

# Statistical Evaluation of Tommy John

## Surgery

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Tommy John surgery is a growing issue happening with this new evolution of baseball. Velocity has become such an integral part of being a successful major league pitcher but it has its costs. The ulnar collateral ligament is a sensitive ligament that suffers from the motion of pitching a baseball. A “Tommy John” injury consists of rupturing this ligament due to overuse, not from one throw or one bad pitch. The number of these injuries appears to be going up exponentially every year. This could be due to a number of reasons but increased velocity in MLB pitchers can rapidly degrade the ligament in question. Others hypothesize that specializing in baseball too young and poor youth sports coaches are leading factors to this growing issue. Regardless of the cause it is possible, and in fact common, to come back and pitch in the major leagues after suffering this injury. This led us to our research question; How does the performing surgeon in a Tommy John surgery impact the postoperative pitching statistics and outcomes of major league baseball pitches? There are a lot of doctors who specialize in this specific surgery and we wanted to see who was the best. We hypothesized that the surgeon wouldn’t matter and that all surgeons would provide the same outputs.

This study's literature review and data was collected from multiple sources with two sources used very heavily. Those sources were [baseballsavant.com](https://baseballsavant.com) and a Google Sheet maintained by baseball writer Jon Roegel, which documents professional baseball players who have undergone Tommy John surgery. The data gathered from Baseball Savant comprises a list of pitching metrics deemed important for the study, including strikeout percentage, walk percentage, average exit velocity of balls in play, hard-hit percentage, fastball rotations per minute, fastball velocity, earned run average, and walks plus hits per innings pitched. Additionally, information sourced from the Tommy John Google Sheet includes details such as a pitcher’s age at the time of surgery, the surgeon involved, and the recovery time between surgery and returning to Major League Baseball.

Each data group collected included the MLB ID number for each player, enabling the merging of the two groups into one using SQL. Moreover, rows of data lacking key information,

such as surgeon and recovery time, were promptly excluded from the dataset, ensuring the analysis was conducted on clean, complete data. Following this, the data was exported to Excel for additional cleaning. This involved refining the dataset to include only the statistics of each pitcher from the year before their surgery and their return year from surgery. Subsequently, the statistics from the year before surgery were subtracted by those after surgery, resulting in 35 distinct rows representing 35 different pitchers. When looking at the data we also wanted to examine potential statistical differences between pitchers who have had Tommy John surgery and those who haven't. Baseball Savant's website was used again to compile an Excel sheet of 35 non-Tommy John pitchers. Differences between the two seasons were also taken from these pitchers to compile data. We hypothesized that the Tommy John pitchers would have a worse difference than non-Tommy John pitchers.

The initial methodology identified that age and surgeon would be good y variables used to build models where the x variables would be the differences between seasons of strike out percentage, walk percentage, average exit velocity, how often they are hit hard, fastball velocity and rpm, ERA, Whip, and recovery time. We chose to use age in order to see if that was affecting the statistics and not the surgeon being used. Regression models 1-9 show the relationship between the surgeon used and the 9 pitching statistics. Three surgeon categories were identified based on the 2 most used surgeons (Andrews and Elattache) with an "other" column used for the other surgeons. Regression models 10-18 would be the age of the pitcher predicting the difference in season-long variables from the season before injury to the season after. A regression output and bar graph were then created to amplify the statistically significant findings of our initial model output.

