



Robert F. LaPrade, M.D., Ph.D.

Photo: Joe Kania

INSTITUTE INSIGHT

Orthopaedist Robert LaPrade, Biomechanics Research Team, New Board Members Boost Steadman Philippon Toward Becoming the World's Premier Sports Medicine Institute

By Mike Egan, Chief Executive Officer, Steadman Philippon Research Institute

Over the past three years, we have been especially efficient with the Institute's expenditures because of the nation's economic downturn. Nevertheless, due to the continued generosity of our donors and corporate friends, and through sound financial management, we were in a position to successfully recruit Robert LaPrade, M.D., Ph.D., from the University of Minnesota, where he was an orthopaedic surgeon, professor, and director of the University's Biomechanics Department.

Dr. LaPrade is an internationally recognized clinical scientist and board-certified sports medicine orthopaedic surgeon who joined the Clinic and the Institute on May 1, 2010, as Director of the Biomechanics Research Department. While

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Photo: John Kelly

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an extremely busy clinician known for his outstanding diagnostic and surgical skills, Dr. LaPrade is most known for his passion for research and utilizing his findings to improve the ability to diagnose complex cases, optimize surgical techniques, and provide for better patient outcomes. With more than 100 scientific manuscripts, 50-plus invited articles and book chapters, and one comprehensive textbook on the knee, he is one of the world's most published

researchers in orthopaedics. Dr. LaPrade has special expertise in complex knee disorders that include "back-of-the-knee" injuries, ligament injuries, ACL reconstructions, meniscal transplants, knee osteotomies, and osteoarticular allografts, among other knee injuries.

Your generosity has made it possible not only to secure the services of Dr. LaPrade but also of three members of his research team who were carefully chosen to join him in the Biomechanics Research Department at the Institute. They are Coen Wijdicks, Ph.D., Deputy Director and Senior Staff Scientist; Kyle Jansson, B.S., Research Engineer; and Benjamin Westerhaus, B.S., Research Associate.

Rob was introduced to me by my brother Pat and Dr. Lars Engebretsen several years ago and now is a personal friend of mine. His ascension in academics has been meteoric. He understands the unique opportunity that his new position presents. He has always had a deep respect for Dr. Steadman, Dr. Philippon, and the rest of our team, and he will be a very positive addition to the Institute and the Clinic, both of which are extremely important to Drs. Steadman and Philippon in terms of succession and legacy.

As part of the recruitment process, we committed to a multimillion-dollar expansion of our Biomechanics Research Department, which will include a new motion lab, an in vitro biomechanics lab, and an expanded bioskills lab that will be used for

What You Should Know About Your Bequest and Our Name Change

A number of you have called to inquire how our name change might affect the distribution and receipt of your bequests that named the Steadman Hawkins Sports Medicine Foundation beneficiary of your will, trust, retirement account, or other financial instrument.

First, we want to thank all of you who let us know you have remembered the Institute in your plans. We are so pleased that in wanting to make a difference in our future research, you decided to continue your support of the Institute beyond your lifetime. Thank you.

If your bequest is to the Steadman Hawkins Sports Medicine Foundation and you have the following included in the bequest language, your estate will be distributed to and accepted by the Steadman Philippon Research Institute:

- The city and state: Vail, Colorado and/or
- The address: 181 W. Meadow Drive, Suite 1000, Vail, Colorado 81657 and/or
- Our tax ID number: 88-0245022

When you do update your will or other estate plans, simply use our new name (Steadman Philippon Research Institute) and include the information above as well.

Our conversations led us to encourage our donors to review their will every two to five years. Keep in mind these circumstances that make it important to review your plans and keep them up to date:

- You want to or need to change your personal representative or executor.
- You have experienced a change in marital status.
- There have been births or deaths among your family and friends.
- Your children are now grown.
- Your estate has had a dramatic change in value.
- You want to add or change beneficiary information (names, locations, distributions).
- You have moved.
- New laws have been passed that affect your estate.

teaching. It will consist of 8-10 mini-operating stations for visiting clinicians, scholars, and fellows. We are also very pleased that the Vail Valley Medical Center, a significant and long-term supporter, is partnering with the Institute in this endeavor.

TWO NEW MEMBERS HAVE AGREED TO JOIN THE STEADMAN PHILIPPON RESEARCH INSTITUTE BOARD OF DIRECTORS.

Greg Lewis, president of Greg Lewis Communications, brings a wealth of experience in sports media and communications to the Institute's Board. Greg, a network sports EMMY winner, conducts business with the sports divisions of NBC, CBS, ESPN/ABC, Fox and Fox Sports, and other media outlets. He is also CEO of FanCandy Games, launching fall 2010, which creates, operates, and markets unique prediction games platforms for major media, high-profile events, and sponsor partners across multiple platforms. Greg has also agreed to lead communications efforts for the Institute from his position as a Board member.

Frank Krauser is the recently retired president and CEO of NFL Alumni and CEO of Pro Legends, Inc., a subsidiary that engages in marketing activities to support NFL Alumni projects. Frank's mission of keeping former NFL players active, a concept that was enthusiastically promoted by another Board member, the late Jack Kemp, is very much in line with our vision of keeping active people active. Frank will ensure that

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Photo: Barry Eckhaus

Institute CEO Mike Egan accepts a significant grant for research from Reinhold Schmieding, founder and President of Arthrex, Inc., a leading international sports medicine company providing surgical solutions to orthopaedists worldwide.

