LA Times NFL Speaker Series

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Dr. Neal ElAttrache

Q. Our guest today on Hall of Farmer is Dr. Neal ElAttrache, the world's preeminent sports surgeon. It's almost easier to list the patients that Dr. ElAttrache hasn't had than has had. Not only that, he's also the team physician for the Rams and the Dodgers and consultant to so many -- I don't know how you keep it all straight.

Thank you for joining us, Neal.

NEAL ELATTRACHE: Oh, it's an honor to be here, Sam. We've been through quite a lot together in maybe 20 years, 25 years.

Q. Yep, yep.

NEAL ELATTRACHE: You do such a great job, the way that you write, you educate people about what we do, and even lately you've gone even into more interesting things that surround some of the big events in sports that we do with what you've been doing with even golf and things like that. It's been great to watch what's happened to you, too, over the past couple decades.

Q. Thanks, Neal. I think that's a wrap.

NEAL ELATTRACHE: I don't get a chance to say that very often. I think it's about time that somebody acknowledges everything that you've done to -- for the sports world and for us to participate in it. I think it's been great, really been great to see.

Q. Thank you, I really appreciate that. I'm thinking about the Rams-Buccaneers game, divisional playoff game, Rams are coming home to host a championship game, and I'm down in the bowels of Raymond James stadium in Tampa, and the Rams are celebrating outside their locker room. It's just euphoria, and Dr. ElAttrache comes out looking pretty solemn, not that he wasn't happy about the Rams winning because I think you certainly are, but you've got to be torn because one of your best friends in the world, Tom Brady, who you've rebuilt his knee on numerous occasions, twice that I know of, has just lost what we

now know to be his last game, we think, and you're heading over to the locker room to console Tom Brady. I do wonder about that, about the human element of this. You're on the sideline for the Rams, but you've performed surgery on so many of these people, including rebuilding the knee of Joe Burrow, their opponent, the opposing quarterback of the Cincinnati Bengals. We can touch on that, but how do you deal with sort of the conflicted feelings?

NEAL ELATTRACHE: What I do is very -- that connection is a very intimate connection between you and somebody that has put their health in your hands. That connection is special, and it transcends sports competition or a given game, outcome of a game for sure. It lasts beyond it.

When you caught me there, that was sort of a personal moment of friend-to-friend, to have a lot of affection for each other. I don't know if it's his last game, who knows. He's in such great shape and so healthy, I'm talking about Tom, that who knows. I've always let him define himself. I think we all owe people that. So you know, whatever -- that's why I never wanted to talk about what I thought his plans might be or whatever. That is on his terms.

I think that that sort of got jumped a little bit at the end of the season. Everybody was so interested, obviously, in what he was going to do, and he wanted to speak for himself at the appropriate time, not take the focus off of all the work that these guys have done that were still in the game.

He's got so much respect for the game and for the guys that play it, and so I knew that. So what you saw there at the end of that game was -- that was a personal thing. It wasn't an opposing player, seeing somebody from an opposing team congratulating or consoling because of that.

My relationship with the people I take care of, like Burrow -we've had some really big impact players against the Rams that I take care of this team all season, Nick Bosa -- some really big impact players that we were facing, and on our side.

But the relationship between me as a physician or surgeon and the people I take care of, it's a different thing. It's almost an out-of-body relationship in terms of me being a team physician for a given team.

... when all is said, we're done.

Luckily my team understands that. They know that I would never root against that locker room, root against that team. I love our guys, and I've taken care of a lot of them, so I've got that same situation with them.

But physicians, if you're not in the medical field, I don't think you can completely understand how that relationship develops. It's one -- aside from my wife and kids, probably the most intimate relationship that I have is with the people that I take care of.

Q. It's funny because I don't hear from you about these players and then I'll read that so and so visited Dr. ElAttrache. I feel some degree of resentment that you're not telling me these guys are coming through the office at various times. I hear about it -- like Cooper Kupp, you rebuilt the guy's knee, and then the guy is living at your house. He told me about that.

