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Deadly Russian roulette on the fields of sport

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Football teams — high school, college and pro — are back at preseason training, and that brings back to mind the tragic deaths last year of football players Korey Stringer, De Vaughn Darling, Eraste Autin, Rashidi Wheeler and Curtis Jones.

While I don't want to appear morbid, it's almost a certainty the sports world will see more unexpected fatalities in the future. Think of it as a new reality TV show called "Sudden Death" with thousands of active athletes entered as contestants.

In an age of anabolic steroids, creatine, ephedrine and androstenedione, the early favorites to win this game are the players who come in fully loaded.

During the last two decades, sudden death has taken its premature toll on young, active athletes — from basketball player Len Bias in 1986 to baseball's Darryl Kile this season. And in between were Hank Gathers (1990), Reggie Lewis (1993), Dan Turk (2000) and last year's football five.

If you count just these high-profile names alone, the average is more than one active participant death every two years. And the rate of these highly publicized sports deaths is increasing. In fact, since 1995, nearly 20 high school, college and pro football player deaths have occurred.

Let's not discuss whether the players involved were abusing substances (including marijuana or cocaine) or whether they suffered from asthma, abnormal thickening of a ventricular wall, obesity or heat stroke.

The guys listed above died, others died, more will die.

Strangely, whenever sudden death happens, many of the teams and leagues involved generally suggest the fatality was unavoidable. Is it true?

According to the National Center for Catastrophic Sports Injury Research, more than 130 athletes died of heart problems between 1985 and 1995 with 62 percent of the fatalities involving high school students. Between August 1994 and February 1995, 14 boys who had been given physicals and cleared to play high school sports died from sudden cardiac arrests.

The big question is why?
One possible reason is today's athlete is under greater physical, mental and emotional stress and using more pharmaceutical or physiological aids than ever before. If Jose Canseco is to be believed, four out of every five baseball players are using something to get an edge.

Despite this sweeping indictment, many athletes, owners, leagues or sanctioning bodies are looking the other way and playing a contemporary game of Russian roulette.

In 1995, Dr. Robert Goldman asked 198 Olympic-caliber American athletes a simple question: If they could take an illegal drug without the risk of getting caught and could win gold medals but would die from the drug five years later, how many would take the drug. The result? More than 50 percent said they would trade their lives for gold. Death was no deterrent when fame and athletic accomplishment were on the line.

Mix drugs with modern stress and the odds of sudden athlete deaths are obviously increased. In the medical community, stress is often called the "hidden killer," but in the sports world it's barely acknowledged. Athletes have been taught to ignore fatigue or depression (pretty decent warning signs) and "take one for the team."

And we know complaining about physical discomfort constitutes weakness in a testosterone world.

Darryl Kile's former teammate Brian McRae told Baseball Weekly: "He took the ball every day for 11 years without shutting down. As much as he got booed and criticized in Colorado, he still took the ball. And never once did he complain. Never."

Because professional athletes are highly visible and focus intensely on their measurable performance, they routinely push their limits with aerobic and anaerobic workouts, preseason training, game simulations and, for some, chemicals.

As the money, ego and privilege associated with athletic achievement increases, so does the stress.

Said another way, while owners and coaches expect athletes to perform at optimal capacity and wink knowingly at drug use, the truth is that many athletes and their teams could be ignoring notable reasons for frequent injuries or even death.

So a few die.

That's not good for business. Leagues, teams and governing bodies must pay more attention to this rash of athlete fatalities and work harder to explore the physiology of all their athletes. Management can't afford to stand in darkness while athletes die in the sun.

An active athlete's death almost always brings related costs such as fending off lawsuits, increased insurance premiums, lost team performance and lost income from missing the playoffs.

Like I said, it's not good for business.

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