

The Cold Water

Kevin Murphy

Rob, Alby et al

There's been a great of talk about hypothermia, wet suits, piling on fat, weight training and shoulders. I risk sounding like a grumpy old man but think I can respond with some experience:-

HYPOTHERMIA - In the early 70s I went unconscious, sank and had to be rescued after 12 hours in Loch Ness (temp. 5c to 10c) because of hypothermia. The doctors told the swim organisers I wouldn't come round but six hours later I woke up in hospital. Physically there were no ill-effects. Psychologically it could have been very damaging. The answer was the same as learning to ride a bike. If you fall off get straight back on it again. I went back in Loch Ness and two years later I did it and broke the record. If you really do have a physical disability it's not for you. If it's psychological, go easy and slowly but if you want to swim the Channel, you've got to get back in the cold water.

COPING WITH COLD - As an adjunct to your other winter pool training, start low, say a 100 metres in 4c, and increase with the temperature in the spring. By the time it gets to 10c your mind will be kidding you that it feels tropical.

WET SUITS - The reason we get so tetchy about people wearing wet suits is because if you cross the Channel wearing a wet suit you'll claim it as a Channel swim. It isn't. Wet suits are buoyant as well as warmer. It's easier in a wet suit and that detracts from what the rest of us have done. I know it's not easy but that's point. If it were easy there'd be no satisfaction in doing it.

FAT - I like to think I have a reputation for having done some of the coldest marathon swims there are (the North Channel, Loch Ness etc). I have never deliberately piled on fat to cope with cold. If you're piling on the pounds your fitness decreases. This year my weight crept up by accident. When I went for a medical my blood pressure and cholesterol levels were also up. I had to get the weight off and as it came down off, the other readings went down as well. If you're training hard you eat a lot anyway. Go with that but don't deliberately overeat.

ROTATOR CUFFS (or however you spell them - shoulders to the rest of us) - I'm typing this using only my left hand because my right arm is immobilised following surgery to correct rotator cuff damage done by 40 years of marathon swimming. The damage is on the front crawl recovery, not the pull. It's nothing to do with poor stroke technique it's just one of those things. It turns out that when you aggravate and inflame a joint by excess use, the body's reaction is to create calcium as a defence. That calcium builds up in the joint, causing more inflammation which causes more calcium. Eventually the block of hard calcium rubs against the tendons and cuts into them. Mine were cut and about to snap in both shoulders. The good news is it's taken 40 years to get to this point. The better news is that once the surgeon's put a granny knot (sorry Mike - reef knot) in them I'll be good for another 40 years! The warning is - if you've got persistent pain in the shoulders which doesn't go away during the off-season, don't ignore it.

Have fun
Kevin Murphy