NEAL ELATTRACHE: That was an interesting time. That was when the Thousand Oaks fires were raging, and the Rams were supposed to play in Mexico City that coming Monday, and so to prepare for the altitude, which is almost 9,000 feet, the Rams had recamped in Colorado Springs.

So the team was gone, Cooper had just torn his ACL prior to that.

Q. This was the famous 54-51 game against the Chiefs, right?

NEAL ELATTRACHE: Well, that was the game that was coming.

Q. Right.

NEAL ELATTRACHE: So when the team was gone, the Thousand Oaks fires were burning everybody out, and the houses that didn't burn, the smoke damage was so bad that people were forced out of their home, and Cooper and Anna Kupp just had a newborn, so they couldn't -- it was toxic. They couldn't be in the house. What are you going to do, put them in a hotel after you operate on them?

We love Cooper and Anna and the family anyway, but we would have -- that would have been the natural thing to do for anybody that was in that situation. You know, so the team was gone, Cooper, took care of him, did his ACL, and then came to my home, he and Anna and the baby, and happened to be right before that game, so that was -- then it moved because there was problems in the stadium down in Mexico City, the game was moved to LA, and so the players joked that that was really the first home game we ever had at the Coliseum because other people didn't have

a chance to buy tickets. The Kroenke family and the Rams gave tickets to all the first responders and the firefighters, so the stadium was filled with these great first responders and firefighters all cheering for the Rams, and the guys had never experienced that before in the Coliseum, and then you had that barn burner game that was one of the best football games I've ever seen, with Cooper laying on the couch rehabbing at my house.

Q. How does Cooper Kupp go from a shredded knee, and the guy really ran a 4.6 at the combine and was not overwhelmingly impressive from Eastern Washington, to being one of the great receivers really having a place in the history books as a triple crown winner? What is it about his constitution to overcome an injury like that and then become as good as he is?

NEAL ELATTRACHE: Well, you know, his attention to detail of his craft, he wants to be perfect at his job. If you watch him play and talk to the quarterbacks that throw to him, there's no one that runs a more perfect route. There's no one that knows the defense, there's no one that knows what other people's assignments are on the offense better than Cooper Kupp.

My job was to just try to give him back as normal a knee as I could, and Cooper and our great trainers and therapists took it from there. Cooper would watch video of himself training and running and decelerating and cutting, and Cooper would know the ones that he felt perfect on, the ones that he didn't, even though we were watching film and we have some big trained eyes looking at it. Cooper was the best at seeing what he needed to improve on.

His improvement just went vertical because every time he would run a route or do some task in therapy, the next time it was better. So when he finally was able to take the field and run, he found that his mechanics made him faster than he was before, and his route running was more exact than it was before. So he became a better receiver, not because necessarily what I did but everything that he took to make himself -- he really focused on making himself perfect.

Q. Peyton Manning and Drew Brees at the end of their careers became -- their leadership was the most important thing. It wasn't their arm. Like it might have been earlier in their careers. Tom Brady when he got to Tampa, the coaches there said he had actually picked up velocity. Now, this is after the age of 40. What was it or what is it that sets Tom Brady apart? You've been closer to him than anyone this side of Giselle or Tom Sr. What do you see in Tom Brady, the sort of intangibles?



NEAL ELATTRACHE: Very similar to what I just described with Cooper. I've seen these traits in the greatest players that I've been privileged to take care of. I saw it in Kobe. I saw it in Brady. I saw it in Cooper. I'm seeing it in Cam Akers. But with Tom, the level to which he took -- as he aged in years but didn't age physically it seemed, he found ways to perfect the things that he needed to do to throw the ball, his accuracy and velocity, to out-balance, outweigh whatever changes age would bring.

