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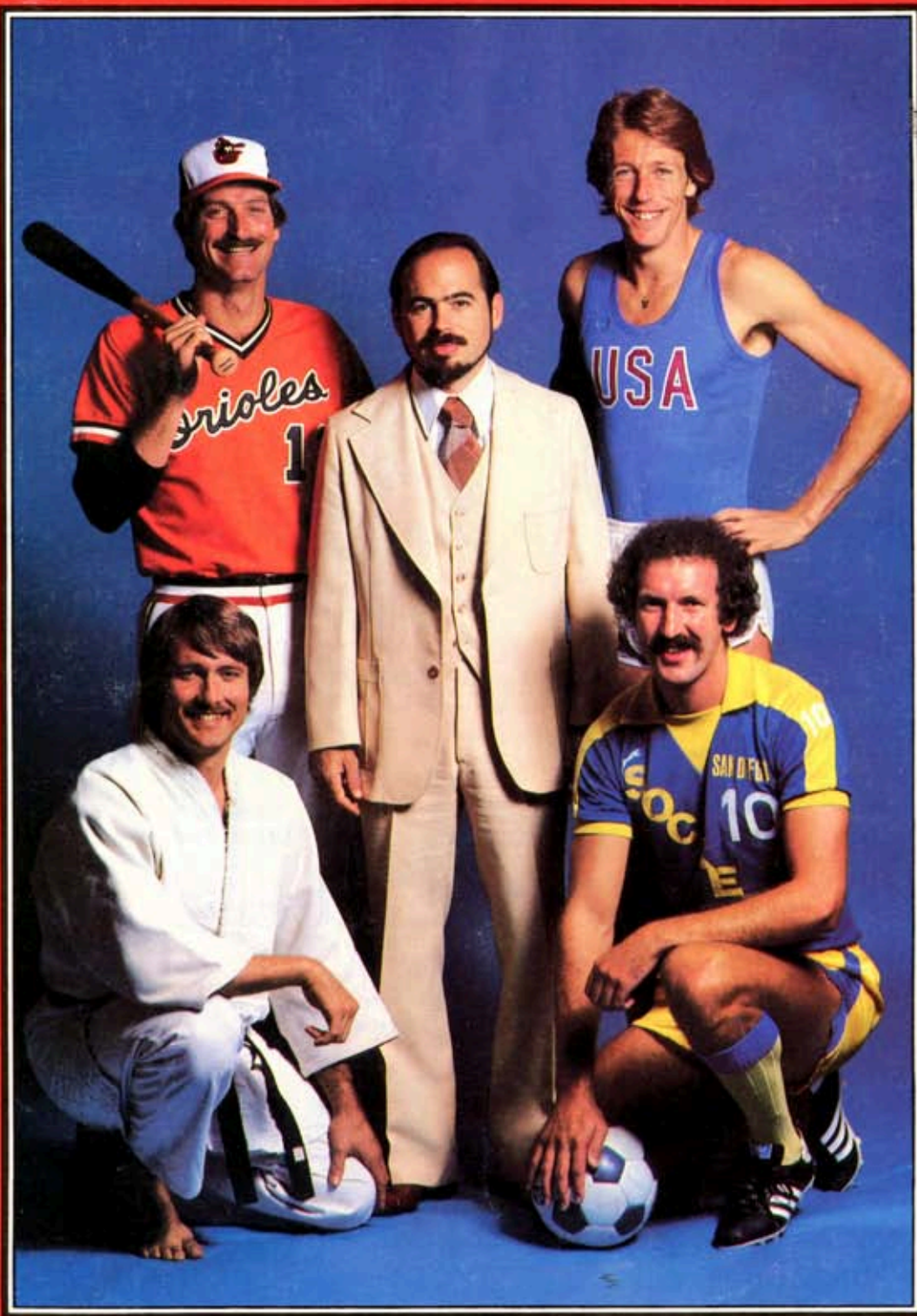
