December 2012
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Tackling Risks of Concussion Head-On

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There’s nothing like football season to raise the concussion discussion to the top of everyone’s mind.

Head injuries, including concussions, and especially in the game of football, have been a subject of deep concern, much study, and even congressional hearings in recent years. In past weeks, the topic seems to be everywhere:

- Studies published this month in the scientific journals *Brain* and *The Journal of Neuroscience* added to growing evidence that head trauma, especially repeated hits to the head, can lead to long-term, degenerative brain disease.

- A Montana legislator plans to introduce a bill during the 2013 session to prevent young athletes from returning to play too soon after a concussion. According to the Brain Injury Alliance of Montana, ours is one of only about 10 states that doesn’t have such legislation on the books.

- A class-action lawsuit involving thousands of former football players may go to court as early as next month. The players have accused the National Football League of hiding information about the risks of head trauma.

What Is Concussion

A concussion is a type of traumatic brain injury caused by a bump, blow, or jolt to the head. It can change the way your brain normally works. The effects can be short- or long-term.

Concussions can occur in any sport or recreational activity, including soccer, hockey, basketball, snowboarding, bicycling, sledding, ATM riding, and even playground activities, just to name a few. Among older people, falls are the most common cause.

The Centers for Disease Control and Prevention (CDC) estimate that Americans experience 1.6 million to 3.8 million concussions a year. While football has been the sport with the greatest concussion risk for males (75 percent chance), soccer has presented the greatest risk for females (50 percent chance).
Symptoms and Recovery

Symptoms of concussion include headache, nausea, blurry vision, dizziness, confusion, memory loss, fatigue, mood changes, and sleep problems. Most concussions don’t cause loss of consciousness and aren’t life-threatening.

According to the Sports Concussion Institute, an estimated 47 percent of athletes report feeling no symptoms after a concussive blow. But one of the characteristics of a brain injury is not recognizing the problems it causes.

Most people who have a concussion recover quickly and completely. But for some, symptoms can last days, weeks, or even longer, and the effects can be serious. Recovery may be slower among older adults, young children, and teens.

Individuals who have suffered a concussion may be as much as four times more likely to experience head injuries in the future. After the first concussion, it takes less of a blow to cause injury and takes longer for a person to recover.

Risks and Responses

As public health professionals, we routinely promote the many health benefits of physical activity, so it’s with reluctance that we focus on one of its risks. The last thing we want is to discourage people from participating safely in sports and recreation.

The fact is, nearly every activity involves some risk. The key in this case is to find ways to prevent head trauma and to respond quickly and properly when such injuries occur.

The NFL and the Montana High School Association are among the many organizations that have tackled the problem of concussions head-on in recent years.

The NFL has adopted a new “sideline concussion assessment protocol” that involves removing an injured player from the game and assessing their condition before allowing them to return to play. The MHSA took a positive step two years ago, when it revised its rule regarding concussions among high school athletes in all sports.

The previous MHSA rule required “apparently unconscious” players to leave the game and not return without written authorization from a physician. Under the new rule, first used during the 2010-11 school year, any athlete who “exhibits signs, symptoms, or behaviors consistent with a concussion” must be removed from the game until examined by a health-care professional.

While such rule changes are steps in the right direction, they don’t address all situations in which there is a risk of concussion. Many youth and adults are involved in non-school sports leagues and noncompetitive recreational activities. Doing so safely will always be at least partly the responsibility of individuals, coaches, officials, and parents.

Preventing Concussions

The mission of the Lewis and Clark City-County Health Department is to protect and improve the health of all county residents.
To reduce the risk of concussion, the CDC recommends that parents and athletes find out if their school or league has a concussion policy. It also suggests:

- Making safety the first priority in any sport or activity.
- Teaching and practicing safe playing techniques (for example, tackling in football without hard head-to-head contact).
- Following the rules of play, and encouraging good sportsmanship and strict officiating.
- Using or requiring the right protective equipment for the activity (such as a helmet or seat belt), and make sure it’s well-maintained, worn correctly, and fits properly.
- Making sure you (or your players) are fit and well-conditioned. Find out if any of your athletes has ever had a concussion.
- Accepting and teaching that it’s not smart to play with a concussion. Don’t foster a “tough-it-out mentality” that pressures injured athletes to play. Rest is crucial after a concussion. Anyone suspected of having a brain injury should not return to play until evaluated by an experienced health-care provider.
- Learning more about concussion, including its signs and symptoms and how to respond. The CDC offers free online training courses for parents, coaches, trainers, athletes, and others at [www.cdc.gov/concussion/HeadsUp/online_training.html](http://www.cdc.gov/concussion/HeadsUp/online_training.html).
- Reducing your risk of falls. Check out the tips at [www.cdc.gov/Features/OlderAmericans/](http://www.cdc.gov/Features/OlderAmericans/).