He also, because everything he does, the amount of sleep he gets, what he eats, the people he surrounds himself with, was all geared to making him the best quarterback that he could be. There was nothing left to wonder what I'm going to do today. I don't have a plan -- that doesn't happen in Tom's life. Everything was geared to making him the best at what he did.

I mean, he was constantly learning about the throwing motion. If you watch his throwing motion, you see a lot of similarities now from when he started, but the way that he's able to generate velocity and where all that force comes from in his body and how far apart his feet are, where his other hand is, how he can turn -- everything that he does is very precise, so he's a student of what he does. Great lesson for all of us. As long as we're working, we might as well try to be the best at what we do, the best that we can be, at least, and you can't do that unless you're trying to learn something new every day.

I learn a lot from these guys because the good ones will come back from these kinds of injuries. They're dedicated. They want to be a master of their craft, and I just love that. It's so inspiring.

Q. How did Tom change the way you do your job? What kind of impact did he have on you specifically?

NEAL ELATTRACHE: You know, I knew that anything I poured into this, my reward would be to see him come back and be able to get back on that curve of life, wherever it was going to take him. I just appreciated to be able to be a part of it.

But what I learned was all the other things, a lot of non-medical things, too. He has a way that makes people that are involved with his life, everybody feels like they're valued and they're valuable. It's hard because there's so many people around guys like this, you know. But people feel like they matter. I see how he treats everybody.

You can turn your head and he'd be with somebody, either somebody from the nursing staff if he would be in the office, or if we'd would be out somewhere else it would be somebody that maybe people wouldn't think -- spend a little

time here and pay some attention here. You see what he does with people in the stands and stuff like that. It's not the more noticeable person. He's able to find the one that needs it.

I think those things from somebody who everybody is grabbing at, to watch how he navigates that whole thing, those are the things I really learn to pay attention to.

Q. Cam Akers has a phenomenal season as a running back, rookie running back for the Rams, Matthew Stafford comes to the Rams thinking I've got Cam Akers in the backfield, finally have a running game after all those years in Detroit when I didn't have that. Cam Akers tears his achilles tendon right before the start of training camp, and he's done for the year. He's done for a year. He's probably coming back next season. How does this guy come back in December, late December, and become an impact player that's helped him get to the Super Bowl? How does that happen?

NEAL ELATTRACHE: Well, it was a tough time in the year for that to happen because, especially at that running back position, it's hard to even fathom that he could come back at that time.

I saw with the person I was dealing with here and the trainers that were going to take care of him, if I gave them a good sturdy repair that we could go ahead and get moving quickly, keep him from getting deconditioned, at least as much as possible, that we'll take it as it comes and throw out sort of the textbook and we'll just respond to what we're seeing.

So Reggie Scott, our head athletic trainer and I, knew that we had a chance, but we didn't want to really advertise that because we didn't want to make that a false sort of schedule that then he had to live up to in case things just weren't going as we had hoped.

But by about 12 weeks, we knew that we had something special. The only thing I'd do differently, and I've been working on some of these things -- Kobe was the first one that I really used this kind of philosophy, was just a little bit of extra sewing to unload the strain on the repair site of the tendon, put the load sharing sutures, and if I have to use any other anchors, away from that that would share the load so that we could get the thing moving quickly without separating or stretching the repair, and that same philosophy I've used elsewhere, too.

That is maybe what's evolved for what I do, but you have the advent of all this technology that we have now on the back end, stuff that we used with Cooper Kupp and a lot of

... when all is said, we're done.

the players like Joe Burrow, Nick Bosa and all these guys now are benefiting from all the technology we have in therapy and rehab.

If I can give them a sturdy repair that we can get moving and get strengthening, we can speed up the amount of time it takes to recover from this.

When we really knew we had it, because that last phase of return to play and performance is here, and you can hold their hand right up until the time almost that they cross that foul line to return to play. At that point you've got to let go, and they have to have the confidence that they're ready to go, and that trust that's developed, you can't do anything with it unless there's a significant amount of trust between us and the people we're treating.