Institute Research Leads the World European Society of Sports Traumatology, Knee Surgery, and Arthroscopy (ESSKA) presents major award and recognition at the 14th Congress 2010, Oslo, Norway

TWO "STAR" PAPERS COMPETE FOR BEST PAPER OF THE ESSKA CONGRESS 2010, JUNE 10.

As evidence that the Institute research is leading the world, Coen Wijdicks, Ph.D., Deputy Director, Biomechanics Research Department, was recently awarded (June 12) The Nicola Foundation Young Researcher Award. The award is given to the best scientific manuscript in the fields of Knee Surgery, Sports Traumatology and Arthroscopy

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We invite you to let us know when you include us in your plans so we can welcome you to The Founders' Legacy Society. The Founders' Legacy Society is a group of friends and supporters who, as strong believers of our work today, have included the Institute in their estate plans to ensure our future research and treatment of degenerative joint disease and biomechanics, training, and education.

The Institute will continue its long-standing philosophy of investigating and directing the body's healing ability to create healthier and more active lives around the world. However, if you have any questions about your bequest, please contact John McMurtry, Vice President, Program Advancement, at 970-479-5781 or mcmurtry@sprivail.org.

Estate Tax Exemption Update:

It appears Congress is getting closer to reinstating the estate tax and size of the estate tax exemption to the 2009 levels — an estate tax exemption on the first \$3.5 million of an estate's value.

As a result of a 2001 legislation the estate tax is zero in 2010, but if Congress fails to reinstate previous estate tax exemption levels, the estate tax will return in 2011 with the estate tax exemption applying to only the first \$1 million of estate wealth; \$2 million for married couples. At this time the progress and timing is uncertain, but the direction is positive for estates potentially subject to estate tax.

IRA Charitable Rollover Legislation Update:

The Senate and House have announced agreement on their separate versions of H.R. 4213. Now called the American Jobs and Closing Tax Loopholes Act, the legislation will allow tax-free contributions up to \$100,000 directly to charity from a traditional, tax-deferred IRA. The new bill will allow individuals age 70 ½ or older to continue giving to charity, up to \$100,000 per taxpayer, per year, from their tax-deferred individual retirement accounts without having to pay federal income taxes on the distribution. If approved, the legislation would retroactively extend through December 31, 2010.

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we continue to have a strong relationship with the NFL and that the league continues to recognize our cutting-edge research.

Thank you for your support. It has allowed us to recruit a world-renowned physician and scientist, his key team members, and two extremely successful men from the worlds of business and sports. We are fortunate to have the services of such extraordinary individuals. Their talents will help us continue to move toward our mission of becoming the premier sports medicine institute in the world.



PATIENTS IN THE NEWS

Darius Rucker Is a Star on the Stage, on the Golf Course, and in the Community

By Jim Brown, Executive Editor, *SPRI News*

“By the time I got to Dr. Steadman and the Steadman Clinic, my knee was a mess,” recalls Darius Rucker. “I had a history of bad knees, mostly caused by wear and tear, but this time it was worse. I couldn’t straighten my leg — couldn’t get it past 45 degrees.”

Darius Rucker is a Capitol Records Nashville award-winning country music star. Earlier in his career he skyrocketed to fame as the lead singer for the rock band, Hootie & the Blowfish. Darius was given the 2010 Country Music Association New Country Artist of the Year Award (formerly called the Horizon Award), and his albums and singles have reached the top of all three national music charts. In 2008, his “Don’t Think I Don’t Think About It” became a number one single.

But his knee problems were slowing Darius down both on the stage and off. “My knee bothered me, but you try not to let something like that stop you,” he says. “At one point, I had a staph infection that kept me in the hospital for two weeks. A torn meniscus, several operations, three surgeries



Darius Rucker

to clean out the infection, and all the scar tissue put me in a lot of pain.”

“WHEN YOU HAVE A CHANCE TO SEE...”

“A friend of mine, Al Perkins (a Steadman Philippon Research Institute Board Member), told me I needed to see Dr. Richard Steadman,” Darius continues. “I knew who he was. Anybody who follows sports knows who he is, but I didn’t know him personally. Al arranged an appointment and I went to Vail.

“I guess I could have gone somewhere else, but when you have a chance to see Dr. Steadman, you’d be a fool not to do it,” says Darius. “Once I met him, I felt like everything was going to be okay. When he walked into the room, the thing that struck me instantly was how laid back and real he was. After we had talked for two minutes, I felt like he had been my doctor for 12 years. It was like he didn’t have another patient to see that day. I thought that was pretty cool.” Dr. Steadman and his colleagues “fixed” Darius’ left knee, cleaning out loose objects, smoothing frayed tissue, and repairing areas damaged by scar tissue — using techniques either pioneered or refined by research conducted at the Institute and put into practice

every day by the team of physicians at the Steadman Clinic.

