

Meet Our ACSM Past Presidents

Carl Foster, PhD, FACSM (FACSM emeritus since 2021) ACSM President 2005-06

Education:

BS (zoology), Abilene Christian College, 1970 MEd (physical education), University of Texas at Austin, 1972 PhD (physical education), University of Texas at Austin, 1976 Postdoctoral fellowship (exercise physiology), Ball State University, 1977

Current or most recent affiliation:

Professor of Exercise and Sport Science, University of Wisconsin-La Crosse (1998-2021), Emeritus since June 2021

Honors & Awards:

Michael L. Pollock Established Investigator Award, AACVPR, 2006 Citation Award, ACSM, 2009 Hall of Honor (Kinesiology), University of Texas at Austin, 2010 Meritorious Professor (honorus doctorus causua), University of Zagreb, Croatia, 2012 Hall of Fame, U.S. Speed Skating Assn., 2020

Professional Interests:

Exercise physiology, clinical exercise physiology, sports physiology

ACSM Service:

Multiple committees Board of Trustees Vice President (Basic and Applied Science), 1985-7 Associate Editor of MSSE 1989-2004 President (Education and Allied Health), 2005-6 Treasurer, 2014-20

What first inspired you to enter the exercise science/sports medicine field? What made you decide to pursue your advanced degree and/or line of research/service?

I intended to be a physician and world-class 1500m runner. Alas, neither came to fruition. By accident, I happened on a display about "physiology of running" at the University of Texas-Austin and decided to go to graduate school with Jack Daniels, PhD, FACSM.

For me, graduate school was like being a duck who has been wandering around in the desert for his entire life who found a pond and suddenly realized why he had such big feet.

As a student, who were your mentors and what role did they play in your professional development? As a professional, was there anyone who was also instrumental in your career development?

Jack Daniels, PhD, FACSM, was my mentor throughout graduate school. He was a student of Bruno Balke, M.D., FACSM, so, my ACSM "roots" go back into history. Later, I did my postdoc with David L. Costill, PhD, FACSM; my first real boss was Michael L. Pollock, PhD, FACSM, and my next boss was Neil B. Oldridge, PhD, FACSM. Later, Peter B. Raven, PhD, FACSM, appointed me to be an associate editor of *MSSE*. Thus, I always had breadth to my ACSM lifetime and a mentor who was buried deep in the ACSM tradition.

Are there any students who you feel you have mentored that have gone to play any significant roles within ACSM?

I have several students who are currently at the FACSM level, and many who have been presidents of affiliate chapters within the AACVPR structure. None, however, has made it as far as the ACSM Board of Trustees, yet.

What is it about exercise science/sports medicine that still inspires you today?

On the clinical side, I think that my work (clinical, teaching and research) helps people recover from cardiopulmonary disease. Since I started out to be a physician, my basic orientation is toward helping people, so this continues to inspire me to work, even in retirement. On the sports side, it's a joy to work with people who possess true genius. I often say that working with high-level athletes is like an art professor who might get asked to work with Pablo Picasso, a music professor who might get to work with W.A. Mozart, or a professor of literature who might get to work with Leo Tolstoy. Being around genius is its own reward.

Why and how did you decide to get involved with ACSM? How did your service help you grow as a professional? How do you feel you were able to get elected to its highest position?

My mentor, Jack Daniels, PhD, FACSM, took me to my first annual meeting in Knoxville in 1974. We slept on the floor in the house of his classmate, Edward T. Howley, PhD, FACSM. Effectively, there was early grounding with folks who were involved with ACSM. Later I worked (during the time of their presidencies) for David Costill, PhD, FACSM; Michael L. Pollock, PhD, FACSM; and Neil B. Oldridge, PhD, FACSM. It was, accordingly, inevitable that I would think of ACSM as my home professional society. Mike Pollock was president-elect when I was working for him and appointed me to my first committee (Continuing Education), chaired by Bob Serfass, Ph.D., FACSM, and I succeeded him as chair of that committee. My ACSM service life had gone out of the BOT leadership after my vice presidency. I was too young to be considered for president; I knew it and the ACSM leadership knew it. Accordingly, I spent 15 years as an associate editor for MSSE. As something of a scientific generalist, I was pretty much the busiest of the AEs. In 2004, one of the sitting VPs declined to run for president-elect. Needing an "opponent," I was brought in as a former VP to run against Richard Gay Israel, PhD, FACSM, who (on the basis of very wide committee leadership) was well-positioned to be the next president-elect. However, I had published much more than Gay, and (I think) had better name recognition, which is important in elective position.