Q. Carson Palmer had a catastrophic knee injury in 2005 early in his career, and I asked him about Joe Burrow, and the same ACL or might have even been a three-ligament injury, I don't know, and that very notion of stepping up in the pocket when you know you're going to get clobbered, Joe Burrow was sacked nine times against Tennessee, how do you get players over that hump? What does it take in a player to sort of put that fear aside that this joint that's completely rebuilt is going to survive?

NEAL ELATTRACHE: Like I said, that's the part that you can't hold their hand through. But that's the part where all that trust that's been built, that got you there, that's where that then translates into, okay, let's put it to the test, let's put it to use. It's not until they get out there and are able to put themselves in that kind of a situation. That's why you saw Joe, if you watched Joe at the beginning of the year, his exam of his knee didn't change, nothing changed with regard to that. His strength didn't change. What changed was his confidence and ability to do the things, make the motions that he's rebooting his computer saying, oh, yeah, I remember, I can do this when this would happen. Then as soon as he does it, that reinforces that, and then he goes on to -- so that kind of, sort of, neurological, neuromuscular sensation, that feedback, that translates into confidence, and then now he's not thinking and wondering, hey, I wonder if this is going to be okay, I wonder if I can make that move.

You saw that with Saquon, too. Saquon Barkley had a bad knee injury, came back and was on that curve. First game, a little bit tentative, then he had a game where he got the game ball. Next game he has a bad high ankle sprain, so that sort of derails his great comeback that he was making, but he's over that and he'll be fine, but that confidence of being able to stick your foot in the ground and make that cut or get away from a guy that's attacking your vulnerable

leg in a quarterback, you have to go through it, unfortunately, for that to be that last phase of your recovery.

Q. Tom Brady and Ben Roethlisberger, I would think they have different grocery lists. Ben Roethlisberger is more of an every-man, in and out burger kind of guy, and Tom Brady eats avocado ice cream. You rebuilt Ben Roethlisberger's elbow and came back -- a lot of people, I will admit, I did a story on Ben Roethlisberger's elbow and I got lots of emails from people saying, he'll never be the same; that's just an injury you can't recover from. He threw the ball better in those last years of his career after the elbow injury. What was it like dealing with Ben Roethlisberger as opposed to a Tom Brady or a Cooper Kupp, who is just meticulous about every small detail?

NEAL ELATTRACHE: Ben worked hard. Ben worked hard. I would get video of him throwing in his driveway when he was back in Pittsburgh, and I grew up in Pittsburgh, so I was looking at the weather because at the time of the year he was doing this stuff, it didn't look too pleasant out there, and I remember those days, but he'd be throwing in the driveway, trying to throw to Ashley his wife or throwing to another couple guys or something like that.

He worked hard. Can't take that away. But Ben played a game where he got hit a lot. That guy, he was a big, statuesque difficult guy to bring down, and when you close your eyes and think of Ben in his heyday, guys are just hitting him and falling off him and he's just standing there like a statue, or running and guys are bouncing off him.

So he played a different game than some of these other quarterbacks do, and so that elbow was attached to all the other parts of his body that were -- had some mileage on them from football.

But he worked hard to come back. Not everybody is the same, and not only did I get video of him throwing the football in the driveway, I got video of him going hunting and being up in a tree stand. I knew to get up in that tree stand, he had to pull himself up the ladder, so I wasn't happy about that. I'd say, Ben, unless a helicopter dropped you off in that tree stand you're not doing what I want you to do. There was always those things. Some guys will -- well, you didn't tell me I couldn't -- I can't think of every possible thing I didn't want you to do.

Those were the fun things about taking care of him.

Q. So it sounds like it wasn't just, as Ben Roethlisberger told me, he reinjured his elbow reaching back for the Halloween bucket when he was



driving his kids around, he was actually up in a tree stand. It's good to know that I've got the straight scoop on that. Is it true that his first pass, Ben Roethlisberger's first pass on the way back was to Neal ElAttrache?

