



## Michelle Pye in Charge of Canada vs Japan Match



*Michelle Pye was the Referee of the game between Canada and Japan. The match was played at BC Place on October 28, 2014.  
(Left to Right) Christine Sinclair, Team Captain Canada; Felisha Mariscal – USA, AR-2; Marie-Soleil Beaudoin – Canada, 4th Official;  
Michelle Pye – Canada, Referee; Amanda Ross – USA, AR-1; Miho Fukumoto, Team Captain Japan; Saori Ariyoshi.*



*Observing action inside Penalty Area during Free kick*



*Moving quickly to new position at counter attack.*

## Membership for Fellowship's Sake!

If anyone wants to know the importance of belonging to a referees association, one has to look no further than the book *The Rules of The Game*, written eloquently by former Italian FIFA Referee **Pier Luigi-Collina**, referee for 1999 Champions League and 2002 World Cup Final.

In it he answers the question "Why should I join a society of my peers" (i.e. a referees association) which we can sum up in one word: fellowship.

"I have spent many evenings (with my Referee's Association), These were important times because we could recount our experiences and exchange opinions, which was useful training and development, especially for younger referees." (*ed note: we should also include "young at heart" because many join the profession after their playing career has ended*).

Unfortunately for our local soccer scene, refereeing games is an end to itself. Put another way, "when's my next game?" for one.

Given that premise, does one get the full enjoyment in being a referee? When things go sour, as they can, does one still maintain the same drive that propelled them to take up the whistle in the first place?

Who can one turn to get that thrill again? From one's spouse and/or family? Unless they are referees themselves, it's doubtful and or difficult.

So then where to go? The Referees Association! For as Collina says, "And now years later, I can confirm that many of the friendships born back then in the branch, continue today."

Why should we join the British Columbia Soccer Referees Association (and be affiliated via its Area Association branches)? Why??? for fellowship's sake of course!

### Come to the Annual Christmas Dinner Dance of the VASRA

Date: November 28

Day: Friday

Doors: 7:30 pm

Cost: \$45.00 p.p.

Engineers Auditorium  
4333 Leger Avenue, Burnaby

Contact Marc Bowley

(604) 278-9302

# Concussions: the Danger of abnormal Behaviour



*Dr. Raul Perez addresses members of the Vancouver Area Soccer Referees Association*

Given that concussions is a hot topic these days, the Vancouver Area (VASRA) executive took the initiative and invited **Dr. Raul Perez** to speak on the subject at their October monthly meeting.

Dr. Perez was the Team Doctor for the Honduran National Team at the 2014 World Cup in Brazil and lives in Canada with his Canadian wife.

During the presentation, Dr. Perez showed a clip of the play where **Alvaro Pereira** of Uruguay sustained a concussion during his team's game with England. One can clearly see Pereira unconscious and, after being awoken, a clear change in his behaviour — he became quite aggressive when told he would be substituted and strongly insisted to get back on the playing field.

Dr. Perez indicated this is a clear sign of a concussion, potentially even a brain hemorrhage. He recalled a match where he was threatened by a player who refused to go off after being examined by himself.

"If you take me out you'll witness the power of this arm," said the player making a fist and flexing his muscle.

Only because the referee indicated he had to leave the field to be attended to did the substitution take place.

The next day Dr. Perez went to see the player, hoping to get an apology for his threatening behaviour.

What the player said next amazed even Dr. Perez. The player said he didn't remember a thing.

Let this be a lesson to us all on one aspect of concussions.

## Calling All Referees- Let's Give A Red Card To Cancer

**Ed note:** The month of November has in recent years been used to highlight the issues of men's health, mostly prostate cancer but other issues as well, via the vehicle called "Movember." VASRA 2nd VP **Antonio Hurtado-Coll** has come up with a unique way for referees to get involved in tackling the thorny issue of prostate cancer. Here, we present his idea and plea to all members to get involved

Hey there, who doesn't love a well grown moustache? Especially one that's making a difference in 21 countries around the world.

Movember's arrived and we've made the decision to join their ranks. With the support of their Mo Sistas, Mo Bros grow and groom a moustache over the 30 days of November to raise funds and awareness for prostate cancer, testicular cancer and men's mental health problems.

It's a long road ahead and I'm looking for someone to come with. I want YOU to join my Movember team and help us change the face of men's health: /moteam.co/red-card-to-prostate-cancer" \o "This external link will open in a new window" \t "\_blank" moteam.co/red-card-to-prostate-cancer

We are passionate about Movember because they are working tirelessly every day connecting and funding the best scientific and clinical minds in the world, working towards two urgent goals. Fast tracking a time when no man will die from prostate or testicular cancer, and to rid the world of discrimination against men and boys with mental health problems.

We're in this together, so get involved and spread the word.

**Antonio Hurtado-Coll**

# U-18 NATIONALS HELD IN BC!

**Ed note:** BCSRA Director and National Assistant Referee **Chris Wattam** was appointed to the recent U-18 National Championships being held in South Surrey Athletic. Here, he gives a short report on what transpired.

This past Thanksgiving Day weekend, players, coaches and referees from across Canada descended upon Surrey's South Athletic Park to participate in the U-18 National Championships.

Teams representing all 10 provinces were invited to attend the annual tournament, which took place from October 8-13 at South Surrey Athletic Park.

Not to be outdone, referees and assessors representing six provinces were also in attendance.

Over 30 referees from British Columbia joined seven Nominated National referees from across Canada. Referees from BC:

(**Juan Marquez, Igor Cvetkovski**); Saskatchewan (**Chantal Boudreau**); Quebec (**Pierre-Luc Lauziere, Andre Pickler, Marie-Han Gagnon**); and Nova Scotia (**Amanda Velutini**), and others appointed by the CSA and neighbouring provincial associations.

As always, the tournament was spirited and competitive, and thanks to the refereeing contingent, devoid of controversy with many commenting on the high level of professionalism and skill displayed.

After the dust settled, British Columbia representative **Surrey United** won gold on the boys' side, while Ontario representative **North Mississauga Panthers** won gold on the girls' side.

All that is left is to wait and see which nominated referees will be selected to join the National List in 2015.

We wish them all the best of luck!

## Countdown to the Women's World Cup

The list of teams already qualified for FIFA 2015 Women's World Cup is starting to take shape.

With only 45 more days before the World Cup draw on December 6 (as of October 22), here are a list of teams that have already qualified for the 24 team competition.

(Source: FIFA.com)

### ASIA

Australia, China, Korea Republic, Japan, Thailand

### UEFA (Europe)

England, France, Germany, Norway, Spain, Sweden, Switzerland

### CONMEBOL (South America)

Brazil, Columbia

### CONCACAF (North & Central America and Caribbean)

Canada, USA, Mexico

## ONLY FROM THE MOUTH OF BABES

VASRA President **Marc Bowley** was refereeing in a Elementary Schools Soccer Tournament recently where some of the players were still quite young to the game. Knowing that, Marc sensibly used his personality and voice rather than the whistle to get the point across.

After signalling and announcing "Free kick" for fouls during the game, one player was left with a quizzical look on his face. He then asked, "Sir, which of the kicks do we have to pay for?"