STRONGER THAN EVER

Darius, his music, and his knees are stronger than ever. His schedule is packed with dates at some of the most famous music venues in the world. In July, he will perform for the Institute's annual summer fundraiser, *History in the Making*, at the Gerald R. Ford Amphitheater in Vail, Colorado.

"I told Al I wanted to play a show for the Institute," says Darius. "I'm busy, but not too busy to do something that might help the Clinic and the Research Institute."

He is also back on the golf course. His knee feels fine, he plays five days a week, and he has a seven handicap, although he grew up in South Carolina wanting to be — believe it or not — a professional hockey player.

His charity event, "Monday After the Masters," is in its 15th year. In April, a sold-out crowd of 6,000 fans watched Darius and

"I guess I could have gone somewhere else, but when you have a chance to see Dr. Steadman, you'd be a fool not to do it."

his friends host scores of celebrity athletes and entertainers at The Dye Club at Barefoot Resort & Golf in South Carolina. The event has donated more than 4.5 million dollars to the Hootie & the Blowfish Foundation, which supports the educational needs of South Carolina and the South Carolina Junior Golf Foundation.

"As a former patient," adds Darius, "I try to keep up with sports medicine, and what they are doing at Steadman Philippon is always on the cutting-edge of orthopaedic technology and surgery. I respect everyone associated with the Steadman Clinic and the Steadman Philippon Research Institute, and I support what they do."



Photo: John Kelly

Dr. Coen Wijdicks Brings “Bench-to-Bedside” Research Skill Sets to the Institute

By Jim Brown, Executive Editor, *SPRI News*

“It took me a full micro-second to accept the offer when Dr. LaPrade invited me to join him at the Steadman Philippon Research Institute,” says Coen Wijdicks, Ph.D., who has been named Deputy Director and Senior Staff Scientist of the Biomechanics Research Department.

“It was an easy decision because I knew about the famed Institute,” he adds. “That’s why it is such a humbling experience to be here. It was an opportunity I couldn’t pass up.”

“I chose to bring Dr. Wijdicks (pronounced vā-dix) to the Institute because of his work ethic, his excellent organizational skills, his professionalism, and his passion for orthopaedic research,” says Robert LaPrade, M.D., Ph.D., who joined the Institute earlier this year as Director of the Biomechanics Research Department. “Coen is a very driven and purposeful young man.”

“Driven and purposeful” may be an understatement when you examine Dr.

Wijdicks’ credentials. He has degrees from Colorado State University, Rush University Medical Center in Chicago, and the University of Oslo in Norway. He completed his dissertation under the direction of Lars Engebretsen, M.D., Ph.D., who is considered to be one of the top sports medicine physicians and researchers in Europe and who is a member of the Institute’s Scientific Advisory Committee.

Dr. Wijdicks has published over 30 articles in peer-reviewed scientific journals, presented more than 70 abstracts at national and international meetings, and won 10 awards for excellence in research. Before accepting the position at Steadman Philippon, Dr. Wijdicks had been a Research Fellow in the Department of Orthopaedic Surgery at the University of Minnesota under the mentorship of Dr. LaPrade.

“I’ve been given the great fortune of having some of the greatest mentors in the world who were willing to teach me academic rigor.” says Dr. Wijdicks.

BENCH-TO-BEDSIDE RESEARCH

The common focus of Drs. Wijdicks and LaPrade is a concept called translational medical research — or bench-to-bedside research. “He has similar goals as mine in that we desire to perform meaningful bench-to-bedside research that supports our clinical care and advances the care of



Dr. Coen Wijdicks

Photo: Barry Eckhaus

“What Steadman Philippon has in common with other great research institutions in the world is that they all operate on a premise that is made possible by philanthropy,” says Dr. Wijdicks. “When people and corporate sponsors support the Institute, current and future patients get the benefit. Without this research component medical advances are nonexistent.”

athletes and patients nationally and internationally,” explains Dr. LaPrade.

Dr. Wijdicks states that, “When a patient comes to Dr. LaPrade for knee reconstruction, the procedure is not conducted without supporting research behind the injury and treatment. Every patient he sees is receiving the most novel, while scientifically proven and published, techniques possible. My research is very clinically applicable. It is designed to be studied by clinicians and researchers in the field of orthopaedics and sports medicine. Together, our team designs research studies, conducts them in a laboratory, and biomechanically validates the outcomes. These findings then go to the operating suite to benefit the patient. The continued collaboration with physicians and researchers allows for a process that comes full circle with the ultimate goal of advancing patient care and outcomes.”

SHARED GOALS

Drs. Wijdicks and LaPrade also share the same goals for the Biomechanics Research Department at the Institute. The first is to position the orthopaedic research laboratory at the Steadman Philippon Research Institute as one of the premier facilities in the world within the next three years. This will include remodeling the laboratory area, employing innovative research techniques, establishing an in vitro biomechanics division and an expanded bioskills laboratory for teaching, and continuing to publish in high-quality, peer-reviewed journals. Exhibit A: Dr. Wijdicks was the lead author of an article on knee injuries published in the May 2010 issue of *The Journal of Bone and Joint Surgery*.

An equally important priority is to get a four-year grant from the Medical Commission of the International Olympic Committee



Photo: John Kelly

that would establish the Institute as the only Olympic-designated sports medicine research center in the United States. Getting the grant will further demonstrate the Institute’s clinical, educational, and research expertise regarding elite athletes.