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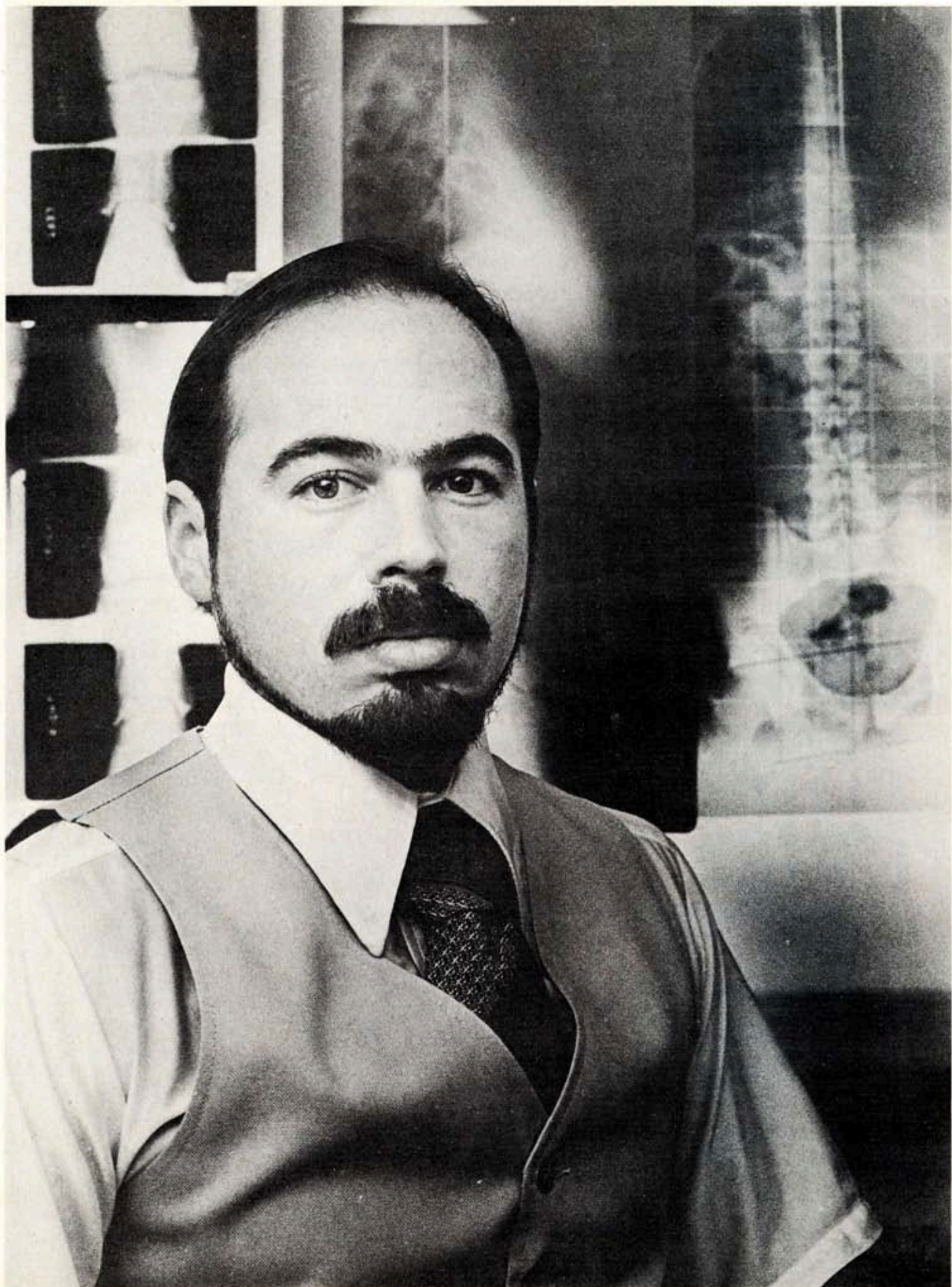
This Issue:

**Lee Perry:
Doctor
Superstar**

**Tex
Schramm:
King of the
Cowboys**

**Do Agents
Exploit
Athletes?**





CHRIS GULKER

Modern-Day Hippocrates

Sportsmedicine used to consist of a trainer rushing onto the field with a wet sponge and a bucket of water, a coach yelling at the player to quit acting like an old lady and a team doctor prescribing a few aspirin and a slug of whiskey after the game if the pain persisted. Now it's a multi-million dollar business that boasts some of the nation's top specialists in orthopaedics and other areas.

But there is a growing school of thought that seeks to treat the athlete as a whole person rather than merely a collection of parts. Advocates of this new brand of sportsmedicine use a combination of ancient and modern techniques involving massage, manipulation, preventive nutrition and a "philosophy" that aims at creating healthy athletes who are better equipped to resist injury.

The following profile is the first of a two-part series on this highly controversial field.

By David Barton

Leroy R. Perry Jr., is a doctor of chiropractic medicine. His medical training, in many ways as comprehensive as that of a traditional physician, centers on the belief that many ills of the mind and body can be manipulated away by adjustments made to the spine and the skeletal and muscular systems.

A small, intense man, Perry has acquired a reputation as a sports Svengali, a man with magic hands whose very presence at a track meet is a comfort to many athletes. It's also an extreme discomfort to the American Medical Association, the ruling body of our nation's physi-

Dr. Lee Perry is not an orthodox doctor, but, then again, many of his patients are not orthodox athletes, either—they are superstars.

cians, who are entrenched enemies of the concept of chiropractic care. A.M.A. members tend to dismiss Perry and people like him as a combination of snake oil merchant and sleight-of-hand expert.

But, to listen to athletes speak about him, Perry is nothing of the sort. How else, for example, can you explain the stack of baseballs and bats decorating his Pasadena, California, offices, signed with grateful thanks by such luminaries as Steve Garvey, Jim Palmer and Doug DeCinces, not to mention the Kansas City Royals, Texas Rangers, Houston Astros, Chicago Cubs and others? Or the autographed Australian football he received after a recent month-long advisory session in that country to help decrease injuries in a big-time professional sport where \$1 million-plus contracts are not uncommon?

How else can you explain the invitation from Cuba to go and assist in its athletic training program after the "miraculous" way Perry got their star 400-meter runner Alberto Juantorena back into the Norman Manley Games in Kingston, Jamaica, earlier

this year? *El Caballo* had been ready to pull out because of mysterious aches and pains that left him in agony, but a treatment by Perry of his hamstrings and lower back a few hours before the race resulted not only in entry, but victory, in 45.77 seconds.

Or how do you explain the fanatical loyalty of American athletes who have twice tried to make him their team doctor for the Olympic Games—to the extent of calling press conferences in New York and Houston to publicly voice their feelings, and defying team officials at Montreal (where Perry represented the tiny West Indian island of Antigua!) to see him anyway?

The list of athletes who back Perry's own modest claims to success is an impressive one. It includes representatives of most major sports, such as Wilt Chamberlain (basketball), Ricky Bell (football), Dwight Stones (high jump), Bruce Jenner (decathlon), Stan Smith (tennis), plus a host of others. And it's not only athletes who use Perry. Some nearby motion picture studios such as Warner Bros. have employed him as a consultant for their actors, actresses and stunt men, among them "Golden Girl" Susan Anton.

Perry, who starts his day with a 90-minute workout after rising at 4:30 a.m., puts in a 90-hour week, working straight through the day without lunch. On a typical day, athletes representing up to 20 different sports might turn up at his office. Perry's office sometimes has the air of a multi-national casualty station because he treats athletes from 28 different countries.

"The form of therapy I practice is like my lifestyle—I am neo-

David Barton is an assistant editor of Professional Sports Journal.

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Spartan by nature," he says. "In other words, I am competitive."

Perry was an athlete himself for 11 years, a wrestler, weightlifter and swimmer. He had been planning to become a plastic surgeon when a heavy piece of machinery fell and crushed his left leg. This handicapped him for five years as he struggled not only to overcome the traumatic effects of the injury but also the pain-killers he took.

