

At cutting edge of knee injuries



Seeing his patients back on the pitch is the greatest reward for surgeon Ray Moran, writes **Marie Crowe**

DRESSED in his blue scrubs and wearing plastic gloves, Ray Moran drills a hole in the bone that is attached to the tendon he's just removed from Podge Collins' knee. The Clare star's leg lies limp in the operating theatre as the surgeon prepares to use that tendon to mend his torn cruciate.

It's a surreal experience to stand just a couple of feet away as he works his magic on the 23-year-old, almost like being an extra in a movie. Collins' face isn't visible as he lies on the operating trolley. All that can be seen underneath the blue sheet that covers him is his damaged left leg and all that can be heard is the beeping of the machines and the sounds of the surgeon's instruments.

Before the surgery Collins had quite a bit of hanging around to do. He had been fasting since the night before. On the television in his room Novak Djokovic — one of his idols — was playing Kevin Anderson and it was a welcome distraction.

As well as being hungry, he is feeling down about the Clare footballers losing to Longford and exiting the Championship. Even though he wasn't playing, the defeat stung. Being injured while watching his team exit the action so early isn't exactly how he expected his summer to pan out. He can't shake the disappointment.

Earlier that morning, on the drive from Clare to the Sports Surgery Clinic in Santry, he searched Google for ACL surgery while his team-mate Gary Brennan drove. The results were graphic, but he was more concerned about the rehab and how soon could he return in earnest.

The anterior cruciate ligament connects the thigh bone to the shin bone. Its function is to control stability when performing twisting actions. It's not needed much for daily living, but it is vital for sport.

"The cause of the injury is excessive stress to the knee," explains Enda King, head of performance rehabilitation at the Sports Surgery Clinic

"There are two main groups: 75-80 per cent are non-contact and 25 per cent are from contact, so if someone hits your knee there is nothing you can do about that. The other 75 per cent have some sort of control deficit around the hip-trunk, knee or ankle that puts their knee in a dangerous position. That's generally in a straightened position with their knee collapsing across and their trunk swaying across. That is the perfect storm, so to speak, where there is excessive strain on the knee and it's too much for the ACL."

Despite all the people at work in the operating theatre, it is a



very calm place. You get the sense that is in no small way due to the persona of Moran. When he walks into the room it takes on a sense of stillness. It feels like he has just invited you into his home and he wants you to stay for tea. As part of a documentary we are making for UTV Ireland on cruciate injuries, there was a camera with us, but that was not an issue — all were welcome.

Everyone knows their role in surgery; it's very much a team effort. Once the graft is prepared by Moran, it is inserted through an incision in the front of Collins' knee. In the past silk, silver, wire, polyester and carbon fibre were used as a replacement for the cruciate, but now grafts from the hamstring or patellar tendons are most common.

Although the incision is small,

seeing anyone being cut open is an uncomfortable experience. The drops of blood that rolled down from his knee seemed like rivers and the smell was almost overpowering.

Moran uses a small arthroscopic camera to look inside the knee. Water is pumped in so the surgeon can see clearly. A blue basin rests on the floor to collect excess blood or water. A screen hangs above the bed showing the inside of the knee. The bones, the joints, the cartilage and the blood. Moran explains his actions and points out where the damage is done and what needs to be repaired. He then secures the tendon by drilling it into the bone, repairing the cruciate.

It's an efficient, fast-moving procedure, the whole process is completed in just under an

hour. Of course Moran has done hundreds of these operations, so many that he's lost count, so efficiency is expected.

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It is only part of what he does in the Sports Surgery Clinic but operating on athletes and sports people is one of his favourite parts of the job. Many high-profile victims of the injury have passed through his hands and returned to play and that is a nice feeling.

"Generally with the ACL it is sports people and they are well motivated," explains Moran. "People often ask do I not get bored doing so much surgery and you really don't. It's all about individuals and getting them back to play. When you are dealing with such a motivated bunch of players it's pleasant, very gratifying, and very enjoyable."

In a way, getting involved in sports medicine was serendipity. Of course, when he returned from a fellowship in the United States he was known as Kevin Moran's brother, and that was OK. He had an instant rapport with patients, a common ground that they wanted to explore, everyone wanted to know how his brother was getting on.

When he started working with the ACL injury over 20 years ago

Ray Moran at work. 'When he walks into the room it takes on a sense of stillness. It feels like he has just invited you into his home and he wants you to stay for tea.'

Photos: David Conachy

it wasn't as frequently diagnosed as it is now. Many people believe there is a now a cruciate epidemic but the surgeon isn't so sure that this is the case.

"We don't know if there is one. I'm still seeing patients in their 50s and 60s and they have no idea that their cruciate is torn. I'm not saying that it isn't a common injury but the notion that it is more common than before — we just don't have data for that."

"I also don't have the data for the boots, the type of ground, the type of the rotation but we are collecting it. When you look at it, most of these injuries are non-contact rotational injuries, players running along and then a slight change of direction and it is gone. That player could have done that move 10,000 times and there was never a problem then suddenly it is gone. We are still in the early stages of trying to figure out the whole mechanism; it's not violent trauma, that's for sure."

Of course the increase in sports coverage and also the advent of social media means that more details on players' injuries are in the public domain. And with high-profile players like Colm O'Neill, Colm Cooper and Henry Shefflin

suffering the injury, it's impossible not to be in fear of the dreaded cruciate.

Moran is happy with how Collins' operation went; there was no evidence of any additional pathology, no damage to the joints or the cartilage. It was a straightforward procedure.