**FLAG & WHISTLE** is published 6 times a year by the BC Soccer Referees Association. The material presented is from contributors. The BCSRA assumes no responsibility for its content.

Editor: **Elvio Chies**

Staff Writer: **Tom Babic**

Research **Emil Udovich,**

**Mynor Campos**

Lay-out and Typesetting

**Dieter Freundt**

Special contribution

**Erina Cho**

Letters to the editor are welcome and should be directed by email to: **Lvo@direct.ca** or **stdy@shaw.ca** or by mail to:

**BC Soccer Referees Association**  
c/o 8130 Selkirk Street  
Vancouver, BC, V6P 4H7

## REWARD AND RECOGNITIONS

Three members were recognized in front of their peers for their service to the association and/or their contributions to refereeing.

At the August Vancouver Area meeting, **Gord Rogers** was recognized as one of the latest recipient of the Long & Meritorious Service Award while **Bob Allen** was officially announced as a BCSRA Life Member.

Furthermore, at the Vancouver Area meeting **Pat Harkness** was also recognized as the latest recipient of the Long & Meritorious Service Award.

All three gentlemen were elected at the BCSRA Annual General Meeting in May of this year.

Congratulations to all three gentlemen on their respective awards!

### BOB ALLEN

- BCSRA Past President
- VASRA Past Present
- VASRA Life Member
- Former FIFA Referee 1983-1987



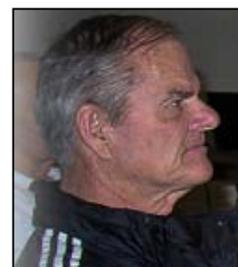
Bob Allen (L) and Marc Bowley



### PAT HARKNESS

A member of the BCSRA for over 30 years who served in various executives for almost as long.

- Vice-President 1984-1990
- Treasurer/Registrar 1991-1993
- President 1994-1999
- Acting Secretary 2002
- Past-Editor, *BC Soccer Referee* newsletter (former name of the *Flag & Whistle*)
- Honourary National Referee



### GORD ROGERS

A member of the BCSRA for over 30 years

- Treasurer and Registrar (1988-1990)

- Vice-President 1991
- President 1992-1993
- Helped form the Canadian Soccer Referees Assn
- Member of the CSRA's first ever executive – 1988
- Former FIFA Linesman and National Referee

# Young BC Referee At CONCACAF Championships

**Ed note:** after being spotted at this year's Dallas Cup, **Erina Cho** of Coquitlam was asked to participate in the inaugural CONCACAF Girl's U15 Championships. Here we present an interview with Erina about her experiences.

*Flag & Whistle (FW):* What was the appointment and where?

**Erina Cho (EC):** I was appointed as an assistant referee at the inaugural Girl's U15 CONCACAF Championships in Cayman Islands.

*(FW):* How did you come about receiving this appointment?

**(EC):** I was fortunate to participate at the 35th Annual Dallas Cup in April and CONCACAF members, including the head of the referee department, Mr. **Alfredo Whittaker**, were also present. Mr. Whittaker had seen a few of my matches during the tournament and I was invited to the Girls U15 CONCACAF Championships as a result.

*(FW):* How did you feel when asked?

**(EC):** Initially, I could not believe my ears and thought that it was too good to be true. However, once I processed what an amazing opportunity I was given, I was very excited and felt extremely honoured.

*(FW):* What did you do to prepare for this, both on and off the field?

**(EC):** I was not sure whether my role was going to be as an assistant referee or as a referee so I did my best to prepare for both situations. On the field, I made sure to referee as many high performance youth games as possible leading up to the CONCACAF Tournament in August. Luckily, most of the major league championships were scheduled throughout the months of June and July and I was able to get feedback from many assessors and colleagues.

I found the Youth Provincial A Cup particularly essential in my preparation as the tournament is highly structured with training sessions, academic sessions, and assessments per game.

It was also a good practice to deal with highly emotional situations and control the temperature of the match. It is not every tournament that referees get such a comprehensive development program!

I was very fortunate to also work on a couple international friendly matches. I was the junior assistant referee alongside FIFA referee, **Michelle Pye**, and provincial referee, **Candace Brown**.

The game was between the U20 Women's Canadian National Team against the U20 Women's Korean National Team, in preparation for the U20 Women's World

Cup also being held in this coming August in our country. Observing and learning directly from these highly experienced female referees was very helpful.

Off the field, as I had no prior experience at a international tournament of this level, I tried to familiarize myself with what to expect by asking many questions to people who have. Michelle Pye was very kind in letting me know some key tips and **Marie-Soleil Beaudoin** who attended the Boys U15 CONCACAF Championship was very gracious in agreeing to talk to me over the phone for almost an hour. Amongst many other things, I was warned about cultural differences such as language barriers, and the climate.

Therefore, I decided to brush up my French a little and also get used to heat by training midday, including sauna sessions, and focused on eating healthy and hydrating.

Finally, the BC Soccer Candidates program was the backbone to all of my preparations and continues to provide me with an amazing environment of people I can learn from and push each other. Many thanks to all of my incredible mentors, colleagues, family and friends for their encouragement and support.

*(FW):* What arrangements were made to get you down there?

**(EC):** As a referee, we were all paid for our expenses including flights, meals and accommodations. Getting to the Cayman Islands was a little bit of a challenge as my itinerary was very tight and I missed my flight from Cancun to Panama City, and I was stuck overnight in Mexico where my Spanish was very limited haha.

Luckily, I did manage to get in contact with CONCACAF and everything was sorted out and taken care of!

*(FW):* Describe how you felt when you got to the tournament.

**(EC):** I felt very nervous and unsure, but excitement probably predominated my emotions. I was greeted very warmly by the tournament organizers and once I was introduced to my fellow referees, it helped me calm down quite a bit.

I was lucky to recognize one of the referees from the United States well as **Mr. Alan Brown**, who is the CONCACAF Fitness Instructor, as I met them while I was at Dallas Cup, and it was nice to know some familiar faces.

*(FW):* What was the quality like?

**(EC):** I think it is important to note that many of the participating countries were from small Caribbean Islands and Central America where the population is less than that of the city of Vancouver. With that in

mind, it was evident that the players representing their countries were the best, and I was thoroughly impressed. It is interesting as every country plays with a very different style and the various combinations made the tournament highly entertaining as a referee but also as a spectator. However, it did also make me realize how good the program is here in Canada and I was proud to say I am part of it.

*(FW):* Whom did you meet?

**(EC):** I met many referees from many different countries and backgrounds. Officials were from Jamaica, Guyana, United States, St. Lucia, Cuba, Barbados, Trinidad and Tobago, St. Vincent, Haiti and many others.

Most spoke English but the referees from Cuba and the Dominican Republic spoke Spanish, while the officials from Haiti spoke French so our meetings were always trilingual.

As I spoke French, I was informally designated as the translator for the Haitian referees and I had a great deal of fun. There were a few who were newly appointed FIFA referees, as well as some FIFA list nominees, and to find myself amongst these people was an amazing sensation.

