

Q&A: Concussions and youth contact sports

August 19 2014, by Cassie Williams Jones

Concussions occurring from youth tackle football and other sports-related injuries have been a hot topic in American media and pop culture the last couple of years.

According to the Centers for Disease Control and Prevention, emergency department visits for sports- and recreation-related traumatic brain injuries, including concussions, among children and adolescents, increased by 60 percent over the past decade.

While the jury is still out on the heated debate of whether youth should be allowed and encouraged to participate in contact sports, the most important factor is recognizing the signs of a potential concussion in kids who experience [head injuries](#) or falls while playing. Increased awareness and education on brain injuries, as well as elevated acceptance of their severity, can only lead to better outcomes.

Charles Dillard, M.D., medical director of the of the pediatric Traumatic Brain Injury Clinic at the Children's Hospital of Richmond at VCU, regularly treats adolescents with sports-related brain injuries, and explains what to look for when a child experiences a head injury.

What is a concussion?

A concussion is a jolt or blow to the head or body that disrupts the normal neurological functioning of the brain. As a result, it can cause bruising, bleeding, swelling or shearing may result in a traumatic [brain injury](#), or a concussion. The blow could occur in a fall, car accident,

athletic activity or assault.

What are the signs and symptoms of a concussion in an adolescent?

There is a series of important signs to look for, and it's important for parents to have their children seen by their doctor if they suspect a [concussion](#) or [traumatic brain injury](#).

Physical symptoms include dizziness, balance trouble, headache, nausea, numbness/tingling, sensitivity to light and noise, visual problems and vomiting. Cognitive symptoms that may arise are changes in school performance, difficulty concentrating or remembering, confusion about recent events, feeling foggy or dazed, forgetfulness, repeating questions and a slow response time.

The symptoms aren't only physical, though. Children with a brain injury can display emotional symptoms, like irritability, increased emotions, a loss of interest in their favorite activities, sadness and nervousness. Even their sleep and energy levels can be affected. They may be drowsier than usual, fatigued, sleep more than usual or have trouble falling asleep.

How are adolescent concussions different than those in adults?

Adolescents have more concussions than adults, and they recover from them differently.

The increased frequency could be because children typically participate in more activities in which they can get hit in the head. Teenagers are just getting car keys and begging to drive, venturing out to do more things, making them more susceptible to accidents.

Pediatric patients take longer to recover from concussions than adults. Although the reason for this is uncertain, their brains are different and are still growing, maturing and developing. Because of that, the recovery for students can take longer, and symptoms can be more pronounced. Also, that recovery time can vary from kid to kid. In children with multiple brain injuries, the recovery becomes more complex. The more injuries that a patient has, the easier it is to get another, and the less force and impact it takes to cause another injury. Symptoms in multiple-injury patients can also last longer and be more pronounced.

What types of therapies and treatments are available for children recovering from a concussion?

Multidisciplinary treatment is paramount in youth concussions and brain injuries. These injuries are invisible, and children often appear the exact same to their parents or the symptoms can be subtle, making them difficult to treat with medication only.

A comprehensive care team should be enlisted for treatment, including physicians, nurses, physical therapists for balance and coordination recovery, occupational therapists for fine motor or ocular motor problems, speech therapists for thinking and cognitive treatment and psychologists for comprehensive testing to see how they are processing information differently than before the injury, as well as helping with the emotional issues brought on by such injuries. Another important element is an educational consultant, which helps facilitate the patient's return to learning and going back to school so that they will not be academically penalized because of their brain injury.

Provided by Virginia Commonwealth University

Citation: Q&A: Concussions and youth contact sports (2014, August 19) retrieved 10 April 2024 from <https://medicalxpress.com/news/2014-08-qa-concussions-youth-contact-sports.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.