

7TH INNING STRETCH

WITH DR. CHARLES BUSH-JOSEPH

Dr. Charles Bush-Joseph has been the official team physician for the Chicago White Sox since 2003. A graduate of the University of Michigan Medical School, he is currently a Professor at Rush University Medical Center and the Associate Director of the Rush Orthopedic Sports Medicine Fellowship Program. Long involved in the care of high school, collegiate, and recreational athletes, Dr. Bush-Joseph also is the Associate Team Physician for the Chicago Bulls. Through his experience with high profile professional athletes, Dr. Bush-Joseph was elected to the Major League Baseball Medical Advisory Board. This exclusive group of team physicians advises the MLB Commissioner on medical policy and emerging trends in training and the medical care of elite athletes.

1ST INNING: ON GETTING INTO SPORTS MEDICINE

I've been active in sports all my life and, when I went to medical school, really didn't know what I wanted to do. At the start of my fourth year, my last rotation was orthopedic surgery and I discovered they had a blast taking care of athletes. After I finished my residency, I did a fellowship in sports medicine and knew immediately that was what I wanted to do long term.

Like most young sports medicine physicians, I started out taking care of high school and junior high teams. Gradually I became more prominent and was taking care of a lot of high school and college athletes when I was approached by White Sox head athletic trainer Herm Schneider, who told me the White Sox were looking for a new team physician. I went through the interview process and landed the job.

2ND INNING: ON WORKING WITH PROFESSIONAL SPORTS TEAMS

Sports medicine is a lot of fun because for the most part, the patients want to get better. Also, they usually have an injury or illness that our medical techniques are helpful in fixing. We are all fans and we want our team to be successful, so we do everything we can to help our players get the best care and play to their best ability.

3RD INNING: ON THE CHALLENGE OF A HIGH-PROFILE CLIENTELE

Well, they're just like any other patient and they have similar problems like other patients, but their outcomes are much more critical to their job and the team's success. We have to do things as quickly as possible, for the benefit of both the team and its fans.

4TH INNING: ON COMMON PITFALLS FOR BASEBALL PLAYERS

The majority of player problems are a result of repetition and over use. Usually injuries from those causes come in the shoulder or the elbow. It all has to do with training and throwing techniques.

5TH INNING: ON AT-RISK PLAYERS

Pitchers are clearly the most at risk and certainly where most of our concern falls. I don't think the human body was designed to throw the ball at 95 mph, 100-120 times a game. As a result of that, they are more at risk for these types of injuries than others.

6TH INNING: ON YOUNG ATHLETES

The key for young athletes is to develop slowly with good instruction. Something as sophisticated as pitching a baseball you have to learn carefully and with proper training techniques. Most of the injuries we see are usually due to training or technique errors.

Also, the biggest problem we see nowadays is really the 12-month, single-sport athlete. The young athletes who over specialize too soon are much more prone to developing overuse injuries and to having serious problems. There is a big emphasis now in sports medicine societies on stopping the practice of pushing kids too hard at too young of an age.

7TH INNING: ON THE SEASON-LONG GRIND

Baseball is more of a marathon than a sprint – most of the problems occur because guys wear down or develop overuse symptoms that they never have time to recover from because there is always another game tomorrow, and another game after that.