NEAL ELATTRACHE: We were down in physical therapy and went down just to see some of the things that we would have him doing for the upcoming few weeks, and he was going to go back to Pittsburgh and train with the guys back there in town, and so he picked up a ball, and I said, okay, you're going to start doing some throwing, and he said, okay, well, let's start right now, so I got a chance to catch the first one after surgery. I should have saved that ball, actually.

Q. Or asked for cryptocurrency for it.

NEAL ELATTRACHE: Yeah.

Q. You mentioned growing up in Pittsburgh or thereabouts, western PA. Tell me about your background. Did you always want to be a sports surgeon?

NEAL ELATTRACHE: You know, I don't recall wanting to do -- I played sports when I was a kid, but I don't know that I was ever delusional enough to think I could really do that. I think that medicine was probably something organic. My mother was a nurse. My dad was a doctor, and in the place where we lived, we lived in a coal mining town in western Pennsylvania, he took care of united mine workers there, and you live in a little town, and everybody has their role to play.

I appreciate the upbringing I had there. Everybody worked hard, and not everybody had all the good fortune that you see around us all.

But you worked hard, you went, and it was -- if you had something to bring to the table, then you felt like you deserved to be there. That's the way California was when I first moved here 31 years ago. If you had something to bring, this place would send you higher and farther and faster than pretty much anyplace in the country, maybe anyplace in the world.

I liked growing up in a hardworking place like that. The town was about 2,000 people, smaller now. It maybe was 7,500 when I was growing up and under 6,000 now with those mines dying. But the people are great. The people are -- I mean, they're right here. They're not obtuse, they're not coming from different angles. What you see is what you get, and I really enjoyed -- I appreciate that more now than when I was going through it.

Q. You I think really first prominently became a bright blip on my radar screen when I was talking to Dr. Andrews, who was really a famed orthopedic surgeon, and he said, if my son was going to have surgery, I'd have Dr. ElAttrache, Neal ElAttrache do that. But now 20 some years later, we've seen the sort of center of gravity of sports medicine shift to Los Angeles and the West Coast of Los Angeles. We've seen that in sports, too, to a large degree, at SoFi Stadium, maybe tilting the center of gravity a little bit to the West Coast versus all New York. How do those two things coincide? I know Stan Kroenke owns the Rams. You're the Rams' team physician. Is there any way to -- are those mutually exclusive?

NEAL ELATTRACHE: No, it's very interesting. I want to acknowledge what you said about Jim Andrews at the start of that. We can only be so lucky to have mentors that for whatever reason at critical times in our life or career take some interest in us. Why that happens, who knows. But that's our good fortune when it comes to relationships that we make along the way is that somebody in a position that can teach you something, further your career, takes the time, takes some interest in you.

I had great, great mentors at the most important times of my life, going through college, medical school, but certainly when I started here with Bob Kerlan and Frank Jobe. I owe everything I have to the guys that asked me to stay here after my sports medicine fellowship, asked me to change my plans. I was going to go back to Pittsburgh, and I stayed and I immediately started helping Dr. Jobe with the Dodgers and Dr. Kerlan and Dr. Shields with the Rams.

They put me in positions probably younger than I would have had a chance or maybe younger than I deserved and then encouraged me. Along the way, I had met Jim Andrews, who was really the biggest name -- he and Dr. Jobe were the biggest names in sports medicine in the country, and at that time Dick Stedman who I had gotten to know and asked me to come work with him a little bit whenever his group was going through a transition there in Vail.

But it was Dr. Jobe and Kerlan that put me on that stage that people noticed something, and then I was able to develop these relationships.

Then as you evolve then in your career, whether I would be geographically where I was, just so happens that I am here, a lot of athletes are going to be here in their off-season because of the weather, the ability to train, and a lot of them because of my practice and because of the

... when all is said, we're done.

