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Notes on the pervasiveness of injuries in professional wrestling in the Atlantic Canadian circuit, as seen from ringside

Fred Mason
University of New Brunswick

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Notes on the pervasiveness of injuries in professional wrestling in the Atlantic Canadian circuit, as seen from ringside

Cover Page Footnote

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Notes on the pervasiveness of injuries in professional wrestling in the Atlantic Canadian circuit, as seen from ringside.

Since independent wrestling promotions in the Maritime provinces of Canada began putting shows on again post-COVID in April 2022, I have conducted ethnographic research with professional wrestling fans, writing field notes and autoethnographic musings. I generally take in one to two shows a month within a two-hour drive of my base in Fredericton, New Brunswick, although I also attended shows in Halifax, Nova Scotia, as part of trips to that city. Between New Brunswick and Nova Scotia, I know of (and follow the social media of) 8 independent promotions. My research focuses on fans, their interactions with wrestlers and each other. However, one just cannot go regularly to shows featuring much of the same talent, without realizing how frequently wrestlers get injured, and how often they are back wrestling somewhere else the next week.

This paper comments on select cases of injury of professional wrestlers on the Atlantic Canadian circuit observed in the last few months, to consider how frequently wrestlers are injured, and how injury affects their lives and careers. Two of the cases involve former WWE (World Wrestling Entertainment) stars who appeared in shows long after their careers have peaked, while two others focus on wrestlers trying to make it to “the show.” About half of the wrestlers who appear in Maritime promotions restrict themselves to working in one or two that are nearby, but the rest travel regularly, competing across almost all of them. While the matches are scripted, and pain is “sold” to crowds as part of the act, injuries are very real (Schnirring, 2000; Smith, 2008).

Working through pain and injury is normalized for wrestlers as professional athletes and entertainers, and even on the independent circuit with little immediate financial incentive, wrestlers continue to work through injury, appearing in show after show for different promotions. The frequency of injury to wrestlers is so high as to be practically ubiquitous, yet many wrestlers continue to train and work despite the potential negative impacts on their bodies and long-term health. The cases observed and discussed speak to the pervasiveness of injury across the span of wrestling careers, and the lingering, visible effects.

Background on Injury in Professional Wrestling

Some injuries in professional wrestling are catastrophic and high profile. In October 2022, “Hangman” Adam Page, a former AEW (All Elite Wrestling) heavyweight champion, awkwardly took a lariat clothesline from John Moxley, flipped over unconscious, and was diagnosed with a concussion after an ambulance ride (Chiari, 2022). In WWE (World Wrestling Entertainment) in March 2022, multi-time tag team champion and former Intercontinental and WWE Champion Big E landed badly on his head and neck outside the ring, sustaining what might be career ending injuries with a C1 break (Applegate, 2022). More famous mishaps include the death of Owen Hart in the ring in 1999, when the rigging carrying him into the ring as the masked “Blue Blazer” failed and dropped him into the turnbuckles (Greene, 2019), and the paralysis of Darren Dorzdov in 1999 when a botched powerbomb broke several vertebrae (Greene, 2019).

Severe accidental injuries like these, sustained by experienced performers in major promotions, are fortunately rare, although frequent enough that internet lists exist (Babcock, 2012). More commonly, professional wrestlers, especially those in the less glamorous independent circuits, suffer a litany of injuries during shows and in training, varying from the mundane to the serious. R. Tyson Smith, who conducted a three-year ethnographic study with independent circuit wrestlers in the US, commented on the ubiquity of injury and pain:

Fatal consequences are very rare but certainly possible. Serious long-term injuries are common. Spinal and neck trauma, concussions, bruises, broken noses, and damage to the knees and other joints happen all the time. Very many injuries are never visible yet felt intensely by the performer, such as nerve stingers that immediately end a match and send the wrestler skipping around the ring, forcefully exhaling through tightly clenched teeth. Others, like concussions or neck twists, leave the person dazed but coherent enough to leave the ring unassisted (Smith, 2014, 122).

Smith contends he saw more injuries in training than he did in shows. And the wrestlers would mostly work through it unless it was severe enough to go to the hospital, which many of them avoided anyway.

Within the sociology of sport, the idea that sport socializes athletes to a "normalization of pain and injury" is well founded (Nixon, 1993). Athletes operate in a "culture of risk" where the threat of pain and injury is constant (Safai, 2003), and many sport subcultures encourage training and working through pain, and sometimes quite significant injury (Nixon, 1992). Male athletes more specifically, suffer through pain as part of a traditional masculinity (Howe, 2003; Messner, 1993).