What are your most memorable moments from your service to ACSM?

I was VP when the blood doping issues from the 1984 Olympics came to light, and led to censure of some ACSM members. It made me think about the ethics of working with highlevel athletes.

I was in the presidential cycle when the "female athlete triad" position stand came through the system. It was controversial and divisive, and made me think about how professional societies work. I was an associate editor of MSSE, when MSSE, really became an important international journal. It made me think about the need to look for good science, even if the prose (from non-Englishspeaking countries) was less than perfect. Fortunately for MSSE, Peter Raven took my side in a significant argument that we had within the editorial staff, and came down on the side looking for the good science and helping foreign authors express themselves better, and MSSE, "internationalized." I was treasurer when the ACSM budget first began to be challenged, as the growth of the ACSM membership began to plateau. It made me think about how the Board of Trustees and Administrative Council needed consider how to balance the budget when revenue was not unlimited.

How did you become a fellow, and in what year? How do you feel that played a role in your development as a professional?

I became a fellow in 1981. With mentors like Daniels, Costill, Pollock, Oldridge and Raven, it was impossible to think about ACSM without thinking that becoming FACSM was a normal stage of professional growth. Becoming FACSM opened the door to many committees, membership on the BOT and service as an officer.

What were some of the main issues confronting ACSM at the time of your presidency?

The main issue of my presidency was management of the contentious "female athlete triad" position stand. This position stand "ate the presidencies" of Bill Roberts, myself and Larry Durstine. It was, unfortunately, an issue where there never was a "win-win" solution, which is what one always seeks while in a position of leadership. It was an issue where the best evidence (RCTs) was never going to be available and where medical issues and gender politics collided in a way to prevent developing a stable consensus. Also, during my presidency, there was the beginning of strong competition for time on the annual meeting program and pages in MSSE, between the "basic science" and the "applied science" elements of the membership. It was something that we resolved, although I don't think that either "side" got what they wanted. But, that is the nature of being in the leadership of a highly diverse professional society. It was also the time when the "clinical sports medicine" group began to exert more influence, mostly because of the brilliant leadership of several ACSM officers (Bill Roberts, Tom Best, Sandy Hoffman, Angela Smith, Bill Dexter, Bob Sallis, Liz Joy) and the concept of "team physician" emerged as a unifying theme within the clinicians.

What do you think are your most meaningful contributions to the field of exercise science/ sports medicine?

I have done a fair amount of "small science" research, much of which has shown how exercise physiologists can be part of teams formed around either physicians or coaches. Unlike scientists who have done standalone research, my role has been to show how cooperative action produces results. My more important research lines – prediction of exercise capacity, training monitoring, pacing, adjuncts to exercise prescription – are examples of how a scientific career can be composed of many small contributions than any singular achievement.

What advice would you have for future leaders of ACSM?

ACSM is remarkable in that people with highly divergent viewpoints work together (applied science, basic science, clinicians). However, that cooperative spirit is always being challenged by the intensity of involvement of the constituent members. Thus, my advice is that we have to keep working together and to remember that ACSM is the perfect "second society" for most of the members. It's not AMSSM or AOSSM (clinicians) or APS (basic scientists) or AHA/ACC/AACVPR (clinical exercise physiologists), but is a common meeting place for all.

What advice would you give to students who are looking to pursue a career in exercise science/sports medicine?

Go to meetings. Introduce yourself to people, but do it to get to know people because they are interesting, as "networking" is a stupid concept. NEVER, EVER SAY "no" when asked to do something for ACSM. I call this the "Ado Annie Syndrome" (a character in Roger and Hammerstein's Oklahoma). Of all my colleagues who have held leadership roles within ACSM, I have very rarely heard the word "no" come from their lips. Publish your work. Even if not every paper is going to make it into Nature or New England Journal of Medicine, cumulatively you have a story to tell, and people will know your name because of what you publish. Remember that the long-term rewards of service are much larger than the short-term cost in extra work. But also remember that ACSM is a volunteer society, so work that you do for ACSM is for the common good, not for your short-term compensation. It will cost personal time, recreation time and perhaps even family time. But you can accomplish more as a member of a professional society than you ever can as a single scientist or clinician.