I also met Ms. **Dianne Ferriera-James** who was one of our assessors and just retired as a FIFA referee, and she was a great inspiration for me. In addition to the referees and assessors, I got to spend some time with Mr. Alfredo Whittaker and Mr. Alan Brown, who gave me an insight of what it really takes to become a FIFA referee. Finally, I was also introduced to CONCACAF President and FIFA Vice-President, Mr. **Jeffrey Webb**, which was a great honour.

*(FW):* What general feelings did you have about participating?

**(EC):** I felt that I was given an invaluable experience taking part, and that I learned about many things that I never would have otherwise.

After the tournament, I now realize that the road to that level of officiating is long and far from easy, but I hope to take this experience with me along the way.

*(FW):* Any last thoughts about the experience? Do you feel changed in any way?

**(EC):** I feel that this was a humbling experience for me, and like I've been brought back to the foundations of what it means to referee.

The importance of constantly being a student of the game, being considerate of how and why others act or say certain things, and when to know you need to be firm and set things straight, are some things I've begun to work on more. ★

# Soccer Briefs

## Mentor Program starts

Under the tutelage of Head Referee **Pete Dragan**, the *Coquitlam Metro-Ford Soccer Club* is starting another season of its mentor program. Under the program, Pete assigns mentors to referees that officiate in the club. Careful note is given to those small-sided referees who are refereeing their first game.

This is the third year that Pete and his cadre of mentors have been “coaching” referees. Pete credits the mentor program with retaining referees. So much so that he says he has a full complement for this season.

## Days of the Future Past it's a small World

This past September saw a rather auspicious anniversary. For it was in this month 30 years ago, 1984 to be exact, that an entry level course would be held that brought together, unknowingly to the participants, five individuals that hold a place in the Referee's Association's history.

The entry level course, held at the Mount Pleasant Community Center in Vancouver, was taught by **Frank Ashdown** who would later be elected a Life Member of the BCSRA.

Participating in the course were four would-be Vancouver Area branch (VASRA) Presidents: BC Soccer Referee Development Coordinator **Jose Branco**, **Elvio Chies** (who actually had completed the course three years prior but was attending to bring the overhead projector) and **Kevin Skinner**, the latter who would also be appointed to the FIFA List for a short stint.

And who was the fourth would-be VASRA President? Why it was the ubiquitous **Joe Ciresi** who made an impromptu appearance on the last night of the course!

## Anyone need a Referee Shirt and Shorts

After stepping down from refereeing, Jake Fujiwara would like to ask if anyone needs a men's small jersey, short sleeve with shorts. The brand name is KIX. He's asking \$20.00 for the lot.

If you're interested please call him at 604-834-3773.

## North Shore Youth Soccer Association Group Membership

NSYSA Referee **Patrick Li** has announced that the NSYSA will participate in the BCSRA's Group Membership Plan. This will now be the third season of the NSYSA's participation.

## Youth League to consider Head Injury Policy

The 4 District Boys League, which operates in the Lower Mainland area of the province, has a draft policy requiring that any player who has sustained a head injury must leave the field.

At the time of this writing, the draft policy is being discussed internally by the board of each of the four districts that comprise the league.

# CONCUSSIONS – A HEAD START

It seems these days that not a week goes by without news that a player is out of the starting lineup due to a head injury.

With that in mind, the Vancouver Area executive invited **Vincent Lam** of the Fortius Sport and Health Institute to give a presentation on Concussions.

To start, Vincent indicated he has had great experience with concussions offering his own history.

He has had six concussions (Vincent plays recreational hockey) and in some cases he has lost consciousness.

Concerning concussions in general, Vincent indicate we don't know all the ins and outs of this injury.

Everyone needs to be treated differently and each new concussion gets bigger and stronger.

A concussion is an injury to the brain, which is suspended inside the skull in a fluid. It's a disruption of the brain's activity and could be caused by a jolt as well as a direct hit.

The signs, and there are many, can include pupils not dilating properly, fogginess, to name a few.

These may not appear right away and can't be diagnosed without a proper examination. Also, multiple concussions could be Vincent offered that the best rule of thumb is, “If in doubt, sit them out.”

Vincent mentioned a personal observation regarding helmets- they may potentially minimize injury not stop them. Furthermore, he was of the opinion the disclaimers on helmets are vague.

In closing, Vincent informed everyone of a number of online tools for more information:

- [www.catonline.ca](http://www.catonline.ca)
- SCAT3 (google this to find the link) which has a checklist of items regarding concussions

He also mentioned that Fortius has everything under their roof to handle a program of getting back to play as soon as possible.

As this is covered by MSP, one needs a referral from a family doctor.

This can be brought in the day of an appointment.

For more information, people are asked to contact **Megan Durrant** at the Fortius Sport and Health Institute. Telephone: 604-292-2501.

## Stoppage Time is often home-cooked, especially in Major League Soccer

by Carl Bialik

I wrote last week about the vagaries of stoppage time at the World Cup. The referee decides how many minutes to add at the end of each half of play – ostensibly based on how much of each 45-minute half was lost to injury, bookings, goal celebrations and other major delays.

The referee doesn't have to explain the decision, and it can sometimes puzzle fans and rankle teams. Trailing sides think they're due more time, and leading sides want to get things over with quickly.

Researchers have found that more than just time delays influence the amount of stoppage-time allotted. Refs in Spanish club football "systematically favor home teams by shortening close games where the home team is ahead, and lengthening close games where the home team is behind," **Luis Garicano, Ignacio Palacios-Huerta and Canice Prendergast** "<http://www.mitpressjournals.org/doi/abs/10.1162/0034653053970267>" \l "U7GW3Y1dWqE" \t "\_blank" reported in 2005.

At the World Cup, only the host — Brazil, this year — truly has a home-field advantage. But in club soccer, home advantage is more relevant, and current data shows it's not just Spanish club refs who favor the home side.

Many of the clubs that enjoy the biggest home advantage in stoppage time play in Major League Soccer, the top U.S. and Canadian professional league. Although some U.S. fans objected to the amount of stoppage time awarded at the end of the U.S.-Portugal match, their domestic league is the club king of home-cooked stoppage time.

To estimate home advantage in club soccer, I asked soccer stats providers "[www.trumedianetworks.com/](http://www.trumedianetworks.com/)" \t "\_blank" **TruMedia Networks** for data from the major European club competitions, plus MLS. Using Opta data, TruMedia compiled the average amount of stoppage time awarded for clubs when playing at home, when entering second-half stoppage time in two different game states: ahead by a goal or trailing by a goal.

That's when the amount of stoppage time matters most: The leading team wants less time awarded, to hang on to the lead, and the trailing team wants more time to seek an equalizer. Teams' motivations in tied games are harder to detect, and teams leading by two or more goals usually can rest easy entering stoppage time. (The data for the European clubs covers matches in

the English Premier League, Spain's La Liga, Italy's Serie A, Germany's Bundesliga, France's Ligue 1 and the Champions League since 2010-2011; in MLS, it covers all matches since 2012, through last Tuesday.)

### Average Allotted Stoppage Time

In all, the data included 1,884 matches in which the home team led by a goal entering stoppage time, and 1,326 matches in which the home team trailed by a goal entering stoppage time. (There are more of the former because home teams win more often than they lose.)