"I was on every drug you could mention," he recalls. "Valium, codeine, morphine, all that stuff. By the time I was done, I was so constipated I could only go to the bathroom every eight to 10 days, my hair started to fall out and I was very ill. My leg had atrophied so badly I could hardly support myself with it. So, because of the negative things which were happening, I became interested in the other approach, which turned out to be chiropractic. It was the only other kind of health care that treated the whole body."

Perry believes that there's little new in medical knowledge today. He quotes Hippocrates, the "father of medicine," who "believed in treating the whole body—that there was a third of it psychological, a third nutrition and a third structural components."

His own approach matches this. "I think you should teach the patient how to help himself and therefore be responsible for his own health. In essence what we are trying to do is educate the athlete, the layman and the patient in general. Certainly, when they need drugs or surgery we refer them to specialists in those areas. When they need more serious care, we make sure they get it.

"But I think the majority of health care problems, even the strain and sprain type of injuries, can be dealt with by a conservative approach that's more biomechanically involved. In other words, by understanding the function of the muscles, by trying to create a balance of the joint, we can create a balanced weight-bearing of the body and enhance performance."

It's the question of balance which predominates Perry's approach to his patients, and one he feels is particularly appropriate to treating athletes.

"If a football player or baseball player is running around with his butt sticking out and his head stick-

ing out and one arm dropped two inches lower than the other, that has got to produce some structural stress. What we're trying to do is to compensate for the stress and get the athlete back in balance."

Perry recalls medical history. He looks wryly at what he calls the changes considered "witchcraft" in the days when doctors thought all diseases were caused by body humors. The best treatment available then was the use of leeches to draw the blood off.

"In some areas, they (traditional doctors) are very advanced, for instance, in surgery and medications. But there are also areas in psychiatry, physical medicine and rehabilitation where I feel there are many things left to be investigated. I don't

"Age means nothing.

You may end up with a 35-year-old playing better than he did at 25."

think much investment of money or thought has been put in these areas because there's not a lot of money to be made in them."

Chiropractors treat the body as an integrated and unified mechanism. The problem with modern medicine, Perry says, is that it has become too specialized—although he agrees that it's good to have as much knowledge as possible about different areas of the body.

"But if someone has a 25 millimeter (1 inch) discrepancy between leg lengths, from a break or whatever, that's going to produce back problems eventually, because the hips have to compensate for the difference in length. There are many structural problems like that, which athletes receive, that nobody's done anything to correct."

A personal friend to many of the athletes he works with, Perry is outspoken in his support of their needs

and rights. "I think the athlete suffers in the long run because he has not been properly conditioned for the event he's in," he declares. "Just because he's been on a stretching or weight-training program doesn't mean he's properly conditioned.

"I think the most important thing to stress is total body control and total body balance, because once you've achieved body balance you are in control, and once you are in control the rate of injury decreases because you are able to make quicker decisions to compensate for other bodies in front of or around you. And certainly if the muscles are in proper balance, it's easier to recuperate from stress injury."

Perry claims that 40 percent of most muscular and skeletal injuries can be cut out by following his regimen, particularly problems with the hamstrings and lower back muscles. He goes back to the subject of balance again, observing that someone like Stan Smith, for example, could get a three-inch drop in his right shoulder after years of playing tennis right-handed, and similar things could happen to golfers or baseball pitchers. Correcting these problems could lead to the athlete gaining up to 10 years' extra playing time, which could make him millions, Perry feels.

"Chronological age means nothing," he says. "The point is what we do to our bodies to make them more functionally balanced, to reduce stress, in order to continue to perform. You may end up with a 35-year-old playing better than he did at 25. Even in football, you can take a player with the agility of an O. J. Simpson or a Jim Brown and add at least two or three years to his playing life. What's that worth to the NFL? Or to the athletes?"

Perry's technique is a combination of ancient and modern methods, drawing both on his knowledge of contemporary chiropractic muscle tests and the Eastern art of acupuncture (adapted from acupuncture) and the Japanese shiatsu massage, through which tensions are released by pressure on certain key points around the body.

