

The Medical Minute: Be cautious with concussions

7 April 2010, By Harry B. Bramley

A concussion in young athletes can cause significant problems, especially if not recognized and treated properly.

The risk for concussion can certainly be reduced by using the proper equipment and following the rules, but it will never be eliminated. [Soccer players](#) and lacrosse players risk collisions with opponents or striking their head on the ground after a fall. Softball and baseball catchers and umpires risk getting concussions from foul balls.

Is It a concussion?

The first step in proper concussion management is recognition. A concussion is a [brain injury](#) that is defined as any trauma that results in a mental status change. The [athlete](#) who has sustained a loss of consciousness clearly has had a mental status change and has suffered a concussion, but at times this mental status change may be subtle and not easily recognized by the coach, parent or trainer. Other indications of a concussed athlete include: responding to questions more slowly, not following directions properly, appearing confused, or having a dazed or stunned appearance.

It also is important that all athletes become familiar with symptoms that could indicate a concussion has occurred. The baseball catcher who takes a foul ball off his mask and develops a headache and some transient [dizziness](#), or the soccer player who strikes her head on the ground and then feels nauseated, confused, and has blurred vision have probably suffered concussions.

What to do about It?

It is critical that kids receive prompt and proper treatment when a concussion happens. The athlete who returns to play prior to complete resolution of the concussion is at risk for significant [brain damage](#) and long-term complications. The initial treatment is rest, both from a physical

and cognitive standpoint. The athlete may need to miss a few days of school and avoid activities such as reading, writing or texting, which may exacerbate symptoms.

Once symptoms have resolved, a gradual return to activity should occur. Approval for returning to full activity with no restrictions will happen when the athlete is symptom-free at rest, symptom-free with both heavy cognitive and physical exertion, and has returned to his or her baseline neurocognitive functioning.

For additional information about concussions, visit www.cdc.gov/concussion/HeadsUp/youth.html

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