The Thread That Runs Through Us!

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Thanks, Ned, for the kind introduction. I cannot thank you enough for the experience and leadership you have given AOSSM. Following you is a daunting task, but you have provided me and the AOSSM Board with the sound guidance we needed to continue to move our organization forward. I must say traveling with Ned is like being with a World Cup superstar. I think he should run the United Nations because every time we traveled to a foreign country, people came up to him with a hug and a good story. The membership should be happy to know you will serve on the Board one more year.

I also want a word of remembrance for our great friend and Past President Allen Anderson, whose tragic death was a loss to the AOSSM family. I am very happy his wife Candy is here to receive Allen’s award and induction into the AOSSM Hall of Fame. Thank you, Allen, and thank you, Candy.

Next, I want to thank Program Director Nik Verma, the Annual Meeting Program Committee, and all the dedicated AOSSM member volunteers who share their time and talent in service to the education, research, and fellowship mission of our Society. The quality of our programs is truly world class and admired by sports medicine societies around the world. And, of course, special thanks to our 2 leaders of the professional team, Greg Dummer and Camille Petrick, in their support of Nik and the program committee and keeping our great Society moving forward on all fronts.

I have asked many former presidents and friends how to give this speech and received varying responses. Several of the past presidents suggested I use this opportunity to report on the status of the Society and its direction. Some suggested I tell a personal story. Others suggested an inspirational message such as an insightful speech given by Jo Hannafin several years back.

I read every presidential address dating back to the first one by Don O’Donohue in 1973. Don spoke of a group of like-minded members, including Jack Hughston and Don Slocum, who among others first started this Society, not with the intent to rebel or break away from the AAOS but to nurture and develop the new science of sports medicine. The speeches that followed that first one illustrated the kind of member-inspired and member-driven progress that I am sure would make Dr O’Donohue and the founding fathers proud.

Here we are 46 years later, and the AOSSM that they envisioned continues to shape a bright future, and because of that, I decided to take this opportunity to talk a bit about our Society’s current priorities and to remind everyone of the many different external influences that could change the way we practice medicine. I want to inspire you to continue to carry out the mission of our Society by achieving meaningful scientific advancements and embracing the excellence, honor, and integrity of those who practice sports medicine.

Richard Feynman noted that “science is what we do to keep us from lying to ourselves.” It’s easy to become enamored with the latest tricks and anecdotes in medicine, but real science, supported by high-level evidence, is hard work. Our members set themselves and our Society apart with our tried and true approach: providing open forums for thought leaders, identifying the gaps in knowledge, developing hypotheses, and facilitating collaboration to answer important questions.

This thread runs through AOSSM at all levels, and currently, it laces together 4 areas of priority importance.

RESEARCH

Since 2003, AOSSM members have improved patient care by funding groundbreaking research. Investments totaling $3.2 million have strengthened the evidence base for the...
practice of orthopaedic sports medicine. AOSSM grant-supported work conducted by think tanks, clinical studies, and promising research teams is showcased in more than 120 publications with more than 700 citations. Web-based tools enable AOSSM members to collect important data from their peers, and research workshops at annual meetings provide members with solid evidence-based foundations on which to build their own research.

This past year, through significant member input and thoughtful work by the AOSSM Research Committee, chaired by Matt Provencher with support from the Director of Research Kevin Boyer, yielded a refreshed research mission and a recharged research agenda that defines strategic and operational goals to ensure transparency and communication while allowing program fluidity and responsiveness. Simultaneously, sports medicine research priorities are assessed on an ongoing basis. At the top of the current research priorities list are biologics, osteoarthritis, return to play, outcome measures, and the value of sports medicine interventions. As you can see, new grants for 2018 will fund critical research in the area of biologic allograft and the vexing return-to-play issue. More information on our Research Agenda is now available on the AOSSM website.

None of these activities occur without the generosity of our membership and our corporate partners. Committee Chair Pete Indelicato and Development Director Tom Heneghan lead the efforts of many of our members to build these critical relationships. For 2018, our corporate and foundation partners have invested $1.2 million to support the research and educational goals of our Society. We continue to develop these resources to expand our reach for society’s benefit.

EDUCATION

Research and education form the backbone that allows our Society to stand tall. The ongoing evolution of both has direct impact on our members and their patients. This past year, AOSSM Education Chair Steven Cohen and Director of Education Heather Hodge made impressive strides in reorganizing the business and the content of our educational programs. Results were immediate and very positive.