“What Steadman Philippon has in common with other great research institutions in the world is that they all operate on a premise that is made possible by philanthropy,” says Dr. Wijdicks. “When people and corporate sponsors support the Institute, current and future patients get the benefit. Without this research component medical advances are nonexistent.”

Dr. Wijdicks reverts to his sports background to describe the working environment of the Steadman Philippon Research Institute. “Here at Steadman Philippon,” he says, “it’s like everyone is running the same race. We have a well-orchestrated team that is dedicated to reaching the same goals. The future looks bright.”



RESEARCH UPDATE

One Step Closer: Collaborative Effort May Lead to Patients' Own Stem Cells Producing Stronger Cartilage Tissue

By Jim Brown, Executive Editor, *SPRI News*

“Our goal was to enhance the microfracture procedure and to see if combining microfracture with an infusion of the body’s own stem cells would produce higher quality articular cartilage tissue than microfracture alone,” says William Rodkey, D.V.M., the Steadman Philippon Research Institute’s Chief Scientific Officer. “The first phase of this research has been completed, the findings were positive, and now we’re talking with the FDA regarding the next step.”

Dr. Rodkey is speaking about a research project that involves scientists, physicians, veterinarians, and research specialists from both the Institute and Colorado State University. “It is very much a collaborative effort,” he explains. “Dr. Steadman (who pioneered the microfracture procedure) and

I are focused on the human patient point of view, while Wayne McIlwraith, D.V.M., Ph.D., Director of the Orthopaedic Research Center at Colorado State, and his colleagues are looking more at veterinary and equine applications. The human-horse interaction is very strong, and both sides of the equation potentially stand to benefit immensely.”

NOT TO BE CONFUSED WITH EMBRYONIC STEM CELLS

“This study is not to be confused with embryonic stem cells,” Rodkey emphasizes. “What we are doing is taking ‘bone marrow-derived, culture-expanded’ mesenchymal stem cells (that will come from the patient’s own body) and injecting them back into the body to augment the microfracture procedure. This is being done with equine subjects at Colorado State and is resulting in articular cartilage that is of higher quality, firmer, and seemingly of greater durability than that which is produced following microfracture alone. We anticipate that a secondary benefit will be to speed up the healing process.”

He again stresses the point that this is not a person-to-person procedure. It is taking one’s own stem cells, which have the amazing ability to become different types of body tissue, expanding them for 3-4 weeks in a laboratory environment, and then re-injecting them into that person’s body. Dr. Rodkey also points out that the Steadman Philippon Research Institute, working collaboratively with the Orthopaedic Research Center at Colorado State, is among the few research facilities in the world that is using this approach to look at stem cells specifically as they apply to articular cartilage — the kind that covers the surface of the bones in the knee joint.

WHAT’S NEXT?

Drs. Rodkey and Steadman feel strongly that with the data in hand, the Institute is ready to design human studies and trials. “That could possibly happen within the next year,” he says, “but communication with the FDA moves at a ‘glacial pace,’ and cannot be hurried along.”

In the meantime, the physicians and scientists at the Institute continue to work on techniques of this study to determine whether there are even better ways to enhance the articular cartilage resurfacing process. One immediate objective is to inves-



Photo: John Kelly

tigate a technique being developed in Malaysia that extracts stem cells from circulating blood. If it works, bone marrow samples would not be needed to extract stem cells.

"The take-home message is that we had this idea, we designed the study collaboratively with Drs. McIlwraith and Dr. David D. Frisbie, we carried it out working together at the Orthopaedic Research Center, and our findings were positive," Dr. Rodkey concludes. "Now we are pressing forward for eventual human use, and the Institute will need funding and resources to carry out whatever the FDA tells us that we have to do."



SPORTS AND WELLNESS

Treating Trigger Point Pain for Good

By Nico Brown, M.P.T., Edwards Clinic Manager
Howard Head Sports Medicine Centers

Do you have "knots" in your neck or back muscles that have turned from an occasional discomfort to frequent pain? If the answer is yes, you are not alone. Roughly 10 percent of the U.S. population suffers from chronic disorders of the musculoskeletal system. Trigger points are a common root cause of symptoms for many of these individuals, often accompanying orthopaedic pathologies such as back strains and tendinitis. The purpose of this article is to help you understand the many options that exist for resolving trigger point-related symptoms.

Trigger points are hyperirritable spots located in a taut band of skeletal muscle. The spots are painful on compression and can produce referred pain, referred tenderness, and movement dysfunction. Patients who have trigger points often report regional, persistent pain and decreased range of motion. The muscles used to maintain body posture, namely the neck, shoulder, and pelvic girdle muscles are affected. Patients report few systemic symptoms and associated signs, such as joint swelling, and neurologic deficits are generally absent.

In the head and neck region, trigger points can come in the form of tension headaches or temporomandibular joint pain.



Photo: John Kelly

Upper limb pain is often referred, and pain in the shoulders may mimic or exacerbate tendinitis and bursitis. In the lower extremities, trigger points may involve pain in the quadriceps and calf muscles, often leading to a limited range of motion in the knee and ankle. Trigger point hypersensitivity in the gluteus maximus and gluteus medius often produces intense pain in the low back region and down the leg.