OLS Regression Results							OLS Regression Results								
Dep. Variable:	kpercent	R-squared:	0.081				Dep. Variable:	bbpercent	R-squared:	0.030					
Model:	OLS	Adj. R-squared:	0.024				Model:	OLS	Adj. R-squared:	-0.030					
Method:	Least Squares	F-statistic:	1.413				Method:	Least Squares	F-statistic:	0.5024					
Date:	Mon, 15 Apr 2024	Prob (F-statistic):	0.258				Date:	Mon, 15 Apr 2024	Prob (F-statistic):	0.610					
Time:	22:35:12	Log-Likelihood:	-99.710				Time:	22:35:13	Log-Likelihood:	-91.857					
No. Observations:	35	AIC:	205.4				No. Observations:	35	AIC:	189.7					
Df Residuals:	32	BIC:	210.1				Df Residuals:	32	BIC:	194.4					
Df Model:	2						Df Model:	2							
Covariance Type:	nonrobust						Covariance Type:	nonrobust							
	coef	std err	t	P> t	[0.025	0.975]		coef	std err	t	P> t	[0.025	0.975]		
const	-2.8706	1.060	-2.709	0.011	-5.029	-0.712	const	0.3412	0.847	0.403	0.690	-1.384	2.066		
andrews	2.8563	1.962	1.455	0.155	-1.141	6.854	andrews	-1.5697	1.568	-1.001	0.324	-4.764	1.624		
neal	2.1706	1.691	1.284	0.208	-1.274	5.615	neal	-0.5230	1.351	-0.387	0.701	-3.275	2.229		
Omnibus:		0.284	Durbin-Watson:				1.826	Omnibus:		0.694	Durbin-Watson:				2.456
Prob(Omnibus):		0.903	Jarque-Bera (JB):				0.410	Prob(Omnibus):		0.707	Jarque-Bera (JB):				0.711
Skew:		-0.047	Prob(JB):				0.815	Skew:		0.072	Prob(JB):				0.701
Kurtosis:		2.478	Cond. No.				3.32	Kurtosis:		2.317	Cond. No.				3.32

Figure 1: Regression output surgeon predicting strikeout percentage (left) and walk percentage (right)

OLS Regression Results							OLS Regression Results						
Dep. Variable:	fastrpm		R-squared:		0.023		Dep. Variable:	hardhit		R-squared:		0.091	
Model:	OLS		Adj. R-squared:		-0.039		Model:	OLS		Adj. R-squared:		0.034	
Method:	Least Squares		F-statistic:		0.3697		Method:	Least Squares		F-statistic:		1.599	
Date:	Mon, 15 Apr 2024		Prob (F-statistic):		0.694		Date:	Mon, 15 Apr 2024		Prob (F-statistic):		0.218	
Time:	22:35:13		Log-Likelihood:		-220.00		Time:	22:35:13		Log-Likelihood:		-112.40	
No. Observations:	35		AIC:		446.0		No. Observations:	35		AIC:		230.8	
Df Residuals:	32		BIC:		450.7		Df Residuals:	32		BIC:		235.5	
Df Model:	2						Df Model:	2					
Covariance Type:	nonrobust						Covariance Type:	nonrobust					
	coef	std err	t	P> t	[0.025	0.975]		coef	std err	t	P> t	[0.025	0.975]
const	-3.4118	32.952	-0.104	0.918	-70.532	63.709	const	0.3294	1.523	0.216	0.830	-2.773	3.432
andrews	43.4118	61.015	0.711	0.482	-80.871	167.695	andrews	-4.5008	2.820	-1.596	0.120	-10.245	1.244
neal	-11.2246	52.573	-0.214	0.832	-118.312	95.863	neal	-3.1567	2.430	-1.299	0.203	-8.106	1.793
Omnibus:	19.493		Durbin-Watson:		1.720		Omnibus:	4.872		Durbin-Watson:		1.906	
Prob(Omnibus):	0.000		Jarque-Bera (JB):		44.455		Prob(Omnibus):	0.088		Jarque-Bera (JB):		3.450	
Skew:	-1.146		Prob(JB):		2.22e-10		Skew:	-0.567		Prob(JB):		0.178	
Kurtosis:	8.023		Cond. No.		3.32		Kurtosis:	4.038		Cond. No.		3.32	

Figure 2: Regression output surgeon predicting fastball rpm (left) and hard hit percentage (right)