On average, the home team gets eight more seconds when it needs more time than when it doesn't: Three minutes and 59 seconds compared to three minutes and 51 seconds. That's a 4 percent increase: small, but enough to get the average home team a net gain in goals when it needs them over thousands of matches.

The home edge varies widely across leagues. In Ligue 1, it's somewhat surprisingly reversed: The home team gets 1 percent less time, on average, when trailing by a goal than when leading by a goal. Serie A and the Premier League — despite the fame of Fergie time — are around average.

And in the Bundesliga and MLS, the home edge is a whopping 11 percent. That amounts to a more significant edge in absolute soccer terms for MLS home teams, however, because the average amount of stoppage time awarded is greater in the U.S. club league:

Home teams trailing by a goal get an average of 28 more seconds than those leading by a goal in MLS, compared to just 19 more seconds in the Bundesliga.

It's impossible to say over a single match, or a small set of matches, that stoppage-time awarding is flawed: Maybe the game in which the home team trailed did have more disruptions, by chance or because there's something systematic about such matches that eats more time.

But the gap in MLS and Bundesliga, over more than 300 matches in each, is big enough to be suspicious. That doesn't mean refs are consciously favoring the home side: It's possible they're influenced by the crowd or other circumstances without knowing it.

Some clubs get an especially immense home advantage at the end of matches. Most of the biggest outliers are in the MLS. Among the 183 clubs studied, 117 had at least five home matches in the

sample in which they entered stoppage time behind by a goal, and also had at least five matches in which they entered stoppage time ahead by a goal. Among these 117 clubs, the five with the biggest favorable home edge in absolute terms all were in the MLS. Ranking instead by percentage edge, these same five clubs place in the top nine. They are the **Chicago Fire**, the **Los Angeles Galaxy**, the **Vancouver Whitecaps**, **Real Salt Lake** and **Sporting Kansas City**.

### Average Allotted Stoppage Time

**Garth Lagerwey**, general manager of Real Salt Lake, wasn't surprised by the findings. He attributed them in part to the inexperience of MLS refs. Few have been full-time employees, though their number has increased this season after a lockout, "so they're right at the beginning of the curve in terms of referee-growth development," Lagerwey said in a phone interview. The influence of the crowd on refs "shows up in every sport: the NFL, the NBA and soccer," he said. "The more experienced the referee, the less variation" he'd expect in stoppage time depending on the situation.

**Peter Walton**, general manager of the Professional Referee Organization, which employees MLS refs, said he'd take a closer look at the issue of fairness in stoppage-time decisions. "I was not aware of any patterns in stoppage-time allowance," Walton said in an email. "However, on the strength of your data I will be taking more interest in stoppage time per club. This is such a subjective topic and I feel more definitive guidelines are required to become more transparent in its use."

---

## Oregon Referees get Training on Concussions Symptoms

Source: [Oregonreferee.com](http://Oregonreferee.com)

**Ed note:** given the recent spat of news on concussions, the *Flag & Whistle* has searched for articles on the subject. Here we present a notice that was issued to all Oregon state USSF registered referees

Effective January 1, 2014, a new Oregon law requires that referees must "receive annual training to learn how to recognize the symptoms of a concussion and how to seek proper medical treatment for a person suspected of having a concussion" and you are required to follow all guidelines.

*Cont'd on page 7*

# FIFA's Medical Committee proposes new protocol for the management of concussion

Source: FIFA.com Sept 23, 2014

**Ed note:** We present an article on the new FIFA protocol on concussions. Please read the editorial on how effective this protocol is only after you read this article first.

The issue of concussion in football has been broadly discussed following recent high profile cases at the 2014 FIFA World Cup in Brazil™, particularly the incident which involved the German player **Christoph Kramer** during the final match. FIFA has been active in this field for many years, carrying out a number of scientific studies and hosting several conferences with international sports federations which led to clear recommendations on the subject. However, the incidents at the World Cup have shown that the role of team doctors needs to be reinforced in order to ensure the correct management of potential cases of concussion in the heat of the competition.

Following recent discussion with team doctors and Confederations, the FIFA Medical Committee agreed at a meeting held yesterday in Zurich to submit a proposal to the FIFA Executive Committee in order to improve the protocol. Under the proposal, whenever a suspected incident of concussion occurs, the referee will have the ability to stop the game for three minutes, allowing the relevant team doctor to complete an on-pitch assessment and decide if the player has suspected concussion. The referee will only allow the injured party to continue playing with the authorisation of the team doctor, who will have the final decision.

The Medical Committee, under the chairmanship of **Dr. Michel D'Hooghe**, also stressed that an education programme for team doctors, coaches, referees, officials and players should be undertaken.

The meeting of the Medical Committee was also the occasion to report on the 2014 FIFA World Cup Brazil, which was a clear success from a medical perspective with a decrease in injuries and no positive doping cases reported. The number of injuries went down from 2.7 per match at the 2002 World Cup to 1.7 per match at Brazil 2014. Compared to previous editions, less injuries were caused by fouls, which shows the improvements in refereeing.

For the first time at a FIFA World Cup all participating players underwent out-of-competition anti-doping tests in addition to routine in-competition tests. 256 samples were taken in-competition and 777 out-of-competition, with no positive

results. Despite early concerns concerning the shipment of samples to Switzerland due to the lack of an accredited laboratory in Brazil, all samples were delivered on time, with analyses from the lab in Lausanne completed two days before the following match of the respective teams.

The Brazil World Cup also marked another key step in the implementation of the biological profile of athletes, with 1300 players from 55 different countries now included in FIFA's database – 470 of which have already been tested at least twice, and in some cases as often as seven times.

Finally, the Medical Committee discussed the pressing issue of Ebola and how it has been affecting football in several African countries. Based on recommendations by the World Health Organisation (WHO), it was agreed that FIFA would not impose travel bans on the affected countries, but the Committee advised the postponement of any non-essential and non-urgent FIFA courses there.

On the other hand the Medical Committee will urgently explore ways to support the fight against Ebola in the affected countries by using the power of football to help convey important messages for the prevention of the disease. "We will contact and collaborate with WHO to explore possible effective actions to tackle the Ebola prevention", said FIFA Chief Medical Officer, **Prof. Jiri Dvorak**.

## Thibaut Courtois's concussion raises questions over Premier League rules

- Brain injury group Headway voices its concern
- Chelsea defend their medical team's response

*Andy Hunter, The Guardian, 6 October*

New Premier League rules on the treatment of head injuries have been called into question after **Thibaut Courtois** played on for 13 minutes of Chelsea's win against Arsenal on Sunday before being taken to hospital with suspected concussion.

The brain injury association, **Headway**, has expressed concern over Chelsea's handling of their goalkeeper at Stamford Bridge, where Courtois was floored in a 10th-minute collision with the Arsenal striker **Alexis Sánchez** but allowed to continue after a 56-second evaluation from two members of the home team's medical department.

Under the new rules a player should be



Arsenal's Alexis Sánchez, left, tends to Chelsea's goalkeeper, Thibaut Courtois, after a collision. Photograph: Kieran McManus/BPI/Rex

removed from the field of play even if there is only a suspicion of concussion.

