

The B-List: 6/15

Written by {ga=stevebuffum}
Monday, June 15 2009 7:00 PM -

Now that's what you call a painful loss. However, as we've seen over the course of the past several years, painful losses often lead to incredibly entertaining B-List's, and that's what has happened here today. In today's column, Buff brings back one of my favorite B-List features ... the Armchair Medical Diagnosis. Buff identifies the players that led to last night's 14-12 loss, and diagnoses what ails them. Enjoy.

FINAL

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Brewers (35-29)

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The B-List: 6/15

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Indians (29-37)

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W: Coffey (2-1)

L: R. Perez (1-2)

S: Hoffman (16)



Short column today due to work constraints. Also, I have gone insane and need to prepare my lawsuit against Carl Willis.

Today's topic: Armchair Medical Diagnosis from a Distance!

1) Carl Pavano

I am concerned about Carl Pavano. Consider that in his last two starts, he has been truly pathetic, giving up an average of over two hits an inning, striking out a total of 3 after raising his rates earlier in the season. He is being hit harder, and has no compensation.

The reason for this is pretty obvious to anyone who watched his performance: Pavano is simply throwing too high in the zone. It's not like Pavano was exactly a groundball machine early in the season, but look: his location is just terrible. It's just flat-out too high. Pava no's stuff isn't good enough to live that high, even if he is throwing strikes (63 in 97 pitches, but so what?).

Consider this passage from Will Carroll's "Under the Knife" column from 6/15 (premium piece):

Isringhausen made one final pitch, sailing it high and outside. It didn't take a medhead to tell you he had an elbow problem One interesting note is that the high-and-wild pitch often indicates an elbow problem. As the elbow 'gives,' especially in the tear/rupture of the UCL, the forward rotational force of the arm will lose the tension of the UCL and snap back slightly, causing the wrist to end up a little more skyward than intended. When a shoulder gives, the opposite happens, pushing the ball down since the rotator cuff is a muscle designed to decelerate the arm. If it can't do its job, the arm will rotate through faster, and will usually cause a pitch to go dirtward.

I can't say for certain that Pavano has hurt his elbow. On the other hand, Pavano has hurt pretty much everything in his body at one point or another, and there's no denying that his pitches are sailing on him in a way that they weren't before.

Diagnosis: elbow pain

2) Greg Aquino

Greg Aquino has always had trouble with his control. Consider his career numbers:

2004: 35 1/3 IP, 17 BB

2005: 31 1/3 IP, 17 BB

2006: 48 1/3 IP, 24 BB

2007: 14 IP, 5 BB

2008: 9 1/3 IP, 9 BB

2009 (to date): 15 IP, 12 BB

Early in his career, he was walking about a man every other inning. This has morphed into walking a man EVERY inning.

And if you watched the first batter of the 7th

inning, you didn't see a walk, you saw Brownian Motion.

Aquino didn't just

miss

, he missed by a LOT.

The thing that strikes me about Aquino's motion is how many moving parts it has. The motion generates good movement and velocity, but with the leg flying out and the upper body twisting around and the arm coming sort of around the horn, it looks like there isn't any way on God's Green Earth to duplicate this from one pitch to the next.

Sure, Luis Tiant did this, and Lord knows, there wasn't a kid in my neighborhood who didn't throw a Luis Tiant Wiffleball Pitch at some point in his career, but then, I tried a Dan

Quisenberry delivery later on and threw the ball over the house.

This is not an easy delivery to master.

I have no good answer to this: this is the way Aquino must deliver the ball to be successful, and you have to accept that sometimes, he cannot put the ball where he wants it to go (or, truthfully, within a large dog of where he wants it to go).

Diagnosis: needs counseling session from the Ministry of Silly Motions

3) Luis Vizcaino

Truthfully, Vizcaino did not pitch completely terribly. He wasn't *terribly* wild, throwing 20 of his 33 pitches for strikes, and he did record 4 outs without giving up a hit.

The thing is, since he didn't give up a hit, you would think that he would have trusted his stuff more.

In his first inning, he pitched carefully to Prince Fielder and walked him, then gave up a sac fly and got two more air outs.

He got a fourth fly out to start the 8th

, then inexcusably walked the #9 hitter Mike Rivera, who isn't actually any good.

He then lost Craig Counsell (although his foul ball on the 3-1 pitch would likely have been an out had he not gotten in front of it so much) and left the game.

Sleep apnea is a condition in which a person has periodic pauses in breathing during sleep. This can go on undiagnosed for a number of years, and the sufferer may become conditioned to daytime sleepiness and fatigue.

Which is the only explanation I can find for walking Mike Rivera with no one on base in a 12-8 ballgame.

Diagnosis: sleep apnea

4) Matt Herges

When you are brought in because the previous pitcher could not throw strikes, and then you do not throw strikes, this is very maddening.

Aldrich Ames was a CIA analyst who had a promising professional life but was induced by financial troubles and personal life problems to spy for the Soviet Union. Although he was ostensibly working for the CIA as a counterintelligence operative, he was convicted in 1994 of passing the names of American agents to the KGB for millions of dollars.

I believe that there is no more-explicable reason for Matt Herges to come into a winnable game and throw complete garbage than that he is actually working for the Detroit Tigers.

Diagnosis: double agent

5) Jhonny Peralta

The *euhaplorchis californiensis* is an interesting parasite with an unusual three-host life cycle. Its mature form lives in shorebirds, who release the parasite's eggs with their droppings.

These droppings are eaten by horn snails: the parasites hatch, quickly sterilize the snails, and then release larva into the marshes in which the snails live.

These larva attach to the gills of a small fish known as the killifish and make their way along a nerve to the brain cavity. The parasite then forms a "carpet-like layer" over the fish's brain, then releases chemicals into the brain that make the fish jerk and flash its shiny belly on the surface of the water. That is, the fish is normally dull on top (so it cannot be easily-seen by birds of prey) and shiny on the bottom (so it cannot be easily-seen by

water predators looking up into the sunlight): the parasite actually changes the behavior of the killifish so that it is 30 times as likely to be eaten by a bird.

And, of course, the parasite then matures, lives in the bird's gut, and starts the cycle over again.

(Source: "Parasite Rex," by Carl Zimmer)

I cannot be certain that this parasite is responsible for Jhonny Peralta's continued insistence at flailing helplessly at every slider ever thrown a foot outside by any pitcher at any time ever, but it is as good an explanation as I've got. Whereas the *euhaplorchis californiensis* tries to induce its host to be eaten by a bird, I can only speculate that whatever variant has inhabited Peralta is trying to get him traded to the Washington Nationals, perhaps in order to influence his actions after he gets a lobbying job after his playing career is over.

Diagnosis: acute Vardaman Syndrome with *euhaplorchis californiensis* variant parasitization.

6) Raffy Perez

This is a tricky one, in that it appears to feature two potentially additive conditions. Hyperventilation, which Perez appears to practice on the mound, can cause numbness of the hands as well as lightheadedness.

This would help explain the complete absence of feel Perez has on his pitches.

In addition, such sensory impairment (he cannot see the plate, he cannot hear instructions) and lack of coordination can also be due to acute mercury poisoning.

Also, he is terrible.

Diagnosis: mercury poisoning exacerbated by hyperventilation and terribility

7) Ben Francisco

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Well, he's just not very good.