

## Testimony of David R. Weir before the House Judiciary Committee

October 28, 2009

Mr. Chairman, members of the committee, thank you for inviting me here today. The Institute for Social Research at the University of Michigan is committed to the use of social science survey research to serve the public interest and we are always ready to respond to you as representatives of the public interest. I appreciate the opportunity to set the record straight on our study of retired NFL players. Faced with the aging of the US population, we are all looking for policies and programs to serve the needs of people after a lifetime of hard work. This unique population of retired football players is an intriguing place to look for challenges and solutions. Our study had two broad goals. The first, at the request of the NFL, was to describe the population of retired players across a wide range of topics from marriage and family life to health to economic circumstances. In an environment of sensationalized press accounts, they sought some basic facts on which to create or improve programs to serve the needs of retired players. The second goal, at our suggestion, was to lay the foundation for future research that could follow up on specific health problems or other areas of need. I'm pleased to say that the NFL agrees with us that further research on the dementia issue is warranted and we are now actively planning that follow-up effort.

Our initial telephone survey found that retired professional football players are, to put it mildly, a diverse and fascinating group. On average, they are highly accomplished, productive members of their communities, their churches and their families. They suffer from aches and pains in shoulders, knees, backs, and necks that make difficult activities that many of us take for granted. Most are in comfortable financial circumstances, though many report having received bad financial advice somewhere along the way. Most have health insurance and are able to get the health care they need. They are proud of their achievements and their time as professional athletes.

For every such generalization there are individual exceptions. There are retired players in poverty or without health insurance. Some don't particularly like the NFL. There are some who claim their knees don't hurt. This diversity is particularly true for the issue of cognitive impairment and dementia that is the focus of the hearing today. In our telephone interviews, 96% of NFL retirees report that they don't have such problems. But 4% do and in some cases the disability and the need is profound. Depending on the severity of the problems, which our study could not assess, these numbers may or may not indicate an elevated risk from a career playing football. We can't draw a conclusion and no responsible scientist would do so. Those who assert that the rates reported by former players definitively show a higher risk do so by greatly understating the extent of dementia and cognitive impairment in the general population. I wish it were rare, but it is not. It is a major public health challenge facing the country.

The followup study will address the major limitations of the telephone study with regard to the measurement of dementia and cognitive impairment. It will utilize a design and methods similar to ones we have used in a much larger study known as the Health and Retirement Study, which I have the privilege to direct at the University of Michigan with funding from the National Institute on Aging. The methods and results of this approach to diagnosis of impairment and dementia have been published in peer-reviewed scientific journals. It is done in the home by trained professionals and does not require travel or visits to clinics that might exclude some participants. With respect to individuals in the NFL study who did report a memory-related illness it will be important to distinguish between the more severely disabling condition of dementia and the more common but less disabling mild cognitive impairment. The needs of these two groups are very different and we will assess the extent to which the 88 plan created by the League and the Players Association is meeting those needs. With respect to individuals who did not report any memory-related illness we will seek to determine whether there is any significant dementia or impairment in a sample of cases. By comparison to studies using the same methods in the general population we will be able to say to what extent retired professional football players differ in their rates of impairment and dementia.

I understand the intense interest in this issue, and the impatience to have definitive answers. I have many friends who are parents of teenage athletes and I know how much it worries them. We will not delay, but getting it right is more important than getting it fast. To those retired players who we will ask to participate in the next stage of this research I make the promise that we will protect your privacy and we will report the truth.

Thank you, Mr. Chairman.