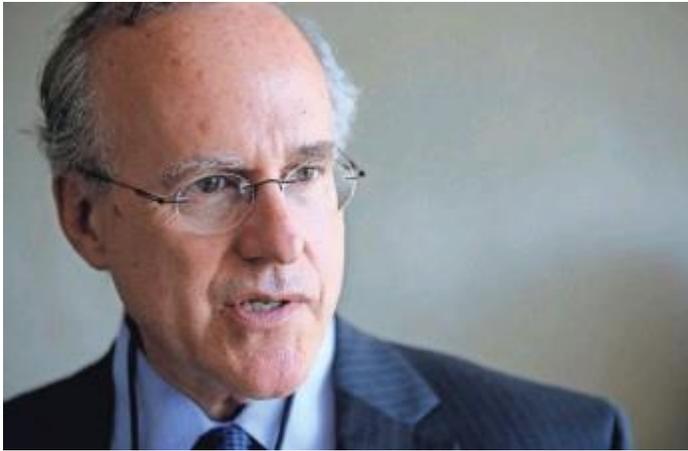


CTE study significant

Answers on brain disease ultimately will overshadow controversy, Nancy Armour writes,

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“If we succeed in our goals, then it’s a game changer,” says Robert Stern, who leads a CTE study.

Something was lost in the furor over who made what phone calls when and why the NFL went back on its word.

The day is coming when former players won’t have to wait for an autopsy to explain the mood swings, the memory loss, the depression and, in the very worst of cases, the urge to kill themselves.

That breakthrough will lead to others. An explanation for why some people exposed to repetitive head trauma get chronic traumatic encephalopathy and others do not and a test to indicate which group someone falls into. Treatments that can slow the progression of the disease that has reduced dozens of former football players — and soccer players and hockey players and members of the military — to shadows of themselves.

Maybe even stop CTE completely.

“If we succeed in our goals, then it’s a game changer,” Robert Stern, the clinical core director of Boston University’s Alzheimer’s disease and CTE Center, said last week after announcing the start of the seven-year study the NFL is accused of trying to quash.

The NFL has much to answer for when it comes to the concussion crisis. But if the CTE study Stern is leading delivers on its promise, the attempts to derail it will be the leagues worst failing.

Building on other research, the new study is intended to identify a diagnostic test for CTE. A group of 240 males — half of whom played in the NFL, 60 who played in college and 60 who had no exposure to repetitive head trauma — will be put through a three-day battery of tests, including brain imaging, spinal taps and samples of blood and saliva.

The NFL players and the control group will be retested after three years.

The tests, which begin next month, will be done at four sites across the country. Experts in every aspect related to repetitive head trauma are involved.

“I think we’re going to really learn a lot and discover a tremendous amount of information that will give us some of the answers of what is CTE in lifetime and, yes, we can diagnose it,” said Martha Shenton, director of the Psychiatry Neuroimaging Laboratory at Brigham and Women’s Hospital in Boston and another of the study’s lead researchers.

“The pathophysiology is another question,” Shenton added, referring to the progression of a disease. “But you can’t look at the pathophysiology until you have an entity that you can identify.”

The \$16 million study was supposed to be funded as part of the NFL’s \$30 million grant to the National Institutes of Health. But the league balked at it, according to ESPN, because it is being led by Stern, a critic of the NFL who submitted an affidavit in support of the former players in the class action lawsuit over concussions.

But in a sign of the study’s importance and potential impact, the NIH funded it anyway, using taxpayer dollars.

“I’m really just thrilled that it’s funded. That’s really it,” Stern said, declining to further the fray with the NFL. “Controversies are not the focus of what I’m doing. I’m trying to get those answers as quickly as possible.”

That, after all, is what it’s all about.

The damage to former players has already been done, and the time for trying to dodge the fallout is long over. What matters now is finding treatment so the suffering can be lessened and, ultimately, eliminated. Researchers are getting close, with the timeline already shrinking from decades to years.

What the NFL fails to realize is answers — transparency — only help its cause. The sooner doctors can tell someone he will or won't be at risk for CTE, the better it is for the long-term future of the NFL. But that's not possible without first being able to diagnose the disease while someone's alive, and researchers are confident this study will allow them to do that.