OLS Regression Results							OLS Regression Results						
Dep. Variable:	fastvelo	R-squared:	0.077				Variable:	exitvelo	R-squared:	0.110			
Model:	OLS	Adj. R-squared:	0.020				Model:	OLS	Adj. R-squared:	0.055			
Method:	Least Squares	F-statistic:	1.344				Method:	Least Squares	F-statistic:	1.984			
Date:	Mon, 15 Apr 2024	Prob (F-statistic):	0.275				Date:	Mon, 15 Apr 2024	Prob (F-statistic):	0.154			
Time:	22:35:13	Log-Likelihood:	-73.038				Time:	22:35:13	Log-Likelihood:	-65.797			
No. Observations:	35	AIC:	152.1				No. Observations:	35	AIC:	137.6			
Df Residuals:	32	BIC:	156.7				Df Residuals:	32	BIC:	142.3			
Df Model:	2						Df Model:	2					
Covariance Type:	nonrobust						Covariance Type:	nonrobust					
	coef	std err	t	P> t	[0.025	0.975]		coef	std err	t	P> t	[0.025	0.975]
const	0.2471	0.495	0.499	0.621	-0.760	1.255	const	0.5471	0.402	1.360	0.183	-0.272	1.366
andrews	1.0815	0.916	1.181	0.246	-0.784	2.947	andrews	-1.1899	0.745	-1.598	0.120	-2.707	0.327
neal	-0.5289	0.789	-0.670	0.508	-2.136	1.079	neal	-1.0652	0.642	-1.660	0.107	-2.372	0.242
Omnibus:	17.133	Durbin-Watson:	1.344				Omnibus:	0.690	Durbin-Watson:	2.231			
Prob(Omnibus):	0.000	Jarque-Bera (JB):	24.807				Prob(Omnibus):	0.708	Jarque-Bera (JB):	0.377			
Skew:	-1.263	Prob(JB):	4.10e-06				Skew:	-0.254	Prob(JB):	0.828			
Kurtosis:	6.260	Cond. No.	3.32				Kurtosis:	2.975	Cond. No.	3.32			

Figure 3: Regression output surgeon predicting fastball velocity (left) and average exit velocity (right)

OLS Regression Results						
Dep. Variable:	whip	R-squared:	0.131			
Model:	OLS	Adj. R-squared:	0.077			
Method:	Least Squares	F-statistic:	2.422			
Date:	Mon, 15 Apr 2024	Prob (F-statistic):	0.105			
Time:	22:35:13	Log-Likelihood:	-3.0036			
No. Observations:	35	AIC:	12.01			
Df Residuals:	32	BIC:	16.67			
Df Model:	2					
Covariance Type:	nonrobust					
	coef	std err	t	P> t	[0.025	0.975]
const	0.1494	0.067	2.234	0.033	0.013	0.286
andrews	-0.2351	0.124	-1.899	0.067	-0.487	0.017
neal	-0.1803	0.107	-1.690	0.101	-0.398	0.037
Omnibus:	4.066	Durbin-Watson:	2.236			
Prob(Omnibus):	0.131	Jarque-Bera (JB):	2.672			
Skew:	0.595	Prob(JB):	0.263			
Kurtosis:	3.643	Cond. No.	3.32			

OLS Regression Results

Dep. Variable:	era	R-squared:	0.149			
Model:	OLS	Adj. R-squared:	0.096			
Method:	Least Squares	F-statistic:	2.795			
Date:	Mon, 15 Apr 2024	Prob (F-statistic):	0.0761			
Time:	22:35:13	Log-Likelihood:	-64.252			
No. Observations:	35	AIC:	134.5			
Df Residuals:	32	BIC:	139.2			
Df Model:	2					
Covariance Type:	nonrobust					
	coef	std err	t	P> t	[0.025	0.975]
const	0.7553	0.385	1.963	0.058	-0.029	1.539
andrews	-0.9696	0.713	-1.361	0.183	-2.421	0.482
neal	-1.3998	0.614	-2.280	0.029	-2.650	-0.149
Omnibus:	0.243	Durbin-Watson:	2.203			
Prob(Omnibus):	0.886	Jarque-Bera (JB):	0.435			
Skew:	0.110	Prob(JB):	0.804			
Kurtosis:	2.500	Cond. No.	3.32			