The normalization of pain and injury is so prevalent in sports that it trickles down to lower levels. Every year in my sociology of sport class at the University of New Brunswick, I use polling software to ask the 150 or so students three questions: 1) with a loose definition of "elite" that includes playing at the good high school level, or some sort of provincial level, how many of them were "elite athletes"; 2) of those, how many experienced injuries significant enough to require time away from the sport or medical attention; and 3) of those, how many of them played through the injury or returned to sport too soon? With the background and interests of these students, about 50% of the students say they were elite. Of them, anywhere from 50 to 75% say they experienced significant injury, and at least 50% of those say they played through it or came back too soon. As a conservative estimate, every year (for 16 years now), 25-30 students of a group of 75 students who identified as "elite," implicated themselves in the normalization of pain and injury. This suggests that carrying on through pain and injury is very much a part of the culture of sports at all competitive levels, and not just a "culture of wrestling" issue.

Saying that, athletes in combat sports (boxing, mixed martial arts, amateur wrestling, etc.), are particularly immersed in cultures valuing toughness and resilience. Within the literature on mixed martial arts, scholars point out that fighters recognize a need to "callous the body" (Spencer 2013), similar to what earlier ethnographer Loic Wacquant (2003) said of boxers needing to harden themselves to pain and get used to getting hit. Within sports like MMA, the approach to risk and violence, even though it is interpersonal, should be considered like "edgework," where the risk is negotiated and mutually constructed (Channon, 2020). Although practitioners end up fighting each other violently in the cage, they share a sense of community and care towards each other (Spencer,

2013; Sugden, 2022). Professional wrestlers share similarities with these other combat sport athletes, in that they too must get used to working through pain and injury. In their case, even though the combat is scripted, the risk of traumatic injury is ever present, and often comes when someone makes a mistake.

This paper will now turn to discussion of episodes witnessed over the last several months related to injury of professional wrestlers working in independent promotions in Atlantic Canada. The first two were 'headliners' - former stars brought in by local promotions to boost attendance. The other two cases involve injuries to wrestlers that travel the local circuit, who I have watched wrestle multiple times, and with whom I have some personal connections (one I know through family friends, and the other through a connection at the university). Following with good ethical practice for ethnographic work, the two younger wrestlers, working the independents in Atlantic Canada and still hoping to make it to the big leagues, will remain as anonymous as possible.

Former superstars and the accumulation of injuries

Two of the cases under discussion feature veteran wrestlers performing as headliners for small promotions in the Maritimes. One of the wrestlers, originally from the region, spoke to the crowd about his injuries after his featured match. The other veteran headlined a show based on past reputation, but still had the grace to drop the match to the local favorite. During the match, it was clear that he has physical issues that impact his mobility, even though he continues to wrestle regularly.

René Duprée (real name René Goguen), was originally from Moncton, NB, but went on to wrestle for WWE from 2002-2007, where he became the (until then) youngest tag team champion at the age of 19 years old (WWE, 2018). Duprée won the tag team championship a second time before departing WWE, after which he continued to wrestle at a high level, including several tenures in Japan. Duprée headlined a show for Capital City Wrestling (CCW) in Fredericton, NB, in November 2022.

For someone who has wrestled as a pro for over 20 years, Duprée looked very good, seemingly larger than his heyday, and skilled and fast enough that the promotion had to bring in a competitor from outside the region (Maniacal Maredes) to keep up with him and put on a good show. At one point, they crashed through the barrier outside on the floor (not in

the script according to CCW people I spoke to after), sending it flying, with Duprée rolling around in pain. This may have been real given the unscripted action, or it may have been “storyline” pain, where it was part of the performance (part of the story being told to the crowd).

Since it was a match in his home province, Duprée spoke to the crowd after, indicating with some emotion that he was going for scans of his hips and neck, so this could very well be his last match in the Atlantic region. This may have been a “work” (made up as part of the predetermined story) to draw emotion from the local crowd, but it was after the match, and not part of a promo. It is entirely believable that a wrestler facing the potential end of their career due to injury would want to compete at home, now that there was a promotion that could afford him. Even if it is all fictional, it is telling that a “career-ending chronic injuries” storyline is what a veteran wrestler would choose to employ.