But it's more than that really. To watch him at work is to be impressed by his total command of the situation, undoubtedly a factor in his success with athletes who are fed up by being told that their doctors don't

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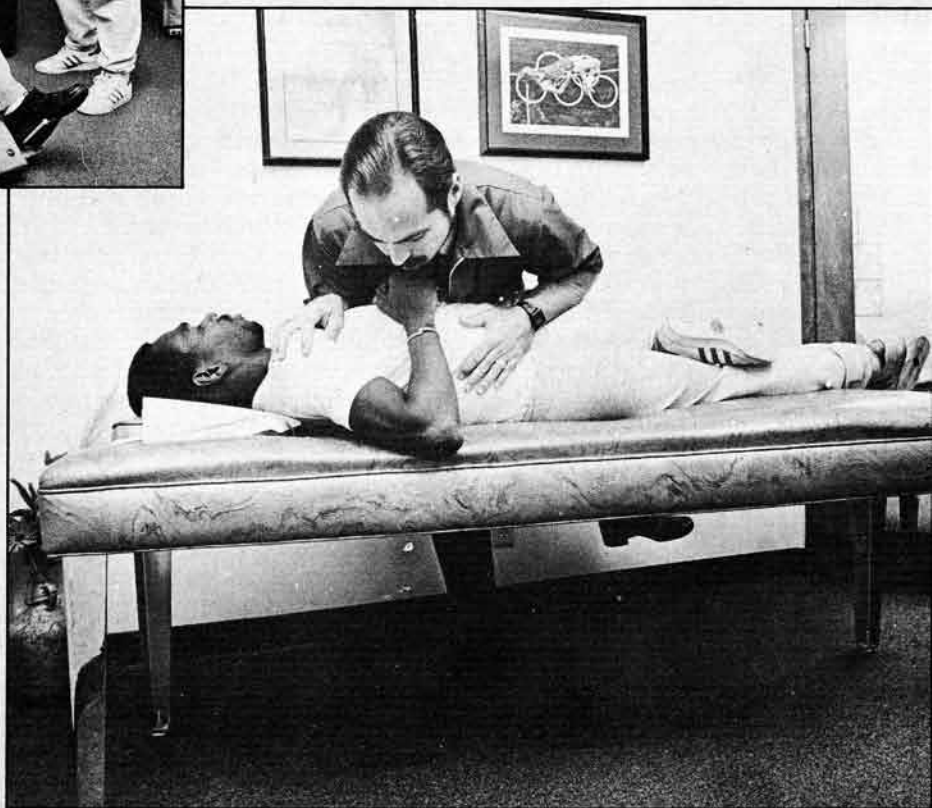
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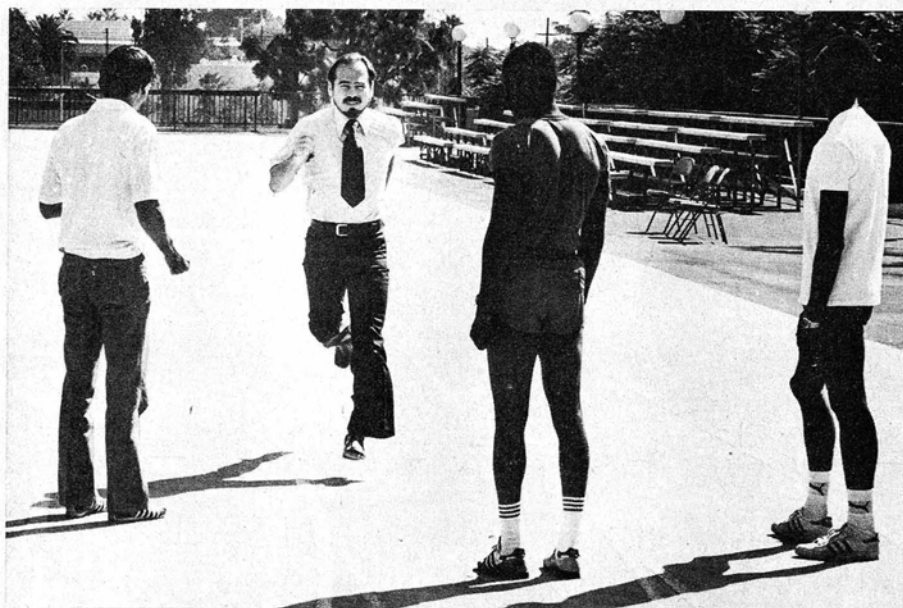


Perry tests world champion auto racer Stan Barrett's muscles to determine where the points of stress are. By feeling how strongly Barrett resists, Perry can determine the strength of certain parts of his body.