Figure 4: Regression output surgeon predicting Whip (left) and Era (right)

OLS Regression Results						
Dep. Variable:	recov		R-squared:	0.194		
Model:	OLS		Adj. R-squared:	0.144		
Method:	Least Squares		F-statistic:	3.854		
Date:	Mon, 15 Apr 2024		Prob (F-statistic):	0.0316		
Time:	22:35:12		Log-Likelihood:	-127.31		
No. Observations:	35		AIC:	260.6		
Df Residuals:	32		BIC:	265.3		
Df Model:	2					
Covariance Type:	nonrobust					
	coef	std err	t	P> t	[0.025	0.975]
const	20.0588	2.332	8.601	0.000	15.308	24.809
andrews	9.3697	4.318	2.170	0.038	0.574	18.166
neal	-3.3316	3.721	-0.895	0.377	-10.911	4.248
Omnibus:	14.669		Durbin-Watson:		1.845	
Prob(Omnibus):	0.001		Jarque-Bera (JB):		18.040	
Skew:	1.174		Prob(JB):		0.000121	
Kurtosis:	5.619		Cond. No.		3.32	

Figure 5: Regression output surgeon predicting recovery time

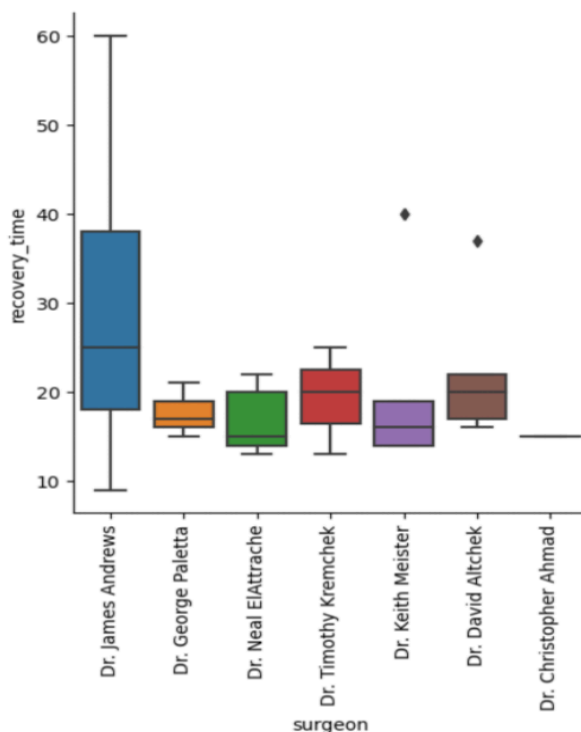
The results of our initial methodology considering surgeons predicting differences in statistics went how we expected it to for the most part. The surgeons did not seem to have a significant impact on statistics. As seen in figures 1-4 the p values of the first 8 models were all greater than 0.05 showing the surgeon performing the surgery didn't impact the statistics. We did find that the era and whip p values were closer to 0.05 which caused us to explore a second question. Figure 5 shows the only thing statistically significantly impacted by the performing

surgeon of the Tommy John surgery. Dr. Neal ElAttrache was shown to reduce recovery time by 3 months when compared to other surgeons. This was validated as being statistically significant as seen by a p-value of 0.03. This conclusion was validated by an output table and a box plot which can be seen in Figures 6 and 7 below.

[12]:

	count	mean	std	min	25%	50%	75%	max
surgeon								
Dr. Christopher Ahmad	1.0	15.000000	NaN	15.0	15.0	15.0	15.0	15.0
Dr. David Altchek	5.0	22.400000	8.502941	16.0	17.0	20.0	22.0	37.0
Dr. George Paletta	3.0	17.666667	3.055050	15.0	16.0	17.0	19.0	21.0
Dr. James Andrews	7.0	29.428571	17.775049	9.0	18.0	25.0	38.0	60.0
Dr. Keith Meister	5.0	20.600000	11.036304	14.0	14.0	16.0	19.0	40.0
Dr. Neal ElAttrache	11.0	16.727273	3.495452	13.0	14.0	15.0	20.0	22.0
Dr. Timothy Kremchek	3.0	19.333333	6.027714	13.0	16.5	20.0	22.5	25.0