Kerlan-Jobe Clinic, who's known for sports medicine, taking care of these people, they come here for their care. Once they come, they tend to stay. They tend to stay for a while.

Then it just builds on itself.

It's happening at the same time that -- I think what people are going to see this weekend with this stadium and this venue, it changes the paradigm for this kind of a sports and entertainment and media event. It's really special what's been done here. The entire city is going to benefit from it. I think will wood certainly is going to benefit from it.

When you see what it's done to -- very few things can change a city like Los Angeles. Los Angeles is one of the great cities of the world. How does one thing change a city like that? This project did. It happens to be at the same time that we're getting a lot of attention here for what we're doing in sports medicine and orthopedics.

Stan is very proud of what we're doing. Stan and the Kroenke family are very supportive of what we're doing in sports medicine. He wants us to have the best sports medicine and human performance area to attract people from all over the world. He wants that to be here. He wants to be associated with it.

So it's going to be exciting. I really look forward to seeing this continue. I feel very fortunate. I'm very fortunate to be where we are at this point.

Q. I have to ask you, there was one point, getting away from football, I was watching the Championship Series in the American League and National League, and I don't know if you know this, I think they mentioned it on a broadcast, there was one night where I think you had repaired three of the four arms of the pitchers. Do you remember that?

NEAL ELATTRACHE: Yeah. That happens every now and then. It even surprises my daughters. My wife will say, tell my daughters, we'll be watching and point that out, and my daughters will say, really? I don't think they know quite what we do.

They're very proud. But yeah, that's happened. When you look at the postseason this year in football, same thing, a lot of those guys on both sides of the ball we've been taking care of.

The Kerlan-Jobe Clinic, for 50 years it's been a place where these guys come, they trust what we do, and they end up playing in the different big sports leagues and on both sides of the ball. So it's been really great to see. A lot

of fun.

Q. A few years ago when Philadelphia was playing New England in the Super Bowl, we had a fun story that Sylvester Stallone, who is Mr. Philadelphia, is your brother-in-law, and you obviously have that tight connection with Tom Brady, so it was Tom Brady versus Philadelphia. Have you guys spoken since?

NEAL ELATTRACHE: Yeah, so my wife and his wife are sisters. The whole family are big football fans. The whole family are big Tom Brady fans.

Truth be known, Sly is a Tom Brady fan wearing an Eagles jersey. He finds himself as conflicted as me but maybe not to the spiritual extent that I can navigate that. So he handles it in his own way.

Yeah, he was wearing an Eagles jersey and couldn't help himself but root for Tom.

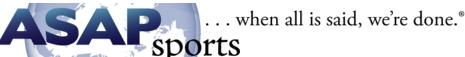
Q. Are you seeing more or fewer soft tissue injuries as guys get bigger, stronger, faster? What injuries are you going to see more of in future years?

NEAL ELATTRACHE: Well, the force and speed and size that is associated with the injuries now, I rarely see a straightforward knee ligament injury anymore. The amount of force that goes through these knees, it tears more than just the ACL. I've been seeing a lot more complex knees.

I think in one season, there were some turf issues at the beginning of not this past season but the season before, and at least people thought that that might be the case, but that season was Solomon Thomas, Nick Bosa, Saquon Barkley, Joe Burrow, Iman Marshall. These were all multiligament injured knees. This year the Ravens had their No. 1 and 2 running backs, multiligament knees. I rarely see any just simple ones anymore, simple ACLs anymore.

I think that that's a sign that the amount of force that these guys have been able to now generate and the gripping of the -- and it's happening on regular grass, too, but I think that we're trying to focus on what's the optical coefficient of friction between the shoe and the turf, whether it's natural grass or artificial, trying to at least minimize some of that torque that comes on to the knee. It's tough because you've got to have good footing, otherwise you're going to have guys falling all over the place, but these guys are so big and so strong and so fast that they can generate a lot of force.