Treatment options vary, but typically include activity modification, manual therapy techniques, and exercise. Predisposing factors in chronic overuse or stress injury on muscles need to be eliminated, if possible. This can be as simple as using an earpiece for individuals who hold a phone against their shoulder frequently or short stretching breaks at the office.

Manual therapy techniques include massage, acupressure, and joint mobilization. These techniques can be very effective in treating superficial trigger points and are typically performed two to three times per week for several weeks to break the pain/spasm cycle. Heat, ultrasound, and intramuscular nerve stimulation (electrical stimulation with dry needling) are all common and effective additions to manual therapy techniques.

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Dry needling has also become widely accepted as an effective treatment method for both superficial and deep trigger points. Dry needling is a minimally invasive procedure in which a thin, solid needle is inserted into the skin and muscle directly at a trigger point.

As trigger points subside, a home program of stretching and strengthening is essential to long-term treatment success. Stretching of shortened muscles should be performed two to three times each day for several weeks. By strengthening the stabilizing muscles, the patient can maximize his or her functional capacity, minimize stress on the body, and avoid the return of trigger points.

Proper diagnosis and a customized treatment plan should be discussed with your physician and therapist to assure that you are getting the proper treatment to address the underlying cause of your symptoms.



The Grilling Dilemma

By Melaine R. Hendershott, R.D., C.S.O.

Editor's Note: Melaine is the outpatient dietitian for the Shaw Regional Cancer Center in Edwards, Colorado.

Not only is June the start of summer here in the Rockies but it is also the start of grilling season. Grilling is a terrific low-fat cooking method, but it is not without its health risks. Unfortunately, cancer risk from grilling is a fact, but there are some precautions you can take to reduce this risk.

The problem with traditional grilling comes from the combination of meat with intense heat. Any animal product, whether you are using red meat, poultry or seafood, reacts under high heat to form carcinogenic compounds called heterocyclic amines (HCAs). HCAs formed from animal muscle protein can damage the DNA of our genes, beginning the process of cancer development.

Consumption of HCAs is most clearly linked to cancers of the colon and stomach. One study found that people who eat the most barbecued red meat (beef, pork and lamb) almost doubled their risk of colon polyps, compared to those who did not eat these foods. Colon polyps can develop into colon cancer.

A simple way to decrease formation of carcinogenic HCAs is to cook your meat at lower temperatures by roasting it in the oven or stewing it. If you still want to grill, turn the gas down or wait for charcoal to become low-burning embers. By raising the grilling surface from the heat source, you can also reduce black char that can form on meat. Two more ways to reduce HCAs when grilling are flipping meat every minute and marinating. Marinating can decrease HCA formation by up to 96 percent.

Pan-frying is another method of cooking that you should do at a lower temperature. Research shows that frying meat at a higher pan temperature, which saves only two minutes of cooking time, produces three times the HCA content of meat cooked at medium temperatures.

Although it is a good idea to use an instant-read thermometer to be sure meat is thoroughly cooked, the further you cook meat past that point, the more HCAs will form. A higher consumption of well-done meat is linked with two to five times more

colon cancer and two to three times more breast cancer. Risk of cancers of the stomach, pancreas, and prostate may also increase.

Since the American Institute for Cancer Research recommends limiting all red meat to no more than three ounces a day, another way to reduce your cancer risk when grilling is to change what you grill. Fish and marinated skinless chicken are both great on the grill, although HCAs can still form on them. If you still want to eat red meat, make kabobs. The small pieces of meat cook quickly, and you can add lots of vegetables.

The best choices for grilling, however, are vegetables and fruits, because they don't form HCAs. These foods also supply a range of cancer-fighting nutrients and phytochemicals. In fact, the natural phytochemicals in vegetables stimulate enzymes that can convert HCAs to an inactive, stable form that is easily eliminated from the body.



Opedix Sport Tights Validated by Steadman Philippon Research Institute, Reduce Load on Runners' Knees

TIGHTS TAKE SEVERAL TONS OFF KNEE FOR EACH MILE RUN AND MAY UNLOAD KNEE IN OTHER ACTIVITIES

Opedix Knee Support System, in the form of "sports tights," has forged the way in a new area of sports science by creating and validating, with the Steadman Philippon Research Institute (SPRI), a sports garment that reduces the load on one's knees during athletic activity. Research done at SPRI shows that an average-sized person who runs one mile at 6.7 miles an hour while wearing the Opedix sports tights will reduce the load on his or her knees by 7.9 tons over the course of that mile.

"Obviously the load varies based on running style, weight, and other factors but, regardless, the load relieved by Opedix is quite substantial," says Michael R. Torry, Ph.D., Senior Staff Scientist at SPRI. "Opedix

"Evidence-based validation with the Steadman Philippon Research Institute, world leaders in outcomes-based orthopaedic sports medicine, is a monumental factor in setting Opedix apart from others making similar claims."

tights are designed on many of the principles of traditional rigid unloader braces without the restrictiveness and with injury prevention in mind."