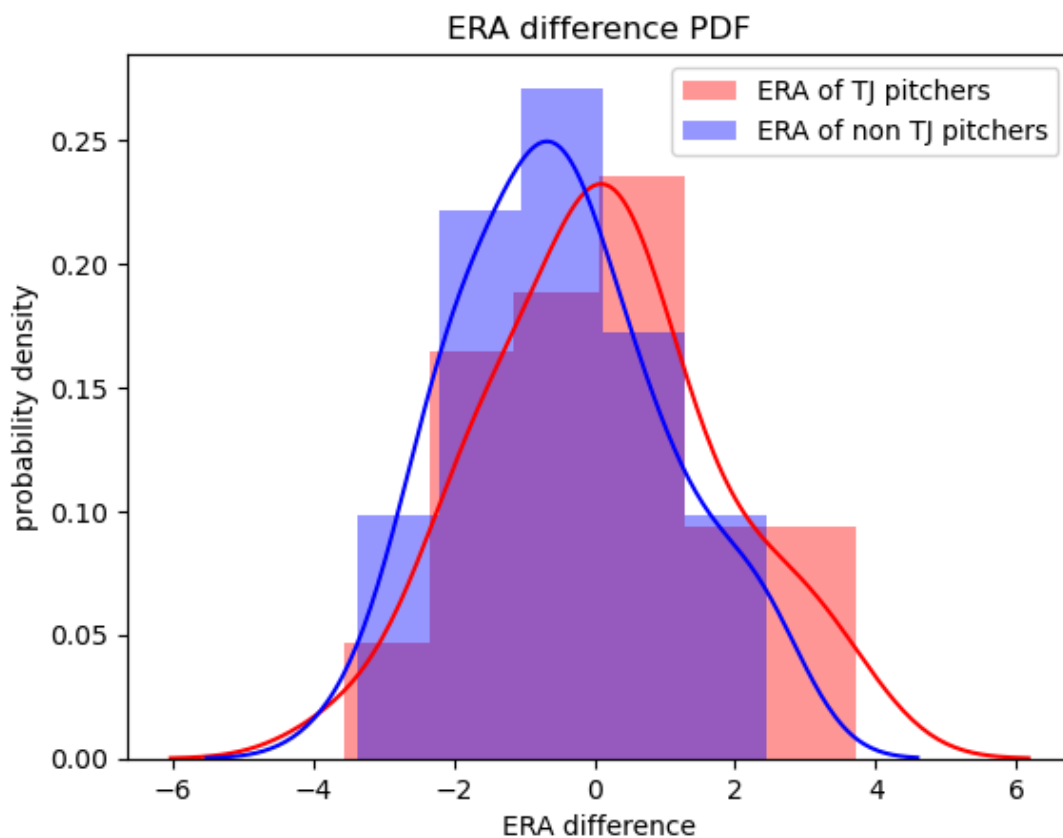
Figure 6: Output table showing surgeons statistics as it pertains to recovery time.



Both figures 6 and 7 confirm that Dr. Neal is the best surgeon to pick if you want to recover the fastest. He has treated the most patients (11) and still has the lowest mean recovery time of almost 17 months. His standard deviation is also one of the smallest which is impressive given the number of patients treated. Interestingly Dr. James Andrews has one of the highest means in part due to his extremely high standard deviation.