Perry and some of his patients (above) watch 'Bill Pearl, who has been named Mr. Universe four times, perform a simple bench press exercise. Below, the doctor manipulates the lower back of world-class sprinter James Gilkes. Perry says he can add 10 years to an athlete's playing life by correcting fundamental structural problems.





CHRIS GULKER

Perry demonstrates the proper posture for running.

'A Good Coach is Worth 100 Doctors'

Lee Perry has definite ideas about what makes a good team coach and how important a coach is to an athlete's health.

"I feel that a good coach is worth 100 doctors," Perry says. "Once he becomes acclimated to understanding postural structural problems, he then programs the athlete preventively, whether he's a weight-training coach, stretching coach or the usual type of coach.

"Then he becomes much more meaningful to the team than a doctor whose ability is just to pump a drug or to cut or this type of thing.

"The coach is the person responsible for the athlete, but the athlete must be educated to be responsible for himself. The trainer is the basic health care provider for the team. His job is conditioning and helping to get the athletes ready. But again, a lot of things have changed in training although there are still the old wives' tales about what should and should not be done.

"I've had experience working with at least a dozen major teams and their trainers, and I find that most of them are extremely open to new ideas. They're interested in muscle testing procedures and the kinetic therapy techniques we're using. More and more teams are writing to

ask where they can contact a chiropractic doctor to work with them.

"But there are a lot of teams afraid to let their medical staff know that they are referring players to a chiropractor because they don't want to create waves within the organization."

Perry turns to another subject—positive thinking.

"I try to instill in the players and coaches and trainers this idea: If you can induce a positive attitude in the athlete, you are reinforcing him. It's kind of like giving him a pep talk. George Allen would say that if you do that and let life itself become the pep talk, the everyday activity becomes the positive reinforcement.

"You don't have to wait until five minutes before the game to try to pump the athlete's balloon up! I think you have to reinforce the athlete on a daily basis. The coach, athlete or doctor who says a negative word, as far as I'm concerned, is useless.

"I try to concentrate on how to be a winner, not a loser, when I lecture to athletes. I don't believe robots make good athletes. I think people who make intelligent decisions are less injured, they perform better, they injure other people less and I think it makes for better competition."

know what's wrong with them and can't do anything to help.

The muscle testing itself is fascinating. The technique is called "kinesiology" and, by using it, Perry can determine the weak points in his patients merely by putting pressure on different points around the body. When they resist him, the power of their resistance determines the strength of the organ or section of the body being tested.

Essentially, it's a diagnostic technique that nobody can explain properly—but it seems to work. The kinetic therapy itself uses the same pressure points to stimulate balance in the body.

But some of Perry's other methods are not as arcane. For example, he staunchly advocates swimming for tuning up the body, regardless of your sport.

"I feel a lot of things that happen in athletics are based on old wives' tales rather than on what is realistic," he says. "As an example, a lot of American coaches think that swimming isn't good for the athlete—they feel it makes the muscles too flaccid. But I feel that swimming—freestyle and backstroke—are essential. If the major teams did that, you'd have fewer hamstring injuries, fewer quadricip pulls, fewer back problems—because the muscles would be more balanced and in a state of what's called 'homeostasis,' or steady state control, and the joints would become more functional.

"Yoga type exercises are beneficial, too. Swimming is a great taboo in boxing, yet I've put pro and world-class boxers on swimming programs. The greatest injuries in athletics are the result of muscles being too tight, not too flaccid, because the athletes have a tendency to overwork themselves. I'm not saying that we should have baseball or football players swim 4,000 yards a day, but I certainly would swim them 20 to 30 minutes a day doing kickboard and arm-pulling drills."