"Evidence-based validation with the Steadman Philippon Research Institute, world leaders in outcomes-based orthopaedic sports medicine, is a monumental factor in setting Opedix apart from others making similar claims," says Kim Gustafson, founder of Opedix. "We know our tights work and we have the scientific evidence to prove it. In fact, our white papers were recently submitted for peer review to *The Journal of Sports Science & Medicine*."

For more information on Opedix visit www.opedix.com or call 1-800-267-6119.



Tad Piper (left) and friends hiking in New Zealand wearing the Opedix Knee Support System.

(Steadman Philippon Update, continued from page 3)

presented by a researcher under 40 years of age at the 14th ESSKA Congress 2010. The paper is titled "Mechanical Properties of the Primary Medial Knee Structures."

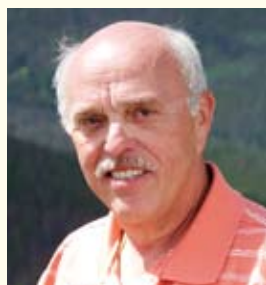
Also at the Congress, two papers, one by Karen Briggs, M.B.A., M.P.H., director of Clinical Research, and one by Dr. Wijdicks, are among six finalists "Star Papers" out of a total of 1,088 submitted abstracts to compete for the best paper of the ESSKA Congress 2010. The papers are *Analysis of scores to document outcome following hip arthroscopy*, *Briggs Karen, Philippon M., and Mechanical properties of the primary medial knee structures*, *Wijdicks C., Ewart D., Nuckley D.*

ESSKA promotes the exchange of information data covering research into the scientific and practical aspects of knee ailments.



Dr. Rodkey Named to Research Committee of the American Orthopaedic Society for Sports Medicine (AOSSM)

As further evidence of the worldwide influence of the Institute in orthopaedic research and education, the leadership of AOSSM has invited Dr. William G. Rodkey, the Institute's Chief Scientific Officer and Director of Basic Science Research, to serve as a member of its Research Committee. The AOSSM is an association of orthopaedic surgeons and a world leader in sports medicine education, research, and communication. The mission of the Research Committee is to promote and facilitate applied basic science and clinical research in musculoskeletal injuries and conditions common in sports.



William G. Rodkey, D.V.M., Chief Scientific Officer, Director, Basic Science Research

The Research Committee has established six goals:

- Provide educational opportunities for the training and mentoring of clinicians and scientists engaged in sports medicine research.
- Oversee and administer the AOSSM research grant review and application process.

- Facilitate exposure of the membership to new areas of research.
- Increase interaction of the AOSSM with other research and sports organizations.
- Control and standardize methods used for reporting and evaluating clinical results.
- Initiate and generate research in emerging areas of sports medicine.



Publications, Presentations and Research

Dr. Wijdicks reports that the 14th ESSKA Congress 2010, June 9-12, has accepted the following papers for presentation:

Wijdicks CA, Wozniczka JK, Stellmaker MP, LaPrade RF. *The "Fifth Ligament" of the Knee: Analysis of the Static Function of the Popliteus Tendon and Evaluation of an Anatomic Reconstruction.*

Wijdicks CA, Ewart DT, Nuckley DJ, Johansen S, Engebretsen L, LaPrade RF. *Mechanical Properties of the Primary Medial Knee Structures.*

Johansen S, Pietrini SD, Ziegler CJ, Westerhaus BD, Wijdicks CA, Anderson CJ, Engebretsen L, LaPrade RF. *Radiographic Landmarks for Tunnel Positioning in Double-Bundle ACL Reconstructions.*

Anderson CJ, Westerhaus BD, Pietrini SD, Ziegler CJ, Wijdicks CA, Johansen S, Engebretsen L, LaPrade RF. *The Impact of Anteromedial and Posterolateral Bundle Graft Fixation Angles in Double-Bundle Anterior Cruciate Ligament Reconstructions.*

Griffith CJ, LaPrade RF, Pepin SR, Wijdicks CA, Goerke U, Michaeli S, Ellermann J. *Untreated Posterolateral Knee Injuries: Biomechanical and MRI Evaluation of In Vivo Canine Model.*

Johansen S, Westerhaus BD, Wijdicks CA, Anderson CJ, Engebretsen L, LaPrade RF. *Biomechanical Correlation Between Common Clinical Examinations to Determine ACL Integrity.*

Engebretsen L, McCarthy MA, Camarda L, Wijdicks CA, Johansen S, LaPrade RF. *Anatomic Posterolateral Knee Reconstructions Require a Popliteofibular Ligament Reconstruction Through a Tibial Tunnel.*

Wijdicks CA, Brand EJ, Nuckley DJ, Johansen S, LaPrade RF, Engebretsen L. *Biomechanical Evaluation of a Medial Knee Reconstruction with Comparison of Bioabsorbable Interference Screw Constructs and Optimization with a Cortical Button.*

Karen Briggs reports that ESSKA has accepted the following four podium and two poster presentations:

Podium Presentations:

Knee Outcomes Data Collection in a Sports Medicine Practice With a One-Page Form.

Analysis of Scores To Document Outcome Following Hip Arthroscopy Meniscus Tear Types and Patterns Correlate With Function and Activity Levels at Least Two Years After Partial Meniscectomy.

Function and Return to Activity Outcomes Six Years After Partial Meniscectomy Vs. Collagen Meniscus Implants Assessed With Lysholm Scores and Tegner Index.