Our Surgical Skills Courses generated a net income of $80,000 this year after Steve and Heather scrutinized expenses and appropriately adjusted registration fees. In addition, marketing support was streamlined and increased, and a new partnership with the ISAKOS was launched. This collaboration resulted in a more than 250% increase in international attendees at the Hip Course in April. We are expecting similar interest in our upcoming Orthobiologics Course chaired by Brian Cole and Jason Dragoo this fall.

The Sports Medicine Board Review Course also enjoyed its highest attendance since 2011. We continue to work in close collaboration with the American Board of Orthopaedic Surgery to ensure this course continues to keep pace with the changes, challenges, and choices shaping maintenance of certification.

Sport-specific courses also gained important traction this year. In October, for the first time in 10 years, we held a successful multidisciplinary baseball course at the Orthopaedic Learning Center with former Chicago Cubs pitcher Ryan Dempster as the keynote speaker. In addition to our ongoing collaborations with the National Football League and the National Hockey League, plans are beginning to take shape to debut a new course with Major League Soccer in September 2019.

In addition to AOSSM’s live course offerings, we now have a catalog of over 130 online activities available for CME credit, and efforts are underway to build an even more robust portfolio of online education.

Reinforcing these valuable programs is the continued high quality of our complement of scholarly journals. Their global reach and impact remain unparalleled, thanks to the vision and diligence of our editors, Dr Bruce Reider, Dr Edward Wojtys, and our Director of Journal Publishing Colleen Briars, and the thousands (literally thousands!) of experts who contribute their knowledge every year as authors and reviewers. Last year alone, we published 777 rigorously peer-reviewed articles, documenting advances that pave new pathways into the science and practice of sports medicine. Our flagship journal, AJSM, continues to receive the #1 impact factor in all of orthopaedics. Our online journal, OJSM, has 23 international sports medicine societies partnering with AOSSM to make it a truly global, open-access journal with far-reaching impact.

The issues of the day require us to look beyond our own organization for answers to the problems of graduate medical education, board certification, and specialty society cooperation. Over the past year, the AOSSM Board has developed deeper working relationships with our partner organizations including AAOS, NCCAA, NATA, SPTS, and AANA. Regular presidential line meetings with these groups are leading to policy and education initiatives to improve the lives of our patients and the efficiency of our education. Jeff Dugas, together with Senior Manager for MOC and Fellowship Education Meredith Herzog, has led the charge to modernize the education of our fellows with closer interaction with the ACGME and ABOS. I believe that surgical skill verification using validated methods is necessary for all in training and practice to maintain the confidence of patients and the public at large.

REBRANDING INITIATIVE

Like every successful organization, from time to time, it’s important to re-evaluate the way we present ourselves to our members and their patients. What we say, how we say it, and how we dress the part underscore our perceived relevance.

In 2016, we formed a marketing task force that included AOSSM Communications Chair David Geier, Marketing Communications Director Lisa Weisenberger, and web and social media guru Joe Siebelts. They led a critical reassessment of our brand platform that began with an audit and analysis of our current messaging and our marketing
became hooked on narcotics after a high school ACL injury. Long saga of addiction of Connor’s brother Dan, who 28, died of an opiate overdose. His parents told me of the found out that months later, his older brother Dan, age psychiatrist. While Connor responded well to counseling, I soon noticed that depression started to creep into his persona, and pain management was becoming a problem. Luckily, social trends of early sport specialization and loss of free unstructured play have had serious repercussions. We can all work together collectively and as individuals to address this rising epidemic of overuse injuries in kids. That said, our responsibilities run deeper than just this program.

I know members of AOSSM are all committed to excellence and work hard to maintain impeccable ethical standards, which is why I personally find the taint of recent news headlines infuriating. We must all, each and every one of us, become more vigilant than ever before about protecting our patients from predators. We’ve seen how vile behavior can creep quietly under an organization’s radar. Whether that organization is a youth program, a high school, a college, or the US Olympic Committee, these are not indecencies. These are crimes, and we need conscious foresight, not regretful hindsight, to proactively combat the consequences that can devastate patients, practitioners, and organizations for generations.

The national scourge of opiate abuse also warrants our strict attention. Older physicians remember the mandate of the 1990s that “pain was the fifth vital sign,” leading all to a lax approach to the use of narcotics. Many felt our role was to eliminate any pain to achieve the “smiling face.” Several months back while treating Connor, a young high school athlete who suffered a knee dislocation, I noticed that depression started to creep into his persona, and pain management was becoming a problem. Luckily, I sensed a growing problem and had Connor see a psychologist. While Connor responded well to counseling, I soon found out that months later, his older brother Dan, age 28, died of an opiate overdose. His parents told me of the long saga of addiction of Connor’s brother Dan, who became hooked on narcotics after a high school ACL injury.