Another important part of Perry's work is nutrition. A non-smoking teetotaler himself, it's not surprising that Perry considers these activities a no-no for athletes.

"I think it's difficult to eat a lot of sugar and drink alcohol and smoke and eat fat-oriented foods and expect to compete well," he observes. "There are a lot of athletes who eat this type of junk food diet and still

compete, but I would challenge whether or not they are competing as well as they could.

"I feel teams have made a great investment in their athletes. The athletes should be conditioned and educated to do something to help themselves. That means eating good balanced meals. I feel that smaller meals during the day are more effective than eating two or three gigantic meals, which take longer to assimilate into the body. I would like to de-emphasize large intakes of heavy beef and emphasize more lean forms of meat, such as chicken, fish and turkey. Get a balanced carbohydrate intake and emphasize water rather than sugar-oriented drinks."

Water?

"The most important thing in nutrition," says Perry. "Almost all vitamins are water soluble," he notes, "and without the proper water intake they are not absorbed as readily, and therefore you are defeating the whole purpose of supplements. Distilled water is better for people with kidney problems, but I wouldn't get too hung up on what kind of water it is, except to prefer bottled over tap water."

"How much you need should be figured out based on weight distribution. If one weighs 100 lbs. and is very sedentary, as a rule of thumb, I think that one-third ounce per body pound, or 33 ounces, should be taken daily. If one is fairly active and plays a few rounds of tennis, and so forth, probably a half ounce per pound, and if someone is a professional or Olympic athlete, or under a therapeutic dose, it should be two-thirds ounce per pound."

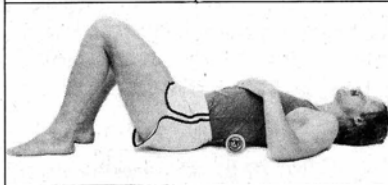
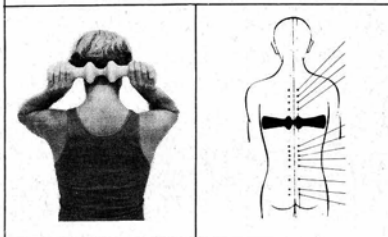
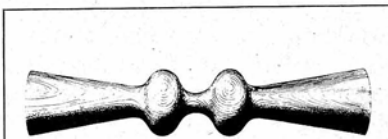
"As far as supplements go, I use them for athletes depending on what their stress and goals are. If the humidity is high, we would then consider supplementing with foods high in electrolytes or potassium, like watermelon, bananas and so on."

Perry finds the cloak-and-dagger operations he is sometimes forced into in sports irksome, especially in comparison to the movie industry where "they know what to do to save shooting time and budget by getting the actor back on the screen quickly."

By contrast, in sports "they generally come to me as a last resort. I have been called in many times as a private consultant to a team by the owner without anybody else know-

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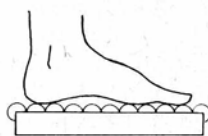
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ing it, to help the athlete simply as a monetary situation to get him back in the game."

Partly, this is because of the rivalry with orthodox medicine, and although Perry is not as outspoken as his foes, he does feel that this attitude stands in the way of sports-medicine.

"The American Medical Association is a political organization," he says. "I don't necessarily feel that a political organization of medicine has much to do with what people are really doing in terms of health care.

"I do know that there's a change in the trend and more physicians are interested in the types of things we're talking about, because more of them are starting to practice this way themselves. I've learned many of the concepts I use from physicians in Europe and so forth.

"My feeling is that doctors should work together for the benefit

of the athlete and the patient. There have been a few of us around, but the others like to overshadow us.

"I think a doctor should not try to control an athlete but should help cultivate him, to put the athlete in the driver's seat and give him responsibility for himself. I've been criticized because I'll always reinforce the athlete—but isn't that what the doctor's job is, to help the athlete compete better?"

Perry really doesn't need to add that athletes appreciate this. Dwight Stones, for instance, tells the world that he's a ten times better athlete since Perry started working on him a few years ago. But, nonetheless, it looks as though—despite the fact that in his estimation he is treating about half the United States track and field team—Perry will be in Moscow next year as the representative of another country.