Hip Arthroscopy in the Patient 50 Years and Older.

Poster Presentations:

Viscosupplementation Injections Augmented with Corticosteroid for Knee Osteoarthritis: Patient Expectations and Clinical Outcomes.

Use of an Unloader Brace for Medial or Lateral Compartment Osteoarthritis of the Knee.

American Orthopaedic Society for Sports Medicine Annual Meeting, July 15-18, Providence, Rhode Island.

The American Orthopaedic Society for Sports Medicine (AOSSM) is a world leader in sports medicine education, research, communication, and fellowship. Founded in 1972, AOSSM is a national organization of orthopaedic surgeons dedicated to sports medicine. The Annual Meeting is designed to identify areas of recent research in the field of orthopaedic sports medicine relevant to practicing physicians, surgeons, and allied health professionals.

Karen Briggs and Dr. Wijdicks report that the following papers, posters, instructional course lectures, live surgical demonstrations, and one symposium will be presented by Institute physicians and scientists at the annual meeting of the AOSSM:

Podium Presentations

Wijdicks CA, Ewart DT, Nuckley DJ, Johansen S, Engebretsen L, LaPrade RF. *Mechanical Properties of the Primary Medial Knee Structures.*

Engebretsen L, McCarthy MA, Camarda L, Wijdicks CA, Johansen S, LaPrade RF. *Anatomic Posterolateral Knee Reconstructions Require a Popliteofibular Ligament Reconstruction Through a Tibial Tunnel.*

Briggs, KK, Rodkey WG, Steadman RJ. *Medial Joint Space Narrowing Following ACL Reconstruction and Partial Medial Meniscectomy.*

Register BC, Horan MP, Kunkel RP, Millett PJ. *Anatomic Acromioclavicular Reconstruction with Tibialis Anterior Tendon Allograft: Technique and Preliminary Outcomes.*

Poster Presentations

Greene T, Philippon MJ, Hay CJ, Kuppersmith DA. *Treatment Algorithm for Hip and Groin Injuries in Fifty-One National Football League Athletes.*

Dewing CB, Elser F, Giphart E, Krong J, Peterson D, Torry MR, Millett PJ. *Does Long Head Biceps Tenodesis Alter Glenohumeral Kinematics During Overhead Motion? An In Vivo Biplane Fluoroscopy Study.*

Instructional Course Lectures

Philippon MJ, Byrd JWT, Kelly BT, Safran MR. *Hip Arthroscopy in the Athlete 2010.*

Amendola A, Clanton TO, Taylor DC. *Acute Foot and Ankle Injuries in Sports.*

Live Surgical Demonstrations

Philippon MJ. *Arthroscopic Hip: Treatment of Labral Lesions and Impingement.*

Millett, PJ. *Laterjet Reconstruction Pitfalls and Pearls.*

Symposium

Clanton TO. *Fifth metatarsal fractures.*



Vail Hip Arthroscopy Symposium

Smith & Nephew Endoscopy and Dr. Marc J. Philippon of the Steadman Clinic and the Steadman Philippon Research Institute hosted the Third Vail Hip Arthroscopy Symposium at the Vail Cascade. More than 100 physicians from the U.S. and abroad attended the symposium held March 17-20. With some of the top hip arthroscopists in the world, the faculty included Marc Philippon, M.D.; J.W. Thomas Byrd, M.D. (Nashville, Tenn); Richard Villar, F.R.C.S. (London, England); Thomas Sampson, M.D. (San Francisco, Calif.); Victor Ilizaliturri, M.D. (Mexico City, Mexico); Joseph McCarthy, M.D. (Boston, Mass.); Robert Buly, M.D. (New York, N.Y.); and Carlos Guanche, M.D. (Los Angeles, Calif). The first two days of the conference consisted of faculty presentations and discussions, followed by a day of cadaveric lab demonstrations. Topics included the latest techniques and approaches to hip arthroscopy, femoroacetabular impingement, labral repair, microfracture in the hip, and outcomes research.



FREQUENTLY ASKED QUESTIONS

HOW DID THE INSTITUTE GET STARTED?

In 1988, Dr. Richard Steadman had a vision of documenting the results of every patient treated at the Steadman Clinic, but he didn't have a vehicle to make his vision a reality. As a result, he founded what is now known as the Steadman Philippon Research Institute — the perfect platform to house a base of scientific evidence that would track his outcomes.

NOW IN ITS 22ND YEAR, HOW HAS THE INSTITUTE PROGRESSED?

Tremendous growth and progress has occurred since inception. We have become an internationally recognized research institute that is leading the world in sports medicine clinical research. The Institute makes it possible to collect, organize, and analyze hundreds of data points on every patient and, overall, there are more than 20 million data points in our database. This vast collection of information positioned the Institute as a leader in evidence-based medi-

cine long before the term became popular in sports medicine. Through our publications and presentations, we are in essence making this data available to the world's medical, scientific, and research communities.

HOW IS THE INSTITUTE DIFFERENT FROM OTHER RESEARCH ORGANIZATIONS?

