

From: [Soccer America](#)
To: CASEYNIX@BRESNAN.NET
Subject: Paul Gardner: More questions about the safety of heading
Date: Sunday, December 04, 2011 9:47:35 PM



Sunday, Dec. 4, 2011

Paul Gardner's Soccer Talk is a benefit for Soccer America members.

More questions about the safety of heading

By Paul Gardner



U.S. Youth Soccer's "official" response -- if that's what it is -- to the latest medical studies on possible brain damage resulting from heading the ball sounds dangerously complacent.

The new study, from New York's Albert Einstein College of Medicine and Montefiore Medical Center, suggests that soccer players who frequently head a soccer ball do indeed run the risk of damaging their brains.

Jim Cosgrove, executive director of USYS, has replied to these findings -- but it is impossible to read his comments without a rising sense of exasperation. Cosgrove says he has "some concerns" with the study based on variability and the number of participants. He seems more content to question the validity of the tests than to address the possibility that the sport -- his sport, our sport -- might have a serious problem with one of its basic playing techniques.

He happens to be right to throw doubt on the tests. For a start, the number of players tested is far too small to form the basis of any solid conclusions. But Cosgrove is quite wrong to leave the impression -- which he does -- that all is well and will remain so until someone does more widely based and carefully designed tests -- presumably tests with more incriminating results.

That approach is ominously similar to the one that the tobacco industry adopted when the first evidence started to come through that its product was killing people.

This is a shameful way of dealing with an extremely serious issue. Cosgrove -- and everyone else at USYS and USSF -- and FIFA for that matter -- has to be aware that the new study is not an isolated report. It is one of a growing number of such investigations. Each of them -- taken individually -- can be dismissed, by Cosgrove's criteria, as inadequate. But taken together they add up to something rather more weighty.

Virtually all of them -- certainly the ones of which I am aware -- have found enough evidence to warrant a note of caution about heading. Most of them suggest that "further research" should be carried out.

Which means new studies, like the one carried out in New York, and a crucial feature of any new study is that it is likely to feature the use of new techniques and/or newer and more sensitive equipment than were available to previous researchers. In the New York study, the innovation was the use of an "advanced MRI-based imaging technique called diffusion tensor imaging (DTI)" to scan the players brains.

There has been a series of advances in understanding the causes of concussion. The dangers of "second impact syndrome" are now well known; within the last year or so, the dangers of CTE -- chronic traumatic encephalopathy -- have been revealed. Another comparatively recent discovery has been the long-term effects of repeated subconcussions.

It is disturbing that this growing body of research seems to be ignored by the soccer world. Not long ago, we had a Manchester United player removed from a game on a stretcher and taken straight to hospital with a head injury. But ManU coach Alex Ferguson soon announced that "It's a straightforward one. He has concussion and will miss Saturday's game."

If there's one thing we are learning, it is that concussions are anything but straightforward. The technical details of all the new research techniques need not concern us -- but the growing sensation that something may be very seriously wrong here should. And that concern should be reflected in any and every statement from official sources. We are not talking about head colds here. The subject is brain damage.

Cosgrove's comments -- though he surely didn't intend this -- convey the message that, Well, OK, there may be a problem here but we'll wait until someone comes up with a watertight case against heading before we take it seriously. In the meantime, everyone should carry

on as though we don't know about the incipient danger.

An attitude that is irresponsible, at least -- particularly coming from a top official in youth soccer. We have, after all, been warned before that youngsters' brains are more susceptible to second impact syndrome. Very well, then, we should get a decisive answer from USYS to this question: Should young players be heading the ball at all? All we have is a suggestion that players under 10 should keep heading to a minimum.

That is one of the inescapably bizarre aspects of the new study -- that the researchers have attempted to quantify heading. Among the 38 adult players studied, it seems that damage to the "cognitive functions" of the brains was related to the number of headers, with "mild traumatic brain injury," occurring among players who amassed more than 1,000 headers in a year.

A much lower figure would presumably apply to children - but even if a figure could be agreed on, of what use would it be? How on earth would anyone keep track of how many headers each player had performed? Would a boy lose his place on the team once he passed the threshold and was forbidden to head the ball until next season?

There is also the possibility -- something that apparently comes over as a nightmare for the soccer authorities -- that there is no such thing as "safe" heading, and that it should therefore be banished from the sport altogether.

Obviously, more research is needed. Everyone is agreed on that point. The ideal would be a massive trial involving, let's say, at least 10,000 players, who would need to be followed and periodically tested throughout their playing careers, and then on into retirement, maybe even into old age.

If you think 10,000 subjects is an absurdly large number, take a glance at the number of men -- smokers and non-smokers - that the American Cancer Society studied for its definitive 1954 research into the effects of smoking on health: 187,766. And then be aware that the findings (of course, they incriminated tobacco) of this enormous, carefully planned study by the ACS were immediately dismissed by the tobacco industry as "biased, unscientific, and filled with shortcomings."

A comprehensive study of heading would be a lengthy and highly expensive business. Who would conduct it? Well, FIFA has plenty of money and has a worldwide organization ... but it is also an interested party. An independent body is needed, presumably, that would have to come from the world of academia. None of which sounds too likely. We may have to go on assessing the growing series of much smaller trials. Each of which will be -- justifiably -- suspect because it is not big enough.

Uncertainty surrounds, and will continue to surround, the issue. But does that make it acceptable for the soccer authorities -- all of them, from FIFA on down -- to adopt a wait-and-see attitude towards what is, potentially, a very serious health issue? It's worth repeating: this is *brain damage* we're talking about.

[Post your response to the public Soccer Talk blog.](#)

[See what others are saying on the Soccer Talk blog.](#)

FEEDBACK: Send comments to letters@socceramerica.com. Selected responses will be included in Soccer Talk. Please include your first and last name and hometown.

Sunday, Dec. 4, 2011

You are receiving this newsletter at CASEYNIX@BRESNAN.NET as part of your membership with Soccer America. If you'd rather not receive this newsletter in the future [click here](#).

Please do not reply to this email.

Editorial Contact: mike@socceramerica.com

Membership Contact: circulation@socceramerica.com



We welcome and appreciate forwarding of our newsletters in their entirety or in part with proper attribution.
(c) 2011 Soccer America, 145 Pipers Hill Road Wilton, CT 06897 USA
