



How to Deal with Agents: Medical and Ethical Aspects

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Received: October 14, 2022

Published: December 06, 2022

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Today's reality

The sports agent has emerged as an increasingly important figure in the negotiation of contracts for professional athletes.

We know that agents may have different backgrounds, attorneys now comprise more than 50% of all agents representing professional athletes, particularly in the Anglo-American sports world.

There are ethical considerations regarding agents' fees but also regarding the medical situation of a player.

The goal of the agent is to maximize the athlete's salary for as long a period of time as possible.

Arrangement of medical consultations becomes more and more a function of a sports agent.

During the negotiation process there are many variables that are likely to come into play in the determination of the athlete's value.

The medical history is one of these, and the agent will have some role in determining that value: his representation will be even more competent if he proves to handle the medical business of his client as competent as he handles the athlete's financial business.

In order to get some answers to questions in this complex relationship, agent-player-doctor-club, 3 (important) agents were interviewed (C.H., M.B., P.S.).

Interestingly enough, the 3 very "competitive" agents, representing hundreds of millions of euros, and hundreds of players did not differ a lot when discussing medical matters.

If the player has in faith in the team physician, the agent will never be capable to repair that crisis of confidence.

Of course, the body of the player belongs to himself, not to the club, not to the agent. But most contracts between clubs and players mention the (medical) rights and responsibilities of the club.

Most clubs have, by contract, the right to decide about the surgeons, the hospital or even the treatment of the player.

Of course, nowadays most clubs have competent medical teams, with even international experience in one way or another.

The hot topics today in sports medicine, often career-ending problems in the past, (hamstring injuries, ligament tears or cartilage problems) are taken off by real specialists, belonging or not to the club but well recognised by players, clubs and agents.

Today many agents engage a doctor to avoid discussions between non-medics and medics.

The future will tell us if this is the direction we need to go.

The moment of the return to sport can be a discussion point where "the doctor of the agent" can help to advise the player.

Of course, the point of final interest remains the same for the team physician, the player, the club and the agent

Return to play on the same (or even a better) level than before the injury

but by disclosing a conflict about a diagnosis or treatment, the agent risks losing a valuable player in an extremely competitive market.

Another problem is that the player and even the agent may not be knowledgeable or sophisticated, regarding the impact of the conflict with the club or the medical staff and some players/agents may be incapable of appreciating the risks.

As athletes begin to play professional sports at a younger age, these situations will become more numerous.

Today we are confronted with people, circulating around youngsters of ten, eleven, twelve year old.

A young player at that age should like the game, relax in a stable family environment, enjoy the friends at school and go to a training centre where he can show his talents.

From the U13, you often see more agents than parents at the game.

Education at home remains the most important factor for young players. If the parents of a talent full player start pushing in the same direction as the agent, then a dangerous situation is created: some parents lose all sense of reality.

Injury settlements are agreements between players and clubs, spelling out compensation and other terms in which the two parties will immediately part ways.

Components of an injury settlement

- The agent and the player release club, doctor and coaches from all liability associated with the injury.
- Clubs will be responsible for the cost of all second medical opinions, rehabilitation, medical and related expenses.
- A player (or his agent) may choose to rehab his injury at a place of his own choice.

- The applicable workers' compensation laws of the different states/countries may play a (major) role.
- Offset language preventing a player from double dipping.

A lot depends of course if it's a player with an expendable talent or not. Is he easily replaceable?

If the agent or the player doesn't want an injury settlement, it's the clubs' obligation to rehab and give the player medical treatment.

Team physicians, doctors of the club, can be confronted with a player they would like to release from the injured list, but the player feels he is still injured!

Here the doctor of the agent can play a major role: either in discussing the case with the medical staff of the club, or to propose an independent arbitrator.

Agents today usually stipulate in the players' contract that the player has the right to file an injury grievance against the club).

Agents know very well that injuries usually take longer to heal than what is typically projected.

In most cases, agents will fight tooth and nail for a time beyond the predicted recovery table, to make sure they don't short-change their client.

Negotiating an injury settlement can be very tricky and can get downright nasty.

For example, a player suffers from a hamstring injury, clearly seen on MRI. The team doctor proposes 6 weeks to heal the injury. The player gets a second opinion and this doctor (specialist?) foresees 12 weeks before full recovery: the doctor of the agent or the agent himself can agree about 9 weeks, an agreement in the middle of the two opinions.

Of course, today sophisticated test batteries with repeated MRI's, read by different osteo-articular radiologists, which helps to settle the problem.

Transfer of players caused more and more discussions and even “wars” between clubs and clubs, and between clubs and players.

A new type of person entered the football-world: the sports-agent.

The go-between, the fixer or the mediator between clubs and players.

Many transfers pass off quietly and correctly but last years, because of the big money, also less honest groups have entered the world of the “agents”.

The injured player becomes more and more a problem, so the agent has to take into account that DOCTORS are also an important part of the football business.

Diagnosis, follow-up, prognosis etc. becomes more and more the subject of conversations/discussions with the medical staff.

Advice, prevention and adequate treatment are not anymore mere talk for the informed agent.

How to deal with agents: Medical and ethical aspects

Today's Practice, questions, reality, solutions.

Outline

- For a long time, football players were not allowed to receive money for their “playing”.
- Later on, the players became “property” of the club they were playing for.
- The club decided about the near future of the player.
- Then the “Bosman decree” arrived.
- The transfer-money remained the same if the player changed of club during the contract-period.
- But if the club who wanted the player could not show the bank warrant, the club, owner of the player, could block the transfer.
- After the Bosman decree, clubs cannot effort to work out decent networks, but they still want to buy new and if possible exceptional players.
- So the job of “agent” became interesting, necessary but particularly profitable.

- The relations between agents, players, clubs and particularly doctors are discussed.