Only in the 23rd minute, with the Belgium international sitting outside his penalty area and **José Mourinho** calling for the referee, **Martin Atkinson**, to halt proceedings, did Courtois leave the pitch.

Chelsea have defended their medical team's response and confirmed that Courtois was released from hospital on Sunday night after precautionary tests on a head injury "came back all clear". The 22-year-old was also treated for a minor cut to his ear and is expected to join the Belgium squad later this week for forthcoming European Championship qualifiers against Andorra and Bosnia-Herzegovina.

The Premier League is satisfied that Chelsea's on-pitch medical team, the first-team doctor Eva Carneiro and electrotherapy lead physiotherapist Jon Fearn, followed the head injury protocols put in place at the start of this season.

Nevertheless, the effectiveness of the rules is under scrutiny after Sunday's incident and with Courtois eligible to face Andorra on Friday.

*Cont'd on page 8*

## Oregon Referees

*cont'd from page 6*

These are established by the ORC regarding participation after a concussion is suspected or observed as provided in "https://olis.leg.state.or.us/liz/2013R1/Measures/Text/SB0721/Enrolled" Senate Bill 721.

Assignors cannot assign referees who have not completed one of the approved training courses.

## FIFA's Medical Committee

cont'd from page 7

The Football Association's guidelines state that a player should not be allowed to play for at least six days after a head injury.

A medical working group was established by the Premier League to consider policy on head injuries last season, when [www.theguardian.com/football/2013/nov/06/hugo-lloris-available-tottenham-concussion](http://www.theguardian.com/football/2013/nov/06/hugo-lloris-available-tottenham-concussion) **Hugo Lloris** was allowed to continue for Tottenham Hotspur at Everton despite having lost consciousness in a collision with **Romelu Lukaku**. Fifa's executive committee has proposed three-minute stoppages whenever suspected concussion occurs.

The head of Fifa's medical committee, **Michel D'Hooghe**, made the recommendation after two controversies at the World Cup. **Álvaro Pereira** of Uruguay played on despite being left unconscious after a collision with England's **Raheem Sterling**; and **Christoph Kramer** played 14 minutes of the World Cup final with a head injury – reportedly asking the referee, **Nicola Rizzoli**: “Ref, is this the final?” – before being replaced by the German coach, **Joachim Löw**.

This season, after consultation between the working group, the Rugby Football Union and the British Horseracing Authority, all Premier League matches have an independent “tunnel” doctor on hand to assist club doctors in recognising signs of concussion.

It is now mandatory for all Premier League medical staff to carry a Concussion Recognition Tool, which outlines signs and symptoms of concussion and states that: “Any athlete with a suspected concussion should be immediately removed from play, and should not be returned to activity until they are assessed medically. Athletes with a suspected concussion should not be left alone and should not drive a motor vehicle.”

Players were informed in meetings with Premier League officials before the start of the season that a doctor's decision on whether they had to leave the field of play would be final. Lloris refused at Goodison Park and the brain injury association accused Tottenham of an “irresponsible and cavalier attitude” to the issue.

Headway has questioned whether the Premier League rules are as stringent as initially proclaimed.

The tunnel doctor at Stamford Bridge could have requested that Atkinson stop the game if it was felt the wrong decision had been made on Courtois. That was not the case, with Chelsea's doctor qualified in that regard and Courtois correctly answer-

ing a series of questions put to him after the initial collision with Sánchez.

FA guidelines (not rules, as FA rules must be followed at all levels of the game and doctors would therefore be required to attend grassroots football matches) state that video replays should be consulted, if possible, to determine whether a player has lost consciousness.

**Peter McCabe**, the chief executive of Headway, said: “The new rules introduced this season were designed to ensure no risks to players' health were taken. They clearly state that, ‘If there is any suspicion of the player having sustained a concussion, they must be removed from the field of play and not allowed to return.’ This incident calls into question whether these rules are working effectively. For example, was the third tunnel doctor consulted on the decision to allow Courtois to continue? If so, did he or she agree that there was no suspicion of concussion?”

“From television footage alone it is difficult to assess the severity of any injury and the decision of the medical team assessing the player has to be respected. However, it is hard to understand how a concussion was not suspected following the sickening clash.

“Bleeding from one or both ears is one of the symptoms to look out for that requires an immediate visit or return to hospital following a head injury.

The fact that the bleeding only became apparent 15 minutes after the injury also demonstrates the evolving nature of concussion and highlights why a safety-first approach must be taken with all head injuries.”

### How effective is FIFA's concussion protocol?

*Jake Cohen published on 08 October 2014 on FiveThirtyEight*

**Ed note:** *in light of the new FIFA protocol on concussions, we have presented this lengthy editorial as food for thought. Please keep in mind it's only one man's opinion.*

The football community has become increasingly aware of the dangers of head injuries in recent years, but this summer's World Cup has thrust the issue to the forefront, most notably with German defensive midfielder's **Cristoph Kramer's** concussion during the final against Argentina.

This article endeavours to discuss FIFA's shortcomings with regards to implementing appropriate concussion protocols.

Even before Kramer's injury, however, **Alvaro Pereira** suffered a concussion while competing for Uruguay in a group stage match against England. After a collision with **Raheem Sterling** in the 61st

minute, Pereira was lying unconscious on the ground. Following the match, Pereira stated “after the hit, I only recall that I was unconscious for an instant. It was like the lights went out.”

By the 63rd minute, Pereira had already been looked at by Uruguay team doctors, was given the all-clear, and was back on the pitch.

Recognising that a two-minute examination and evaluation for a player with a suspected concussion by a doctor who answers to the Uruguayan FA is insufficient to ensure player safety, FIFPro, the international players union, called on FIFA to “to conduct a thorough investigation into its own competition concussion protocol which failed to protect” Pereira.

### FIFPro's recommendations for an effective concussion policy

FIFPro's chief medical officer outlined six priorities for what the union believes is required for an effective concussion policy:

The development of a monitoring system to assure and control the application of the Zurich 2012 concussion guidelines;

The systematic completion of a standardised and valid side-line examination (cognitive and physical) on any player suspected to have suffered concussion;

The presence of an independent medical professional on the side line during matches to assess a player with suspected concussion;

The possibility of replacing (temporarily substitute) any player undergoing the side-line examination;

Enforcement mechanism to ensure proper application when procedures are not followed to protect the health and safety of the players;

The introduction of a baseline reference, pre-competition examination (cognitive and physical), which allows important comparisons to be made with any eventual side-line examinations undertaken as a consequence of a suspected concussion.

By any metric, these seem like reasonable requests, if we assume that every stakeholder in football is concerned with ensuring player safety. However, many of the priorities listed by FIFPro are not currently part of FIFA's concussion protocols, and in fact, FIFA appeared to have egregiously disregarded the well-established consensus protocols for assessing concussions in sport.

By focusing on FIFPro's proposed changes and relying on statements made by FIFA officials, medical experts, and **Taylor Twellman**, a former player whose career was cut short by the effects of numerous concussions he suffered on the

Cont'd on page 9

## FIFA's Medical Committee

cont'd from page 8

pitch (and who is currently a noted advocate for awareness and research of traumatic brain injuries), this article will show that not only are FIFPro's proposed changes feasible, but also that they are necessary to better ensure player safety.