The other veteran headliner, Charlie Haas, is a 49-year-old former WWE star originally from Texas. He wrestled for WWE from 2000 to 2005, and 2006 to 2010, where he was half of a tag team championship three times. He also wrestled for Ring of Honor from 2010-2013 (“Charlie Haas”, n.d.). Though retired from major wrestling promotions, Haas continues to work independent shows on a regular basis. Haas debuted on Impact Wrestling, one of the second tier but still televised US promotions, in January 2022. This match demonstrated that freak accidents happen, even to experienced wrestlers. Haas left the show on a stretcher, after being knocked out and concussed in a match with Josh Alexander, when he slipped and hit Alexander's knees and the ropes at the same time (Nason, 2022).

Haas appeared as the headliner at a show in Saint John, NB, for Epic Pro Wrestling, in July 2022. While age catches up to everyone, Haas was noticeably smaller as compared to his younger self. Even though I followed his career in the early 2000s, and he was a draw for me to this particular show, I did not recognize him at the merchandise table beforehand (although it might have been the out-of-character beard). During his match, he showed some of the grappling skills that were a trademark for him, and did a bit with “the ankle lock,” a submission for which Haas and his past factions are known. However, Haas clearly had mobility issues that could only be chalked up to a lifetime of wrestling, and he spent more time talking to and working the crowd during the match, than actually wrestling. Other fans sitting near me discussed his

physical limitations as well, so it was not just the quashing of my own hopeful expectations.

In these two examples, we see veteran wrestlers who have been to the summits of the profession, who continue to wrestle in the independents into their 40s, that shows signs and offer stories of accumulated injuries. The other episodes feature wrestlers on the other end of the spectrum, at the early parts of their careers in their 20s. Unfortunately, these wrestlers' stories already speak to accumulating injury, and the dangers that go with the profession.

Independent Wrestler # 1 and repetitive injuries

The first independent wrestler under discussion is in his mid-20s, and a popular heel (bad guy) on the independent circuit. His lack of size is likely a detriment to advancing much higher in pro wrestling (as is the case for many independent wrestlers), at least for one who does not perform as a high-flyer. However, he has great mic skills, and good in-ring chemistry with other wrestlers, so he gets a lot of work in Atlantic Canada. This wrestler struggles with shoulder and back injuries, which is sometimes visible in matches if one knows to look for it.

As well as occasional appearances outside the region, this wrestler works regularly for 5 promotions (that I know of) and is wrestling (or appearing at shows to provide heel-type interference) in matches 2-3 times a month, so this schedule means he gets little time to recover or heal. In one match I witnessed in the summer, this wrestler aggravated his back injuries in a pop-up power bomb that did not get enough "pop" - the wrestler is thrown up into the air by his opponent, and they transition into a powerbomb where he lands on his back. In this case, the pop-up part was botched, so Wrestler #1 did not get enough time to fully transition and instead of taking the bump flat on his back as desired, he initially landed on his pelvis at an angle, and took much of the impact up through his spine. Despite this he finished the match, then later bullied and manhandled a referee (in storyline), resulting in a show-ending chase out of the arena. Accidental injuries are always a danger, and unless they are incredibly severe, the show must go on.

Like many of the wrestlers in Smith's (2014) study in the US, this wrestler is working other physical labor jobs during the week to support himself, so the injuries impact his abilities for that kind of work. In turn,

the work likely contributes to the ongoing injury progress. As noted above, this wrestler works more shows than most, and even had title runs in some of the promotions. That is good for his career profile, but it means injuries continue to get reaggravated and they start down the pathway to chronic, with potential life-long impacts.

Independent Wrestler #2 and Concussion(s)

The last wrestler to discuss was a university wrestler at a university known to produce good wrestlers, so he comes with good grappling skills. In the main promotion he works, friends and former teammates show up as a group to lead crowd chants in his favor. He operates as a “tweener,” where he can play heel if needed, but typically works the crowd like a “face” (a babyface, a good guy).

This wrestler suffered a clear concussion during one show. The injury came in a tag team match, where a miscue led to Wrestler #2 getting hit in the head and displaying concussion symptoms thereafter. After the injury, the match finished awkwardly, with one of the other wrestlers taking over and sending all three others in turn (including his partner), into the turnbuckles from a Celtic cross. At the end, the wrestler in question grabbed a fan’s sign and stood on the ring’s edge, jabbering almost unintelligibly before being led away to the back. I spoke to the referee who officiated the match afterwards, and he told me the match ending had to be changed because our wrestler “had gotten his bell rung so bad he didn’t even know he was in the world.”

