



**Hinsdale  
Orthopaedic**  
*Sports Performance Institute*

**Executive Place III  
1010 Executive Court, Suite 250  
Westmont, Illinois  
630-323-6116  
www.hoasc.com**

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Whether you are an athlete, injured worker, weekend warrior, or someone who just enjoys an active lifestyle, OSPI is geared to today's athlete and focused on keeping you healthy, active, and going strong.

**HOA Sports Performance Institute Offers:**

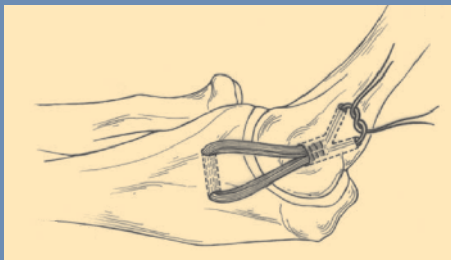
- **Fellowship-trained Orthopaedic surgeons and non-operative physicians specializing in sports medicine care**
- **PT**
- **Sports Performance (general fitness, balance, core stability, vertical jump, speed, agility, power, throwing, overhead hitting, or other sport specific goals)**
- **Injury Prevention (ACL, throwing, long distance training, etc)**
- **Dance Medicine**
- **Sports Medicine Injury Clinics (1-877-4HO-SMIC)**
- **Newsletter**
- **Educational conference center to provide lectures and seminars to other community physicians, coaches, trainers, athletes, and parents on sports performance enhancement (steroids, nutrition, performance training, psychology, etc), injury prevention and safety (ACL, pitching, skiing, etc), innovations and technology in orthopaedic surgery, and research related to sports injuries and their management**
- **Injury surveillance and prevention research**
- **Clinical outcomes and basic science research in orthopaedic surgery and sports medicine**

**Sports Medicine Injury Clinics  
1-877-4HO-SMIC**

## Baseball "hero" becomes "Surgical Legend"

# TOMMY JOHN SURGERY

By Amy Higgins BA and Steven Chudik MD



Many people have heard of Tommy John. This famous Los Angeles Dodger was not only known for his pitching, but also for the surgery he had on his elbow. This surgical procedure, which involves reconstruction of the ulnar collateral ligament (UCL) of the elbow, has been associated with Tommy John since he was the first professional athlete to successfully undergo this particular operation in 1974.

The UCL is the main ligament that attaches the ulna, bone of the lower arm, to the humerus, the bone of the upper arm, at the inside of the elbow and keeps these bones and the elbow joint properly aligned during activity. If this ligament is torn or damaged, the elbow joint can become unstable and painful during throwing. UCL injuries are most prevalent in baseball pitchers, but they can also occur in other athletes such as wrestlers and gymnasts. In pitchers, the UCL is usually partially torn and stretched out from the high forces exerted across the elbow during repetitive throwing. Poor throwing mechanics and muscle fatigue can increase those forces across the UCL of the elbow. The UCL can also be torn from a single event, such as a fall on an outstretched

arm or a single excessively hard and uncontrolled throw without warming up.

The earliest sign of injury to the UCL is pain on the inside of the elbow during throwing which is usually associated with a decrease in pitching velocity and accuracy. If detected early, immediate cessation of throwing followed by proper rehabilitation and the correction of throwing mechanics may save the ligament and allow a gradual return. MRI can be helpful in detecting complete tears or partial damage to the UCL.

Most athletes with UCL injuries, complete and partial, can return to sports and everyday activity without surgery. Typically, only high level throwers or other athletes that place tremendous forces on the elbow require surgery. The surgery is performed by harvesting either the palmaris tendon (extra tendon in the forearm) or the hamstring tendon (at the knee) and reconstructing the ligament on the inside of the elbow. This procedure is successful over 95% of the time in returning the athlete to pitching in 9 months to a year if there are no other injuries in the elbow joint. Because of the long recovery time and risks of complication, many non-professional athletes elect to switch positions or sports rather than undergo the surgery.

There is a big misconception that the elbow is stronger after UCL surgery. The majority of orthopaedic ligament reconstructive surgeries can restore stability to an injured joint and allow return sport; however, the complex anatomy and function of the native ligament is likely never completely restored.