

NHL still losing the concussion game



The Rangers' Marc Staal stiff arms the Penguins' Sidney Crosby off the puck. (Gene J. Puskar/AP)

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Less than an hour after Craig Berube had confirmed that the Flyers considered Steve Mason healthy enough to tend goal for them again, NHL commissioner Gary Bettman treated the topic of concussions with a smugness that belied his league's substandard policy.

This was Tuesday, April 22, before Game 3 of the Flyers-Rangers series, and Bettman had come to town for a quick news conference, a chance to tout Philadelphia's hosting the NHL draft in June. He was asked once about the secrecy surrounding Mason's "upper-body injury" and once about the intrinsic viciousness of the NHL's postseason, and taken together, his two answers were a jumbled justification for a culture and a concussion protocol that still place a player's utility ahead of his health.

"We treat concussions very seriously . . ." Bettman said, touting the league as the first to have baseline testing and diagnosis protocols. "This is a very physical game. Putting aside concussions, our players will play injured if they can, and they want to make sure they're not vulnerable in that regard."

Later, a reporter pressed him on whether this year's playoffs were especially nasty, were more likely to lead to suspensions and injuries, and Bettman's response was both cutting and condescending:

"Is this your first Stanley Cup playoffs?"

Come on, Mr. Commissioner. Come on. The demands and risks that playing in the NHL's postseason put on an athlete are what make it so compelling. To skate one shift in the playoffs is to undertake arguably the most dangerous endeavor among the four major sports leagues, to journey into a jungle in which the inhabitants carry machetes, too.

As a recent example, Marc Staal twice took his stick to the back of Sidney Crosby's head Monday night in the Penguins' second-round Game 3 victory over the Rangers - and not only have both players been concussed before, they've counseled each other about it.

It's that ferocity that pulls people in. It's why we watch. But for the NHL and its owners, the price of that drama, their obligation to the players, has to be a comprehensive and cutting-edge approach to treating head injuries, and for all the back pats Bettman gives himself over what the league has accomplished, one needs only to look at Mason's situation to understand how far the NHL has to go.

Once the Penguins' Jayson Megna charged into the Flyers' crease on April 12, causing Mason's concussion, Mason didn't appear in another game until he relieved Ray Emery in Game 3 against the Rangers 10 days later, although he did skate and practice over that time. Then, after experiencing headaches on April 24, he underwent acupuncture therapy on the morning of April 25 so he could start Game 4 that night.

Although Mason said that Berube and Flyers goaltending coach Jeff Reese had to quell his desire to play out of concern for his full recovery, the sequence of events makes it clear that having Mason return as quickly as possible was one of the team's main missions, if not its primary one.

"It's a lot more serious than a day-to-day thing," former Flyers captain Keith Primeau told me in 2009, three years after concussions forced him to retire. "If it's not right on a Thursday, it's probably not going to be right on a Sunday. It's a week-to-week or month-to-month injury that should be assessed on that level."

In an e-mail Monday, Flyers general manager Paul Holmgren said: "Per club policy, we do not get into details of injuries. In Steve's case, NHL protocol was followed." To take Holmgren at his word is to assume some details about the process that led Mason back to the ice.

Every NHL player, according to the protocol, has to take "baseline neuropsychological testing" during training camp. Once one of the Flyers' three team doctors diagnosed a concussion, Mason couldn't play in a game again until he met each of three criteria: He had to be asymptomatic at rest; his symptoms didn't return once he exerted himself at a level required for playing; and a team doctor judged him to have returned to his preseason neurocognitive baseline.

For Mason to start Game 4, then, here's what had to have happened: He underwent the acupuncture, participated in the Flyers' morning skate, said he felt fine, was examined and cleared by a team doctor, and played the entire game that night - all in the same 18-hour period, all after he had spent the previous day experiencing post-concussion headaches, all within the purview of the NHL protocol.

"They're making it up, basically," said Paul Echlin, a sports medicine specialist and concussion researcher in Ontario who has authored studies on concussions' effects.

"You can't just rush it through and say you're going to do all the steps in one day. 'I feel good. Now, acupuncture, and I'll be great,' "said Echlin, who added that there is "no reliable or valid" baseline concussion test. "The lack of due process and care for people who are rushed back is wrong."

Notice, too, what the protocol doesn't require of the Flyers - or of any team, for that matter. At no time did the Flyers have to give an independent physician - one unaffiliated with the organization and unburdened by any conflicts of interest - an opportunity to examine Mason. Bettman did tell reporters last week that the NHL would look into having independent doctors evaluate brain trauma, but the league already is late in implementing the measure, suggesting that protecting a player's best interests hasn't been its highest priority.

So, sure, Gary Bettman can snicker at these questions and congratulate himself, but he ought to understand that the No. 1 goaltender for one of the NHL's flagship franchises was fortunate to emerge from the playoffs' first round with what appears to be little lasting damage.

The Flyers followed the rules when it came to Steve Mason, and out of this confusing and complex story, out of a profound problem yet unsolved, that's the most troubling and terrifying thing.

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