Now, the soft tissue stuff, we did see a lot of that in the COVID period. COVID messed up so many things, but the



off-season training and preparation to come into camp in baseball, it was amazing the number of injuries we saw when these guys came back because they had ramped up for spring training, got shut down, and then with very little time were told, okay, we're going, and they ramped up quickly and then we saw a lot of elbows getting injured.

Q. At one point we saw the Rams had 30 COVID positive guys and the team was ravaged. Now we haven't heard at all about COVID, and I know that testing has changed with the league. How has the league done with that, with its protocols? Were you worried at any point that this thing could derail -- obviously it's secondary to the devastation of COVID.

NEAL ELATTRACHE: I knew enough about the virus from the very beginning, was educated on it even -- I got COVID March 2020. I was one of the first ones probably in LA. I guess full disclosure, the owner of the LA Times, great scientist Patrick Soon-Shiong, he taught me a lot about the virus and about the immunology associated with it, but I had already been sort of getting tutored and studied and brushing up from some people that were advising the administration at the time in Washington and some of the physicians that had been doing some of the research, the real good research and gene mapping and this stuff.

So I knew a lot about the virus and the immune response. I also knew that we would be dealing with the safest population other than maybe school kids that we could with the virus and that if anything was going to mess --

Q. In terms of some of the best conditioned athletes?

NEAL ELATTRACHE: This is not the population that virus wants to hurt. So the co morbidities, obesity, diabetes and the elderly and the otherwise immunocompromised, those are the ones that looked like they were going to be in trouble. I knew that the population we were dealing with, that wasn't going to be an issue as far as shutting it down.

But our response to it would potentially end seasons and things like that.

When you look at how the sports leagues dealt with it, we were able to have a World Series, luckily for Los Angeles, winning the World Series in the bubble in Texas. We were able to keep the -- it's not just the frivolity of sports, it's not just a minor issue. When you look at the people whose livelihoods depend on it, not just the guys playing, it's an enormous part of our economy in our country and people's livelihood.

I applaud our leagues for working through that, trying to follow the rules and be good citizens and do all the things

they needed to do to keep each other safe and to keep the people outside of the teams that our athletes would be encountering, keeping them safe.

Alan Sills, our medical director for the NFL and the Commissioner's office working with the Players' Association and De Smith and everything, that was very difficult even leading up to the end of this regular season. We could have tested ourselves right out of a season.

When we got the data and saw what was happening with Omicron in South Africa and in Europe and in the UK before it came here, we sort of anticipated and knew what was going to happen. So when you mentioned all of the people that tested positive with the Rams, keep in mind, a football team is a microcosm that represents the region that they live. If 30 percent of the Rams are testing positive, 30 percent of your city is positive.

So the only difference is that Omicron is highly asymptomatic or minimally symptomatic in that young, healthy population. So you're going to have a relatively healthy younger person watching on TV seeing, oh, half of these guys aren't following the rules, they're lying -- and they're 100 percent vaccinated, these teams. They're lying about their vaccine status, they're breaking the rules. The only difference is that guy is probably positive, too. He doesn't know it because he's not getting tested.

So that was what was coming, and so -- and the NFL from the very beginning, they acknowledged all the science of natural immunity, testing, protecting the vulnerable, and then when the vaccines came and the boosters, then they endorsed making sure that you got everybody vaccinated so that you could protect everybody else that would be around these people.

I applaud the commissioners' offices of all the leagues that worked their way through this. They took politics out of it and followed the science, and I think it was a good example of what -- I don't think we'd be here if we were going a different direction, not really looking at the real science of this whole thing.

Q. Fascinating. Dr. Neal ElAttrache, thank you so much. I think we hit the number, actually. Thanks for coming by Hall of Farmer. Awesome to see you.

NEAL ELATTRACHE: Thank you, guys.

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