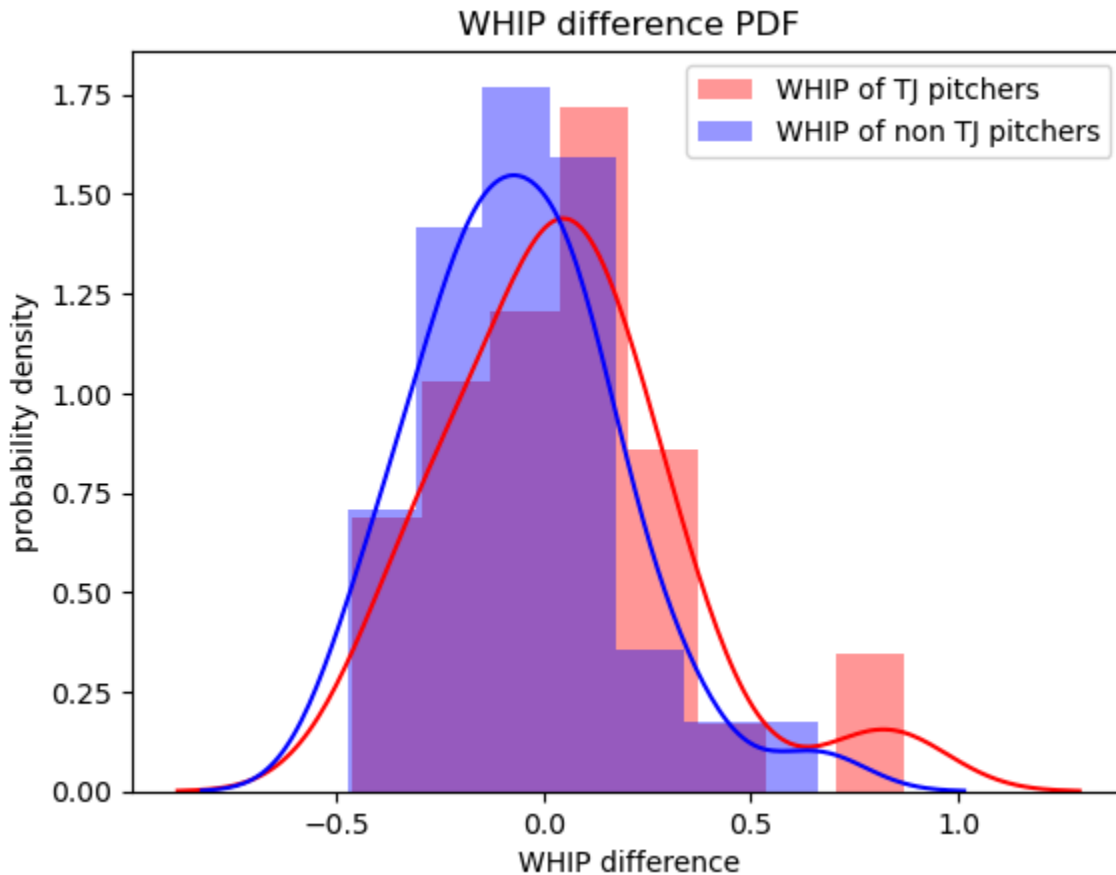
Figure 7: Box plot of output table

The study's second research question aimed to investigate whether there exists a statistically significant difference between the statistics of pitchers who underwent Tommy John surgery and those who did not. Given that the most significant disparity was observed in the difference between a pitcher's ERA and WHIP from the year before surgery to their return year, conducting a test to compare non-Tommy John pitchers with those who underwent the surgery was important for the study's objectives. To achieve this, two independent t-tests were conducted to identify any statistical significance. Test number one involved comparing a list of Tommy John pitchers' ERA differences with a list of non-Tommy John pitchers' ERA differences. The second test is the same but performed on WHIP instead of ERA. The results of these tests are as follows.



T-Test Result: statistic=1.591418198901537, p value=0.11615403130184827, df=68.0

The result of the ERA T-Test shows no statistical significance because of the p-value greater than 0.05. However, by analyzing the graph of the normal distribution of the two data sets it is an interesting observation that pitchers post-Tommy John appear to be improving in performance more than pitchers without the surgery.



T-Test Result: statistic=1.6424610891642755, p value=0.10511137950195451, df=68.0

The result of the WHIP T-Test also indicates no statistical significance, with a p-value greater than 0.05. However, similar to the ERA T-Test, the observation remains consistent: pitchers post-Tommy John surgery seem to exhibit greater performance improvement compared to pitchers without the surgery.