We are fortunate because our model is a 21st century model, meaning that compared to other programs, we are not supporting a university-based 19th or 20th century model of bureaucracy, departments spread out across campuses, and bricks and mortar. Rather, we are all in close proximity, have daily direct contact between the Clinic, Institute, Howard Head rehabilitation, and most importantly, our patients. We are forming alliances where we feel necessary, whether national or international, in order to ensure we have the opportunity to be the best in a particular area of interest. Overall, we are more efficient because we require less bureaucracy, work in close proximity, and make decisions more quickly, which allows us to be more nimble.



SAVE THE DATES

History in the Making Summer Fundraiser Features Concert by Country Star Darius Rucker

This year's summer fundraiser for the Steadman Philippon Research Institute will feature a concert by country music star Darius Rucker (please see page 4). The concert will be held July 8, 2010, at Gerald R. Ford amphitheater.

"This is going to be one of our best events to date," says Sheri Wharton, Director of Special Events for SPRI. "We are so thankful to Darius Rucker, who offered to do this concert for us because of his relationship with Dr. Steadman. He's one of country music's hottest stars and it speaks volumes about the value of this organization that he recognizes how important our mission is and is willing to help."



Photo: John Kelly

Dr. Steadman, our founder.

Tickets to *History in The Making* include V.I.P. seating at the Darius Rucker concert, a private dinner at Larkspur Restaurant, and a live and silent auction. All proceeds from the event go to SPRI for research and education in the areas of arthritis, healing, rehabilitation, and injury.

"We are known for having outstanding packages and one-of-a-kind items; this year will be no exception," adds Wharton. "In addition, we may have some special guests in attendance this year, further adding to our reputation for one-of-a-kind philanthropic events."

Darius Rucker's first country music album, "Learn to Live," debuted as #1 on Billboard charts following the multi-week #1 debut of his first country music single "Don't Think I Don't Think About It." On November 11, 2009, Rucker won the Country Music Association New Artist of the Year Award (formerly known as the Horizon Award), making him the first African American to do so since the award was introduced in 1981. He is widely considered one of the country music industry's hottest new male stars. Tickets to *History in The Making* can be purchased by contacting Sheri Wharton at 970-479-5788, swharton@sprivail.org.



Steadman Philippon on the Links

**THE VAIL VALLEY MEDICAL CENTER
2010 STEADMAN PHILIPPON RESEARCH
INSTITUTE GOLF CLASSIC PRESENTED
BY RE/MAX INTERNATIONAL SET FOR
AUGUST 19, 2010, AT SANCTURAY**

Proceeds from the seventh annual tournament will support the development of new procedures and methodology to battle degenerative arthritis. The team event will include a shotgun start with a modified scramble. The tournament is open to the public. Sanctuary organizes and hosts charitable events to support organizations devoted to the arts, children, health care, and crisis management.

Since 2004 the Institute has raised more than \$900,000 to support its research programs. Renowned course architect Jim



Photo: John Kelly

Eng, *Golf Digest's* first-ever "Architect of the Year" in 2003, designed the course that protects a private oasis of 220 acres, effectively complementing the 40,000 surrounding acres of dedicated open space.

Golf Digest listed Sanctuary as the best new private course in 1997. Gary McCord, CBS golf analyst and senior PGA tour professional, has said, "Sanctuary is simply the most spectacular golf course I have ever seen."

The Steadman Philippon Research Institute is grateful to Dave and Gail Liniger, owners and co-founders of RE/MAX International, who created this unique opportunity for the Institute to develop and enhance relationships with those who support our mission. Sponsorship opportunities and team slots are available now. More information can be obtained by visiting our website (sprivail.org) under "Upcoming Events," or by calling the Development office at (970) 479-5781. To request an invitation or for more information on other upcoming events, please contact John McMurtry at the Steadman Philippon Research Institute, (970) 479-5781.



Habervision Is Here!

The Steadman Philippon Research Institute would like to offer all our supporters and their families and friends the opportunity to purchase the new and exciting line of Habervision Polarized Eyewear products and accessories at a 50 percent savings! A portion of the proceeds from each sale goes to the Institute.

The sunglasses and ski goggles incorporate the very best polarized technology available. There is something for everyone. Go to www.habervision.com and enter Affinity Member Code: FOUNDATION. There is no expiration date. Share the code! Shop and enjoy.



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Steadman Philippon Research Institute is a tax-exempt 501 (c) (3) charitable organization dedicated to keeping people active.

The Steadman Philippon Research Institute is dedicated to keeping people of all ages physically active through orthopaedic research and education in the areas of arthritis, healing, rehabilitation, and injury prevention.

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JULY 8, 2010

History in the Making
Darius Rucker in Concert
Gerald R. Ford Amphitheater
Larkspur Restaurant
Vail, Colorado
For more information, contact Sheri Wharton
at (970) 479-5788
or swharton@sprivail.org.

AUGUST 19, 2010

Vail Valley Medical Center 2010 Steadman Philippon Research Institute Golf Classic, presented by RE/MAX International
at Sanctuary, Sedalia, Colo.
For more information, contact John McMurtry
at (970) 479-5781 or mcmurtry@sprivail.org.

Executive Editor:
Jim Brown, Ph.D.

Your Legacy, Our Future. Please remember Steadman Philippon Research Institute in your will, trust, or other estate plan.