unanimously decided that it cannot grant shooting athletes the right to compete whilst using kinesiotape.

Accordingly, the use of kinesiotape must continue to be prohibited in-competition in shooting sport.

However, the ISSF Medical Committee sees no reason why athletes could not train with the use of the kinesiotape. We therefore encourage those of you applying the tape in training to continue to do so. You simply must not use it in competition.

We acknowledge that this is not the answer you were hoping for. However, you can be sure that the matter was carefully deliberated upon and that we believe this outcome is for the best of the sport and its athletes.

With best regards

Dr. James Lally
Chairman of the ISSF Medical Committee