### Sport Concussion Recognition Tool

FIFA makes available and puts its name on a pamphlet called the ([www.fifa.com/mm/document/footballdevelopment/medical/01/42/10/50/130214\\_pocketscat3\\_print\\_neutral.pdf](http://www.fifa.com/mm/document/footballdevelopment/medical/01/42/10/50/130214_pocketscat3_print_neutral.pdf)) Sport Concussion Recognition Tool (SCRT) to "help identify concussion in children, youth, and adults."

The pocket pamphlet is primarily to assist laypeople in recognising when an athlete has suffered a head injury and should be immediately seen by a trained medical professional.

The pamphlet was developed by the Concussion in Sport group, which is wholly independent of FIFA, and is comprised of neurologists, other doctors trained in diagnosing and treating head injuries, and domestic and international sporting federations.

It reflects a consensus approach to diagnosing and treating head injuries in sport, and relies on the consensus statement on concussions in sport created at the International Conference on Concussion in Sport held in Zurich in November 2012, and subsequently published in the British Journal of Sports Medicine in April 2013.7

On the timetable for recovery, the consensus statement explicitly states:

"The majority (80–90%) of concussions resolve in a short (7–10 day) period, although the recovery time frame may be longer in children and adolescents."

Further, "persistent symptoms (>10 days) are generally reported in 10–15% of concussions."

Curiously, however, FIFA's chief medical officer **Jiri Dvorak**, advocates a six-day timeframe:

"After a mild head injury it is recommended that players gradually increase their activity levels, ideally making a return to full participation in football six days after sustaining the injury."

### Christoph Kramer

#### FIFA World Cup case

On football's biggest stage, the 2014 World Cup final, Christoph Kramer, Germany's defensive midfielder, suffered a concussion after an inadvertent collision with Argentine defender **Ezequiel Garay**. After a very brief examination by the German team doctors, Kramer was sent

back out, and played for about ten minutes before slumping to the ground and having to be helped off the pitch.

Following the match, Kramer said, "I can't really remember much of the game. I don't know anything at all about the first half. I thought later that I left the game immediately after the tackle. I have no idea how I got to the changing rooms. I don't know anything else. In my head, the game starts from the second half."

The referee, **Nicola Rizzoli**, saw that Kramer was clearly disoriented and unaware of his surroundings. He HYPERLINK "<http://www.theguardian.com/football/2014/jul/17/christoph-kramer-germany-concussion-world-cup-final-2014>" described his interaction with Kramer, explaining: "shortly after the blow, Kramer came to me asking: 'Ref, is this the final?'"

"I thought he was joking and made him repeat the question and then he said: 'I need to know if this is really the final.' When I said: 'Yes,' he concluded: 'Thanks, it was important to know that.'"

The SCRT specifically states that any athlete with even a suspected concussion should be immediately removed from play and attended to by a medical professional.

Further, the SCRT states that a concussion should be suspected if a player exhibits one or more of the following symptoms:

- Loss of consciousness or responsiveness;
- Lying motionless on the ground and/or slow to get up;
- Unsteady on feet, balance problems, falling over, or lack of coordination;
- Grabbing or clutching one's head;
- Dazed, blank, or vacant facial expression;
- Confused and/or unaware of his or her surroundings.

Based on statements made by both Kramer and Rizzoli, it seems clear that Kramer exhibited multiple symptoms of a concussion, and his head injury should have been deemed a suspected concussion.

#### Sport Concussion Assessment Tool

The team doctors should have used the Sport Concussion Assessment Tool (SCAT3) to test Kramer. The SCAT3 provides significantly more intensive baseline testing than the SCRT and is: "intended for use by medical professionals only."

As part of the SCAT3, there are five basic questions about the match that should be asked, including: "which half is it now?" and "what venue are we at today?"<sup>18</sup> Failure to answer any of these questions correctly suggests a concussion, and from Kramer's statements, it is clear that he would not have known the answers.

Ensuring that a player who suffers a concussion does not return to the pitch is of paramount importance, and can actually mean the difference between life and death in severe cases.

Second impact syndrome is often fatal and occurs when an athlete returns to play while suffering post-concussive symptoms and suffers a second head injury.

According to a paper published in the Western Journal of Emergency Medicine: "while rare, [second impact syndrome] is devastating in that young, healthy patients may die within a few minutes."

As discussed earlier, Uruguay's **Alvaro Pereira** lost consciousness after a collision with England's **Raheem Sterling** and was allowed to play on despite **Jiri Dvorak** stating just weeks earlier, when **Hugo Lloris** suffered his concussion, that: "it's a 99 percent probability that losing consciousness in such an event will result in concussion."

Disturbingly, **Dvorak** defended the decision to allow **Kramer** to resume playing, despite heavily criticising Tottenham Hotspur for allowing goalkeeper **Hugo Lloris** to resume play after being struck in the head by **Romelu Lukaku** in a Premier League match last season, calling the decision: "dangerous and irresponsible."

"[Lloris] should have been substituted," said **Dvorak**. "The fact the other player needed ice on his knee means it's obvious the blow was extensive. When he has been knocked unconscious, the player himself may not see the reality. We have a slogan: if there is any doubt, keep the player out."

When you compare Dvorak's reaction to how the Tottenham Hotspur and the Premier League handled Hugo Lloris' injury with how he reacted to how Germany and FIFA handled Christoph Kramer's injury, there is a strange disconnect.

"Take the example of Christoph Kramer. When the incident happened, of course the audience saw it on the television, but the referee and doctors could not see it when they ran to the player, who assured them he was all right."

These were two very similar situations, yet two very different reactions from Dvorak, and the author wonders if the fact that Kramer was playing in a FIFA-run competition (as opposed to a Premier League-run competition) is the reason why FIFA's chief medical officer chose to issue dramatically different opinions on the same issue just weeks apart.

### Taylor Twellman

Taylor Twellman is a former United States international and was named as Major League Soccer's (MLS) most valuable player in 2005 (he also won the golden boot that season).

Cont'd on page 10

# FIFA's Medical Committee

cont'd from page 9

Multiple clubs in Europe made transfer bids for the United States international over the course of Twellman's career, but MLS consistently refused to sell one of its top stars. Three years later, Twellman suffered a severe concussion and the fifth in his career. Despite suffering severe effects (headaches, nausea, fatigue, difficulty reading a book or watching a movie), he attempted to continue playing until 2010, when he made the decision to retire.

After the lingering affects of his injuries forced him to end his playing career early, Twellman founded a non-profit organisation called *ThinkTaylor*, which aims to: "create social change in the world of Traumatic Brain Injuries, by generating increased awareness, recognition and education."

His organisation does whatever it can to help those who are suffering from traumatic brain injuries, whether it be as a support group, helping people find doctors, and as Twellman puts it, being: "a mechanism for which to advocate change."

Twellman is also a broadcaster and football analyst for ESPN, and generously shared his insights for this article.

"FIFA is turning a blind eye" to the concussion problem, shared Twellman. "FIFA doesn't need to go from zero to one hundred, but they're not even going from zero to ten."