So far five have approached him, but he will not say yet which one will

How Perry Spreads the Word

Together with an array of famous athletes and coaches such as Wilt Chamberlain, Suzy Chaffee and USC track coach Vernon Wolfe, Lee Perry has established the Foundation for Athletic Research and Education in an effort to bring new developments in sportsmedicine to the attention of young athletes and to use the medical knowledge gained from working with athletes to help all people.

Doctors, lawyers and business leaders are also represented on the foundation, which Perry says represents all medical view points, not just chiropractic.

The stated purpose of the foundation is to do investigative research into the prevention and rehabilitation of athletic and stress-related injuries, which Perry sees as an extension of the youth physical education program begun in the early 1960s by President John F. Kennedy. Dentists, podiatrists, physicians, trainers, physical therapists, psychologists, biofeedback technicians and exercise physiologists are all involved in the foundation's work.

Perry has produced a TV animation program together with Bob Clampett of "Looney Tunes" fame which has received accolades from Senator Alan Cranston [D-Calif.], the Healthy America Coalition and UNICEF.

He also says that lectures can be arranged if teams are prepared to sponsor them.

"There's only one way to get an education about athletics, and that's to spend time working with the athlete," says Perry, "because he's your best teacher. By studying the high-performance individual you learn 10 times more about the human body, just as they study racing cars to learn about the automobile."

Perry estimates that he has spent \$60,000 in cash on research in the past five years, not to mention donating his services free to Olympic athletes and USC teams to the tune of about \$500,000. The foundation is a non-profit educational organization and invites tax-deductible contributions which can be sent to: F.A.R.E., 1301 East Rubio St., Altadena, CA 91001.

get the nod—possibly because he is still hoping to be able to represent his own country. Perry observes that the Russians and East Germans are using similar techniques to his own. "I've worked with their ballet dancers. I know from their coaching concepts that they do stress body balance, and I know they've applied that to biomechanics and its application to sport. I think that's very intelligent."

What are Perry's chances of going to the Moscow Olympics as a team doctor for the United States athletes?

According to Dr. Irving Dardik, chairman of the Olympic Medical Committee, Perry is still being considered. "It hasn't been 100 percent finalized yet, but we will very likely be taking an experienced chiropractor with us," he revealed, indicating a change in policy which, while it may not benefit Perry personally, is still an interesting step forward for chiropractic medicine.

Dardik said he has been investigating alternative techniques over the past year and hopes to include them in the final program for the athletes, but he is not happy with what he considers one-sided media coverage of this issue, which he partly attributes to the publicity surrounding Perry's successes.

Perry stresses again that, even when he has acted as team doctor at major events, he has always made sure that a qualified medical doctor was also on hand for emergencies, and that he wants to work with orthopaedic and neurosurgeons rather than be pitted against them. He stresses, above all, the importance of the athlete.

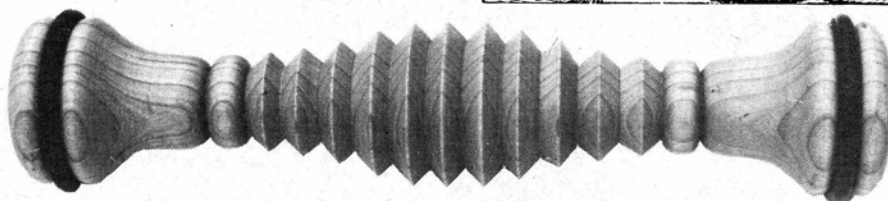
"I don't take credit for the athletes I work on," he says. "I'm the sugarless icing on the cake. I can't make an athlete a world champion. If he's having injuries or structural problems, or if he's not functioning properly because he's running incorrectly, there are things we can do. But remember, if the athlete isn't intelligent enough to use the information we give him, it doesn't help."

"How can you trick athletes—as one of the members of the Olympic Medical Committee accused me of doing? It would be easy to get rid of Leroy Perry—all I would have to do is not get anybody well, and I would have been cast aside years ago by the athletes!" ■

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