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Calls for brain research following Danny Frawley's death

Researching the impacts of contact sports on the brains of Australian Football League (AFL) players could save lives, says Victorian Coroner Paresa Spanos.

The recommendation follows an investigation into the suicide of former AFL player, coach and commentator, Daniel 'Danny' Frawley, 56, in a car crash in Millbrook on 9 September 2019.

The coronial investigation established that Mr Frawley had a history of mental health issues and in the period immediately preceding his death had experienced personal and professional stressors and an exacerbation of the anxiety and depression he had been suffering for five years.

A post-mortem analysis of Mr Frawley's brain by the Australian Sports Brain Bank (ASBB) found he was suffering from low stage (Stage II of IV) chronic traumatic encephalopathy (CTE) – a form of brain disease linked to repeated blows to the head. CTE, which can only be diagnosed after death, is associated with mood and behavioural changes and occasionally cognitive and memory impairment.

Mr Frawley played 240 AFL games between 1984 to 1995 and was captain of the St Kilda Football Club for nine seasons. During his career, he sustained approximately 20 concussions, including losing consciousness, severe headaches and vision problems.

To understand the circumstances of Mr Frawley's death, Coroner Spanos investigated his mental health treatment and the impact CTE may have had on his mental health.

Her Honour found:

- Mr Frawley's mental state began deteriorating in the months before his death and appeared to coincide with ceasing his medication and several psychosocial stressors.
- in the weeks prior to his death, Mr Frawley reengaged with treatment and medication for his depression and his clinical management was appropriate.
- the available evidence does not indicate which specific personal or professional stressors experienced by Mr Frawley caused or contributed to his death.
- there is insufficient knowledge about the extent to which CTE produces neurological dysfunction, in part because of a lack of research in Australia and internationally.
- like many players, Mr Frawley began his football career in his formative years, and likely experienced head trauma while his brain was still developing. As such, it is difficult to evaluate the contribution of CTE to personality, behaviours, any cognitive deficits, or emotion over a lifetime.
- as CTE can only be diagnosed post-mortem, it is impossible to establish at what point CTE began and whether this coincided with any changes in mood or behaviour.
- CTE was a potential contributor to the depression that Mr Frawley suffered in the years preceding his death.



In light of Mr Frawley's diagnosis of low stage CTE and its potential relevance to his death, Her Honour sought submissions on the current state of play in Australia regarding CTE and potential improvements in player safety.

The AFL Commission and AFL Players Association (AFLPA) stated that in the decades following Mr Frawley's career there have been significant changes to AFL guidelines to prevent and manage concussion and head injuries.

In addition, both organisations endorse the Concussion in Sport Australia Position Statement, a joint initiative by the Australian Institute of Sport, the Australian Medical Association, the Australasian College of Sport and Exercise Physicians and Sports Medicine Australia. The position statement has been adopted by many major sporting bodies and contends that more research is needed to understand CTE – its diagnosis, impact and prevention.

Coroner Spanos said it was “commendable that the AFL is committed to supporting research in this important area of player health and safety.”

To improve the safety of players engaged in contact sports, Coroner Spanos recommends:

- the AFL and AFLPA actively encourage players and, their legal representatives after their death, to donate their brains to the ASBB for research into CTE.
- the Victorian State Coroner and the Director of the Victorian Institute of Forensic Medicine, where possible, embed the following in coronial processes:
 - timely identification of cases in which there is a history of head trauma – be that major trauma or minor repetitive trauma – such as may be sustained in sporting activities.
 - careful examination and sampling of the brain in relevant cases to determine whether the pathological changes ascribed to CTE are present.
 - protocols to ensure that appropriate samples are retained to assess for CTE changes without the need for long term custody of the whole brain.

A copy of the finding can be accessed at:

<https://www.coronerscourt.vic.gov.au/sites/default/files/2021-02/Finding%20D%20Frawley.pdf>

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