

FACTS ABOUT CONCUSSIONS

The term concussion might make you think of someone knocked unconscious while playing sports. But concussions – temporary disruptions of brain function– can happen with any traumatic head or brain injury, often without loss of consciousness, and often off the playing field.

Other terms for a concussion include “head injury” and “mild traumatic brain injury”. A concussion is usually caused by a bump, blow, or jolt to the head. The soft tissue of the brain is cushioned by spinal fluid and protected by the skull which is a very hard covering made of bone that works as a helmet. But if the head is hit or jolted hard enough, the brain can be shaken inside the skull causing a concussion. For children, with developing brains, a concussion can be especially dangerous.

Parents are usually ideally suited to recognize the signs and symptoms of a concussion, which can develop within 24 to 72 hours after a head injury. Dial 911 or go to the Emergency Room right after a head injury if your child: can't be awakened – has convulsions/seizures – has slurred speech – is getting more confused, restless, sleepy, or agitated – is vomiting – has a headache that gets worse or won't go away.

Knowing the facts about concussions can help parents recognize signs and symptoms that are typically classified into four categories: physical, cognitive (how the brain processes information), emotional, and sleep pattern. If parents observe any of the following signs and symptoms associated with a concussion they should seek prompt medical attention for their child. A health care professional experienced in evaluating a child for a concussion can determine the seriousness of the brain injury.

PHYSICAL: Headache – dizziness – nausea and vomiting – difficulty with coordination or balance (not able to catch a ball, perform easy tasks, etc.) – blurred vision – ringing in the ears – visual impairment – sensitive to noise and light – numbness – fatigue.

COGNITIVE: Confused/dazed – difficulty concentrating, thinking, making decisions – trouble remembering things – slurred speech or not making sense – difficulty paying attention.

EMOTIONAL: Feeling anxious, irritable – feeling sad or depressed – anxiety.

SLEEP RELATED: Excessive drowsiness – trouble falling asleep – sleeping more or less than normal.

TREATMENT: Because each concussion is unique, symptoms can differ in severity. For this reason, treatment depends on a child's particular condition and situation. If a concussion is not serious enough to require hospitalization, a doctor will give you instructions for home care. This includes watching the child closely for the first 24 to 48 hours.

PHYSICAL REST: The brain needs time to heal after a concussion. While a child still has symptoms, he/she should do only basic activities and refrain from sports and physical activities. When all symptoms are gone children should return to physical activities slowly, as advised by a health care professional.

MENTAL REST: This means prompt initiation of avoiding cognitive or thinking activities, such as schoolwork, reading, using electronic devices, and/or TV/video games. It is important for the brain to rest completely during early recovery, but the optimum duration of strict rest is still being investigated. An important study reported in the February 2015 issue of the journal Pediatrics concluded that strict rest for one to two days with stepwise return to activity is currently the best strategy for pediatric patients with mild traumatic brain injury/concussion. The approach to be used with your child should be guided by a health care professional.

Signs and symptoms of a concussion may not be noticeable for days or weeks following the injury or may recur. Seek medical attention if you or your child notice any delayed signs or symptoms.

PROVIDE A HEALTHY LIFESTYLE: During the time that your child is healing, continue to offer healthy foods and encourage your child to drink plenty of water.

ENCOURAGE REST: Earlier bed time, no late nights. Encouraging naps during the day is also advisable.

SCHOOL: Immediately contact the school and share any recommendations you received from your doctor. When your child is well enough to return to school, have teachers and other school staff monitor your child closely for the next 1-2 months looking for physical, thinking, behavioral and emotional problems.

Stay in close contact with the school. Upon returning to school if problems do occur and last for more than 1-2 weeks, your child should be rechecked by your doctor or a healthcare professional who specializes in concussions.

RESOURCES TO CONTACT & ADDITIONAL INFORMATION

United States Department of Health and Human Services Center for Disease Control and Prevention (www.cdc.gov/concussion) or call 1-800-CDC-INFO

Nationwide Children's Hospital: A Parent's Guide to Concussions

(<http://www.nationwidechildrens.org/parents-guide-to-concussions>)

Kids Health – Head Injuries

(http://kidshealth.org/parent/firstaid_safe/emergencies/head_injury.html)

Kids Health (http://kidshealth.org/parent/firstaid_safe/home/conc

Safe Kids (<http://www.safekids.org/guide/concussion-guide-parents>)

Concussion management

(<http://www.medpagetoday.com/Neurology/HeadTrauma/49490>)