## FIFPro's proposals examined

In the following section, each of FIFPro's proposals will be discussed, with a particular focus on how each proposal would better ensure player safety and the logistical feasibility of implementing the proposals.

The development of a monitoring system to assure and control the application of the Zurich 2012 concussion guidelines, and an enforcement mechanism to ensure proper application when procedures are not followed to protect the health and safety of the players.

The infrastructure for a monitoring system and enforcement mechanism is likely already in place, as evidenced by FIFA's Transfer Matching System (TMS), which FIFA president **Sepp Blatter** described as a: "relatively simple online system, but it will have a tremendous impact on the international transfer of players."

Blatter highlighted the benefits of a streamlined online database, noting: "the most important thing is that it increases the transparency of individual transactions and helps us to tackle issues such as the fight against money laundering and the protection of minors in transfers."

The TMS also "aims to enforce adherence to the transfer regulations through a specific sanction system".<sup>29</sup>

A similar system to monitor concussion protocols, where each league would be required to not only submit its concussion protocols, but also a detailed report whenever a player suffers a head injury would likely lead to better accountability and transparency, as well as have a positive effect on player safety.

The presence of an independent medical professional on the sideline during competition with the training required to assess a player with a suspected concussion.

Following Alvaro Pereira's injury (and the Uruguay team doctors sending him back out on to the pitch) *The Lancet Neurology*, a leading medical journal, published an editorial, stating: "the decision on whether Pereira should leave the field for assessment was left in the hands of the Uruguayan team doctor and team officials, but such decisions should surely be taken out of the hands of those with a vested interest in the player's performance." Twellman astutely notes that a medical professional, by definition, can be a dentist or a chiropractor, i.e. someone not qualified to diagnose and treat head injuries. As such, Twellman strongly believes that the protocols need to mandate that the independent doctor is properly trained in traumatic brain injuries.

With regards to ensuring that side line doctors have proper training, there is the logistical issue of providing the necessary training to these, but Twellman is adamant that: "FIFA has the means to get this together." Given the importance of ensuring player safety, Twellman argues that it wouldn't be very difficult to ensure that the side line doctors receive the proper training and points out that the implementation would be similar to that of the fourth official. The systematic completion of a standardised and valid sideline examination (cognitive and physical) on any player suspected to have suffered concussion

At the September 2014 Soccerex conference in Manchester, FIFA Medical Commission Chairman, **Michel D'Hooghe** (who is also the head of sports medicine at Bruges Hospital)<sup>31</sup>, said that he would propose to FIFA and UEFA that matches be stopped for three minutes if a player is suspected to have a concussion.

D'Hooghe's proposal will also include a provision where: "the referee will only allow the player to continue playing with the green light of the team doctor, and nobody else."

UEFA's executive committee approved D'Hooghe's proposal just a few weeks later, and the three-minute assessment period for suspected concussions took

immediate effect for UEFA competitions (i.e. Champions League, Europa League).

While allowing three minutes for assessment appears better than zero minutes, the consensus among both the medical and sporting community is that three minutes is insufficient. The International Rugby Board, for example, recently revised its own concussion protocols to allow up to ten minutes for assessment, after five minutes was deemed insufficient by an independent study that was peer-reviewed and published in the *British Journal of Sports Medicine*.

In addition, the National Football League's concussion assessment takes a minimum of eight minutes to complete.

While attempting to defend FIFA against what he described as "inappropriate" criticism resulting from how it handled head injuries at the World Cup, Jiri Dvorak stated: "the German team doctors are very experienced and Kramer didn't report any symptoms or signs, so he was allowed to play on. Then over the next ten minutes he realised that symptoms were occurring – it's not unusual that there is a delay – and he himself called the doctors for attention."

Setting aside the fact that accounts from both Kramer and the referee show that the player was visibly displaying overt symptoms of a concussion, it seems clear that FIFA recognises that concussion symptoms can often be delayed for ten minutes. What isn't clear, however, is why it only recommended three minutes for assessment.

The possibility to replace (temporarily substitute) any player undergoing the side line examination. While there is a strong case to be made that this could be abused (as a player could feign a head injury late in the match to allow a fresh player to take his place) safeguards can be implemented to reduce this possibility.

For example, the temporary substitution could count towards the allotted three substitutions. In addition, if a manager has already used his three substitutions, the player who is suspected of having a concussion (and is therefore substituted) could be forced to sit out the following week. This would not only help prevent the rule from being abused, but it would also help ensure that the player has time to recover if, in fact, he is diagnosed with a head injury.

Said Twellman: "I am not sure what to make of the substitution dilemma, because I understand both sides, I just know I would love to see advancement on substitutions because it would eliminate any anxiety from coaches or players who feel like making a safe substitution might be letting their team down."

Cont'd on page 11

## FIFA's Medical Committee

*cont'd from page 10*

In comparison to some of these other proposals, which have thorny logistical issues, temporary substitutes while a player suspected of a concussion is being assessed on the side line would appear very easy to implement, and could take immediate effect with a simple approval and statement from FIFA.

The introduction of a baseline reference, pre-competition examination (cognitive and physical) which allows important comparisons to be made with any eventual side line examinations performed as a consequence of a suspected concussion.

FIFPro has advocated for improved pre-competition medical assessments for a number of potential health concerns, and this proposal is in line with FIFPro's platform.

The consensus statement from the 2012 Zurich conference considered this issue and found that: "a baseline assessment is advised wherever possible."

Further, the consensus statement issued a recommendation that: "all athletes should have a clinical neurological assessment (including assessment of their cognitive function) as part of their overall management. This will normally be performed by the treating physician often in conjunction with computerised neuropsychological screening tools."

However, there are issues with baseline testing for the purposes of concussion assessment, specifically the fact that players can easily manipulate the test results by deliberately scoring low on the baseline examination. As former Scotland international rugby player **Roy Lamont** explained: "Players can view the baseline test as an obstacle in their way for getting back playing." "So who is at fault here? It is clearly the player's responsibility to take the test seriously. However, in a job where every game is a chance to win your next contract and keep paying the mortgage, it is easy to understand a player's desire to get back playing."

"The bravado culture... is another driving force. There is nothing more heroic and sacrificial than to declare yourself available for selection in spite of injury and coaches will often commend such behaviour. If the player is not informed of the long-term health implications, he doesn't know what he is gambling."

"The evidence suggests it is a gamble of epic proportions, concussion is linked to a host of neurological problems including increased risk of early-onset dementia." "Concussion mismanagement is best remedied by education. If a player chooses to

cheat the protocol or decides not to report their concussion after being educated of all the possible health risks, then at the very least it is an informed decision."

### Looking ahead to the future

When asked why he thought FIFA hasn't implemented some of these proposals, Twellman presents a harsh reality:

"Why hasn't FIFA done this? Because the moment you address it, what does it do? There's litigation and liabilities." Indeed, positive changes to the concussion protocols could be construed as an admission that the current protocols are ineffective. Twellman argues that litigation is not the main problem, nor is it going to solve the problem. Rather, litigation "opens up a can of worms" that FIFA does not want to deal with.

"The moment FIFA addresses the fact that they have a concussion issue and they need to address it, and then they do address it [by implementing some of these proposals], now all of a sudden, you open yourself up to questions like: 'well, what about heading a soccer ball?'"

