

**Statement of John Conyers, Jr.**  
**Legal Issues Relating to Football Head Injuries**  
**October 28, 2009**  
**10:00 A.M.**  
**2141 Rayburn Building**

Everyone who plays football at any level knows it is a dangerous sport. There should be no surprise when a football player separates his shoulder, twists his ankle or bruises his knee. But over the last several years, an increasing number of retired players have develop long-term memory and cognitive diseases, such as dementia, Alzheimer's, depression, and Chronic Traumatic Encephalopathy, also known as "CTE." These are not the types of risks most players or their families ordinarily associate with the game of football.

As the NFL is a monopoly whose existence was legislatively sanctioned, the causes and pervasiveness of these football injuries warrant federal scrutiny. I say this not simply because of the impact of these injuries on the 2,000 current players and more than 10,000 retirees associated with the NFL and their families. I say it because of the effect on the millions of players at the college, high school, and youth levels.

The questions before us today are three fold: How serious is the problem, what can be done about it, and, where do we go from here?

First, there appears to be growing evidence that playing football may be linked to long-term brain damage. For example, a 2003 University of North Carolina study found that professional players who suffered multiple concussions were three times more likely to suffer clinical depression than the general population, and a follow-up 2005 study showed that NFL players suffering concussions had five times the rate of cognitive impairment, and retired players were 37% more likely to suffer from Alzheimer's than the population as a whole. A 2009 study by the University of Michigan found that 6.1 percent of NFL players age 50 and above reported they had received a dementia-related diagnosis, a statistic that is five times higher than the cited national average. Players ages 30 through 49 showed a rate of 1.9 percent of a dementia-related diagnosis, which is 19 times that of the national average. And just last week, the *New York Times* prepared an analysis of data from the NFL's plan to reimburse retired players for dementia-related medical expenses, which found similar data.

Medical researchers also point to numerous autopsies performed on numerous former NFL players who, following their deaths, were diagnosed to be suffering from CTE brain disease. These deceased players include:

- Mike Webster, a 50-year old nine-time Pro-Bowl center for the Pittsburgh Steelers, who died a penniless recluse, sleeping on the floor of a Pittsburgh train station;

- Terry Long, a 45-year old ex-Steeler who died after drinking anti-freeze;
- Andre Waters, a 44 -year old former safety for the Philadelphia Eagles, who suffered from chronic pain and depression and shot himself in the mouth;
- and today, Dr. McKee will testify that former Detroit Lions offensive lineman Lou Creekmur, was tormented by CTE in his final years, as he lost the ability to speak and turned violent. Lou was a player who was not the victim of multiple concussions, and he reportedly never missed a game during his ten-year career.

The NFL, which is performing its own long-term study, has largely denied any linkage between playing football and long-term brain injuries. The NFL described the 2003 and 2005 University of North Carolina studies were described by the NFL as “flawed.” When asked in 2007 whether concussions could lead to brain damage, dementia, or depression, Dr. Ira Casson, the co-chair of the NFL’s Mild Traumatic Brain Injury Committee denied the linkage six separate times. When asked whether there was any linkage between playing football and CTE, Dr. Casson stated it’s “never been scientifically, validly documented.” The League said the recent University of Michigan study was “flawed and that further study was necessary,” and the *New York Times* data released last week was “for self-promotional and lobbying purposes” of the union.

Second, given there is no consensus between the League and its players and the medical community about the causes of these cognitive disorders, it should come as no surprise there is little agreement about how to respond. Former players believe it is unconscionable that the current disability plan only permits a full disability award for conditions developed within 15 years of their retirement. Such a limit, they say, makes no sense for diseases such as dementia that frequently take more than 15 years to manifest themselves.

Player advocates also ask why more isn’t being done to limit the likelihood of long-term brain injury, such as:

- giving the Players Association input in the selection of team doctors and trainers;
- granting players unlimited access to their medical records;
- requiring that all injuries be reported to the league and the Players Association; and
- limiting the frequency of full contact drills, to cite a few possibilities.

The NFL responds that it has set up a no-fault compensation scheme paying ex-players with dementia up to \$88,000 per year, and has instituted several rule changes to limit serious injuries and developed standards for concussion management. However, when it comes to making further changes in their disability plan to account for long-term brain injuries, the NFL has continued to assert, “that is a subject for collective bargaining.”

To me, the answer as to how to resolve these differences and where we go from here is simple – we need an expeditious review of all the data. I am therefore today asking all parties and their personnel to make their records available to Congress to permit such a review and analysis. This request is made of the NFL, the NFLPA, all relevant medical researchers, the NCAA, and the National Federation of State High Schools Association.

When it comes to public health issues, such as the causes of long-term brain diseases, I do not believe it is adequate for the League or the players to hide behind the collective bargaining agreement. Surely, in an \$8 billion a year industry, we can find it within the budget to make sure the players are adequately protected and that any victims of long-term brain diseases are fully and fairly compensated.

The serious issues presented by today's hearing involve matters of life and death. They go to the heart of one of our nation's most popular and profitable sports. And, equally important, they affect millions of players of all ages and their families. So the sooner we can get to the bottom of these issues, the better.