Last year, over 60,000 Americans died as a result of opiate overdose, of which 40% were with prescribed narcotics. As providers, we are on the front lines of this epidemic and continue to take responsibility through our research, education, and with every patient interaction.

The concept of social responsibility dovetails with the AOSSM concept of family. We are a family—an extended family of colleagues that we’ve come to know and trust like we do our immediate families. Look around the room, and you’ll see many familiar faces, not just of AOSSM members but of husbands, wives, sons, daughters, and even parents. We owe it to them and to each other to continue to care for the threads of respect and trust that connect us.

I was born with a tremendous advantage that sadly many don’t have today. My advantage was not wealth, social status, athletic talent, or even good looks. My advantage was being born into a loving family that nurtured education, hard work, and most importantly respect of our fellow man. My parents were from large immigrant families, who came to America with nothing more than grit and determination to make a better life. Growing up the fourth of 6 children in a small ethnic neighborhood with a K-12 Catholic school, I was blessed to have 60 first cousins within a 5-mile radius. Love was everywhere, and my mom and dad built a small family business that required all hands on deck. The economy dived in the 70s, and my parents lost their business, forcing great change. Their resiliency and family support kept us together and allowed me to go to the University of Michigan, where opportunity blossomed. My mother and all 5 of my siblings are here today with their families and is testament to love that our parents instilled in us.

During my first year of medical school, I met the woman of my dreams, who has been the best partner any man could ever hope for. Vicky is a beautiful, intelligent woman of the highest character, who despite being a busy adoption attorney and law school instructor, raised 3 wonderful children, of whom we are so proud. To this day, her desire to “improve the world as we know it” takes her throughout the country and around the world to help others. We are so proud that our children have learned that mindset of service and humility. Katie with her partner Chris, Sam with his wife Amber and son Benjamin, and our youngest Jack are a daily source of pride and happiness.

It is amazing the influence we have on others, and that must be respected. The relationships we develop will change lives and careers. I was going into internal medicine until as a fourth-year medical student, I met a young resident named Ed Wojtys. Ed and the ortho staff at Michigan opened my eyes to a new and exciting world, for which I am forever grateful. Starting residency at Rush, I had the great fortune of a new young sports surgeon joining the Rush staff at the time when only total joint and spine seemed to matter. Bernie Bach was determined to not build a practice but build a department and asked me to be his first hire. That allowed me to spend 15 months with Frank Noyes in Cincinnati. Frank and his colleagues, including Tom Lindenfeld and Ed Grood, taught me the
rigors of well-designed basic science and clinical research. I believe no one has contributed more to the science of knee surgery than Frank Noyes, and we all owe him a debt of gratitude.

Over the past 30 years, I have had the good fortune of working with talented, energetic physicians, who have helped to build the Rush sports medicine program to one of great respect. While I owe my career and success to Bernie, I benefitted from a team including Tony Romeo, Brian Cole, Greg Nicholsen, Nik Verma, and others who strove for research and clinical excellence in a private practice model.

Learning from leaders such as Jorge Galante and Gunnar Andersson, I sought out leadership roles that helped prepare me for this role as AOSSM president. I learned that emotion is the enemy that clouds our judgment and leads to actions of regret. Unfortunately, we live in a time of extreme tribalism. Many see the world from the lens of us/them, black/white, blue states/red states, and knowledge/ignorance. While I am not color blind, I see the world as shades of gray. Each of us has experiences and priorities that shape our judgment, but we must not succumb to conformational bias and seek out only those with thoughts and opinions similar to our own. We must engage all sides of the argument.

The thread that ran through my career was tied to AOSSM. As to what Don O’Donohue said back in 1973, the AOSSM was formed to allow “like-minded individuals coming together to develop and promote the science of sports medicine.” While we need to push the science forward, we must avoid the fads or trends that put our patients at risk. We need to challenge ourselves to provide value of our interventions to both patients and society.

Infused with our rich heritage and inspired by our promising future, AOSSM is indeed the thread that runs through us all. It ties me to everyone in this room and each of you to the other. It fuels our passion for excellence and makes success a reality for our patients and ourselves. Our membership is blessed with tremendous talent, many with willingness to donate their time and passion to our Society and our patients. We are in good hands as our next president, Neal ElAttrache, is a man of integrity and honor. We all pledge our support to his leadership.

I encourage all to attend tomorrow’s talk by our guest speaker Bill Walton. Bill, with his dynamic persona, reached the pinnacle of athletic success and yet is now known for his social commentary in the athletic world. He has also undergone 38 surgeries and has experience with sports medicine providers of every discipline.

Thank you for the honor of serving.