"Litigation is part of it, but it's the next step that's [very worrisome to] FIFA. That is, [addressing] heading the soccer ball and the substitution rules – you're changing the essence of the game."

The impact on concussion litigation in the National Football League has had dramatic effects on not only the league, with several rule changes in recent years, but American football as a whole.

Participation in American football at the youth level has decreased nearly ten percent between 2010 and 2012, and over twenty percent at the high school level.<sup>43</sup> This is the largest two-year decline ever recorded, and the chief medical officer of Pop Warner, the largest youth football organisation in the United States, cited concerns about head injuries as the leading cause for this decline.<sup>44</sup>

A lawsuit against FIFA has already been filed in United States federal court by a number of parents of current youth footballers and some current former youth footballers.

The lawsuit alleges that FIFA and the relevant domestic and regional bodies that govern football have failed to fulfil their duties with regards to ensuring player safety and exclusively focuses on youth football (as opposed to professional football).

The plaintiffs are not seeking monetary damages. Rather, they have filed for injunctive relief and have asked the court to compel FIFA to implement stricter regulations and protocols with regards to head injuries in youth football.

Specifically, the plaintiffs have asked the Court to order FIFA to:

- mandate the enactment and enforcement of proper concussion-management practices and return-to-play guidelines;
- mandate substitution rules that allow for evaluation without penalty, and
- mandate limits on heading by players under 17.

### Major League Soccer, US Soccer, and youth players

Major League Soccer, the league in which Twellman spent his entire professional career, has committed to being a leader in safeguarding against head injuries.

The league hired **Dr. Ruben Echemendia**, a clinical neuropsychologist with a wealth of experience implementing concussion protocols in professional sports leagues. Echemendia had previously been in charge of implementing the concussion protocols for the National Hockey League.

Each MLS club has a neuropsychologist who specialises in identifying and treating concussions. While Twellman still sees situations being handled incorrectly, he believes that MLS and US Soccer are addressing the issue, but still has a long way to go before instituting the necessary changes to properly ensure player safety when it comes to head injuries.

"I hope MLS and US Soccer are at the forefront, because that's my roots and my home country, and I want to be a part of that, but we still haven't addressed the issue at the youth level."

"Playing sports at a young age is so important, and you can learn so many social skills."

Twellman points out that in many sports, there are safety limits on what a young athlete can do.

For example, in Little League baseball, a twelve-year-old pitcher is not allowed to throw more than eighty-five pitches in a game, and if he or she throws more than sixty-six pitches, then the player must rest his or her arm for four days.

Twellman raises the point that there is nothing preventing a youth coach from having his nine-year-old players head the ball one thousand times a week.

While Twellman makes clear that he is not advocating banning or restricting heading the football at the professional level, he is also clear on his position that there needs to be different regulations for different age levels, as it has been proven that children are more susceptible to head injuries than adults.

The consensus statement at the Zurich conference recognised this, and advocated for specialised protocols for children who have suffered head injuries.

*Cont'd on page 12*

# FIFA's Medical Committee

cont'd from page 11

## The Premier League's new Rules to address Head Injuries

The Premier League introduced new concussion protocols are better at addressing and treating head injuries on the pitch. The new rules, which came into effect at the start of the 2014-15 season, were largely a response to the criticism the league faced after Tottenham Hotspur goalkeeper Hugo Lloris was knocked unconscious after being inadvertently kneed in the head by Everton's Romelu Lukaku last season. Lukaku, who suffered a bruised knee, left the match, while Lloris, who suffered a concussion, stayed on.

The new protocols include a number of important changes, including placing the decision on whether a player who is suspected of sustaining a concussion may return to the pitch in the hands of the team doctor, rather than the player or manager.

In addition, there is now a third "tunnel doctor," who will use video replays to help the team doctors determine if a player suffered an injury and if the player displayed any symptoms of a suspected concussion.

However, as the doctor is paid by the home club, therefore it could be argued that the doctor won't be truly independent. Twellman has raised concerns over the issue of an independent doctor: "my biggest concern right when I saw the announcement was there not being a neutral doctor making the decisions, because you still have the conflict of interest when a doctor being paid by a team makes personnel decisions."

"You know there will still be pressure on doctors to keep the best players in [the match]."

Indeed, Chelsea goalkeeper Thibaut Courtois recently suffered a head injury during the 5 October match against Arsenal after a collision with Alexis Sanchez. Courtois lay motionless on the ground in the immediate aftermath of the injury, but after a cursory evaluation by Chelsea's medical staff that lasted no more than seventy seconds, Courtois was permitted to play on. 54 Fourteen minutes later, he was taken off the pitch.

Said Twellman, "The problem is this: the EPL yesterday — how is Courtois' incident any different than Lloris? It's not. Both happened on the field, both were blatantly obvious yet this year, with 'new' concussion protocol, the same mistakes were made. Less than a minute of assessment and Courtois was back on the field."

Following a hospital visit, Chelsea announced that Courtois had been given

the "all-clear," following a series of precautionary tests, and cleared him to join the Belgium national team for international fixtures.

While Courtois was not diagnosed with a concussion, he presented clear symptoms of a suspected concussion, and should have been taken off the pitch immediately.

### Conclusion

While Twellman will continue to advocate very strongly for football to change how it addresses head injuries, it does not

appear as though FIFA is willing to enact meaningful changes to its concussion protocols anytime soon.

When asked what it will take for FIFA to start taking head injuries seriously, Twellman bluntly stated: "the tipping point will be that someone of my generation will die at a young age."

"The way FIFA is acting, that's ultimately the way it's going to go. I hope it doesn't get there, and I hope they open up to [better concussion protocols], but I'm not sure they will."

## Premier League Referee Salary 2014

Sameer Arshad

English Premier League is the biggest sporting league in the world, they say.

at least one time a week more than half of the population tune in for some sort of Premier League coverage and on every match in Premier League there are multi millions of pounds riding with all these betting companies living off Premier League in the United Kingdom.

We all know how much players and managers are getting paid, ever wondered how much the main man in highly profile game "the Ref" gets paid, weekly, monthly, or even annually? No Howard Webb jokes please. Lets take a look at the EPL Refree's salaries.

**Basic Annual Salary – £38,500**

**Match Fees – £1,150**

Average annual income – £70,000 to £85,000 (basic salary + Match fess)

So in a single season Premier League referees can make around £70,000, which is two weeks average salary of a Premier League footballer.

That's how much Footballers are being paid at the moment

In England since 1998, English FA decided to form a professional group of referees who are officiating premier league or lower division games.

Back in the days like ten years ago, referees were paid a basic retainer fee of around £33,000 but now its increased to £38,000 to £40,000 depending on the experience. But thats not all yet.

There are match fees as well which account for £1,000 a match in Premier League and £500 in Championship.



National AR Chris Wattam in South Surrey at U-18 Ontario's Ajax vs BC's Mountain side



Referee Pierre-Luc Lauzriere discusses injury with AR Stefan Tanaka-Freundt at same game.

### COMING NEXT ISSUE

**Dieter Freundt went to Germany, attended some Referees' Meetings! What were his Impressions?**