Concussions in contact sports constitute a significant topic of research and media discussion in the last decade or so (Omalu, Hamilton, et al., 2010; Shpigel, 2022). The National Football League (NFL) settled a lawsuit in 2012 with over 4000 players about cognitive injuries suffered during their careers (Hughes, 2013), although the Supreme Court dismissed a lawsuit brought by 50 former wrestlers against WWE (Associated Press, 2021). Repeated concussions can lead to chronic traumatic encephalopathy (CTE), a degenerative condition that can only be diagnosed posthumously, involving a host of symptoms including severe headaches, memory loss, aggressive behavior and suicidal ideation (Shpigel, 2022). The most notorious case of CTE in a professional wrestler involved Chris Benoit, who died in a double murder-suicide at the age of 40; Benoit’s brain (if unnamed in the case notes) was studied by Bennett

Omalu (Omalu, Fitzsimmons et al., 2010), who helped bring CTE to medical and public attention.

Concussions seem unfortunately common in professional wrestling; one of Smith's (2014) indie wrestling participants claimed to have suffered fourteen by the age of 33. In the case of the local wrestler, I noticed he was cutting social media promos, and back wrestling the next week, for a promotion a three-hour drive away. I do not know how that match went, but I did see him wrestling again, one month later, in his main promotion. Having seen him and his opponent compete several times, I could tell the opponent was going gentle and taking care in bumps and throws. So clearly, the effects of concussion were still being felt if risk was being negotiated. Many sports leagues, and even the WWE, have concussion protocols that take athletes out of action for progressively longer periods related to injury frequency. This does not apply to independent wrestling, which has little oversight, not even provincial or state athletic commissions in most cases because it is "entertainment." The wrestler in question continued to work frequently through the summer and fall, seemingly taking no breaks after the injury.

Wrestling towards a conclusion on injured wrestlers

As a set, these cases demonstrate various injuries at the beginning and the end of wrestling careers. They are far from unique. I picked the two younger wrestlers because of my knowledge of their situations. If I wanted to pick based on visible injury, I could write about the young high flyer who limps away from the ring on a regular basis, clutching his abdomen after crashing into other wrestlers and objects outside the ring; the 30-something year old wrestler scheduled for a local title shot, but who broke his wrist in training; the well-known heel at who the crowd (almost everywhere) chants "watch the lights," after he needed stitches to close wounds in his head from coming off the top rope at a show in a dinner theater venue; as well as many others. On the other end of the spectrum, most dedicated wrestling fans can probably easily name a wrestler who is well past their prime and clearly physically compromised, yet who still performs at smaller shows to make money and stay in the game.

Collectively, these episodes show how frequent accidental injury can occur for independent professional wrestlers, and how they

accumulate over a lifetime. The wrestlers themselves are not even the focus of my research, but injury is so frequent that it has worked into my field notes on a near-constant basis. Meanwhile, a search of medical databases shows for “professional wrestling” and “injury” shows relatively few results. In addition to Omalu, Fitzsimmons and colleagues’ (2010) case notes on CTE, and Schnirring’s (2000) investigative article already mentioned, there are articles on surgery for biceps rupture on 5 patients (Tangari et al., 2011), case notes on a medial collateral injury (Bagwell et al., 2018), and two articles out of Japan on osteogenic effects of cervical spine injury (Sasaki et al., 2018) and head trauma in female professional wrestlers (Nomoto et al., 2007). The medical literature contains little on professional wrestlers, and medical researchers offer less scholarly literature on injury to professional wrestlers than anthropologists, sociologists, and drama scholars.

Those other scholars might suggest that the context of professional wrestling may explain some of the injuries endured. Smith (2008, 2014) points out that much injury is suffered stoically, and like other athletes, professional wrestlers avoid medical care, especially if it will take them out of the sport. In the Canadian context, at least the wrestlers have access to socialized medicine, so that even if they do not have family doctors, they can turn to emergency rooms and walk-in clinics. For independent wrestlers in much of the US as studied by Smith (2014), they have almost no access to healthcare, because they are treated as independent contractors, with little or no access to benefits or workers compensation (Bohlman, 2020; Corteen, 2018; Mitchell, 2012). Injury is often lived with, denied, and managed with little medical intervention because it would mean a loss of income, and there are always younger guys hungry to take your spot. At the same time, many of those younger wrestlers are already dealing with injuries in the same way as the veterans they chase, as demonstrated in the stories told here.

Fans pay to see wrestlers enact scripted violence unto others, likely without realizing that much of the violence ends up directed towards the self (Young, 2012) - professional wrestlers threaten their own physical wellbeing, not just through the risk of accidental injury and concussions, but through chronic injury, performing through pain, and practically abusing their own bodies on a regular basis. This starts early in a career, and continues for many well into middle-age, impacting wrestlers’ overall health and their lives outside of the sport.

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