Twenty minutes after the surgery the dual star is awake and sitting up in recovery. Dressed in his hospital gown with the oxygen mask on his face he looks a bit worse for wear. But after a couple of minutes he perks up. Surprisingly, food isn't the first thing he asks about. Instead he wants to know how the operation went and he starts talking about his rehab. He's not even 30 minutes out of surgery and he wants to get working on his recovery that will ultimately lead to him getting back on the field.

It will be a long journey and he understands the difference between trying to get back as quickly as he can, and not rushing. Roberto Baggio returned to play just 90 days after his ACL surgery in time for the 2002 World Cup. Although his rehab will be done at home in Clare, he will be monitored by the team in Santry. They will also add his details to their growing ACL research database.

With patients like Collins who are enthusiastic and excited about hard work, it's understandable that Moran enjoys his job, especially when the players get back on the pitch.

'It's the children's excitement that makes it. They love it'

A visit to Croke Park's hallowed turf brings back memories of a childhood outing for **Dermot Crowe**

MANY moons ago I visited Croke Park for the first time on a national school tour. In our eyes the ground looked majestic and enormous, if lacking the grandeur which awaits the young visitor in 2015. We were kindly met by a GAA official from our school parish, Seán Ó Laoire, who fielded testing questions about capacity and such like with patience and civility.

We were allowed to run on to the field and someone had, if memory serves, a plastic ball so you could take a punt at the goals and marvel at the experience of setting foot in this magical place where the stars of Gaelic football and hurling paraded their gifts. As someone from Clare it was all the more exotic and not someplace you expected to return to anytime soon.

There were others like us who came from all parishes and schools across the country, no doubt on similar excursions. You didn't make a day out of Croke Park then, nor half a day. There was no museum, no corporate facilities, no panoramic views from the skyline. Everyone had some connection to this place though and for us it was



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emphasised by Ó Laoire, then on the Croke Park staff, that Michael Cusack, a son of Clare, had been a colossal figure in the creation of the GAA. Without him there would have been no Croke Park, this richly evocative field of dreams and folklore.

A friend of mine would in later years recall a similar visit to the hallowed ground. This was something of an alien experience for him as he never took to the GAA in spite of his father being a prominent club man. Instead he gravitated towards photography. At the time such an interest, as a substitute for Gaelic games, would have a father like his deeply concerned. Pleas to 'go up to the field and play a bit of hurling'

mostly fell on deaf ears.

In adulthood my friend brought me to his house one Sunday — and there was the old man sitting in a trance on his chair watching an Ulster football championship match on the telly between Donegal and Tyrone.

At some point I asked the mother-in-law if she had ever taken to the GAA, already knowing the answer, which led to an unconvincing claim that he had. 'Sure didn't he score a goal once in Croke Park?' she announced, reprising the school tour. At which point her husband suddenly revealed, derisively, that he had 'kicked it into an empty net.'

On Tuesday last I returned to Croke Park, with a group of



under-8s from the St Maur's club in north county Dublin who took part in a couple of hugely enjoyable 10-minute games with Raheny. Part of a Go Games initiative started by the Leinster Council seven years ago this promotional exercise gives thousands of others across the province the same opportunity each year. They get to play on the sacred ground, they get to pass through the dressing rooms and, at the end of it all, they climb the famous steps and lift a cup.

Each province has two full days in the summer to allow children the chance to play in Croke Park. To some extent it is a reward for juvenile volunteers, but primarily the purpose is to give the kids a chance

to sample the wonder of the place. The Leinster Council has chosen under-8 as an ideal age bracket to achieve the goal of maximising circulation. At least 120 kids are involved in games each hour, with six matches running simultaneously, starting at 9.0am and finishing at 5.0pm. That's 194 teams, 126 clubs. Camogie and ladies football also have a day to themselves.

Clubs are chosen on a rotational basis by county boards so that every club eventually has a team playing there. In the past week the children of former players like Michael Kavanagh, Trevor Giles, Adrian Fenlon and Johnny Pilkington took part. But the great majority of parents don't have that level of

acquaintance with Jones Road. Some may be there for the first time. That does not mean it will be the last time.

The former GAA president, Liam O'Neill remembers a phone

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call around 12 years back from a development officer on Leinster Council, the former Laois hurler Noel Delaney. "Noel phoned me one day, and he said, 'do you get on well with Peter McKenna (Croke Park stadium director)? I would love to take kids to Croke Park on days when it does no harm to the pitch'. McKenna hasn't always had the reputation of being in touch with grassroots, but he got it, the minute I put it to him."

"I have only one godchild, a camogie player, she was one of the first kids to go in there. So I got a first-hand feeling of what it's like to have a family member play in Croke Park. And just the excitement it generated in that family and that club."

"We get blamed for corporate use of the stadium, but here was a guy (McKenna) who got the idea

when it was put to him — Peter's answer was, 'yes, of course, we will make it happen'. We have a couple of things that work for us in the GAA almost in spite of ourselves. I don't think any other sport has such a connection with a stadium like we have."

"A percentage, I know it's small, are certain to go back and play there as minors or as seniors or with clubs. That is a huge big deal. The trip to Croke Park is up there with Santa Claus and the tooth fairy in terms of what it means. A child brings a father, a mother, a brother, grandparents get dragged along. If you add up the reach of those days it is absolutely enormous."

The current President, Aogán Ó Fearghail, says Croke Park is the most used sports stadium in Europe. "We have taken a policy decision that we would give it to youth development. This is in addition to hosting the Dublin Cumann na mBunscol finals. It is the children's excitement that makes it, they just absolutely love being in that place."

"I get a lot of correspondence, and a lot of that is because people want to complain, but the one thing that is positive is the correspondence I get after these children's days. That is very heartening. The big thing is that they feel valued and that they have an Association that does value them."

The praise is well-merited. This is the GAA doing what it does best.