

New concussion guidelines updated to eliminate one key component—prolonged rest

May 18 2017, by Rachel Stern



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Prolonged rest is not ideal when it comes to treating concussion, and in fact, those who are active faster, appear to get better faster.

This is an idea that John Leddy, MD, director of the University at Buffalo Concussion Management Clinic, first proposed about 10 years ago, and now, he says, several studies later, is beginning to be confirmed. It is also an idea that is now reflected in the latest document that guides treatment when it comes to sport-related concussion.

The 2017 Concussion in Sport Group consensus document was developed by experts in the field of concussion for physicians and healthcare providers who are involved in athlete care – at a recreational, elite and professional level. The document, published this month in the *British Journal of Sports Medicine*, is intended to guide clinical practice, Leddy says, as well as guide future research in the field of sport-related concussion.

"This document has major implications in terms of concussion treatment and setting the standard for treatment," says Leddy, who was part of the panel that formed the new [guidelines](#). "It is the most cited [document](#) when it comes to treating concussion. These guidelines are meant to inform practitioners what the latest evidence says and to give advice about how to handle concussion."

Guidelines are released every four years to reflect updates that have taken place in the field of concussion research, he says. The biggest change from 2012 to 2016, Leddy says, was the replacement of the recommendation for complete rest beyond the first few days after concussion with guided and controlled activity.

The old guidelines indicated that individuals should not return to activity until they were asymptomatic. Until that time, the individual was told to do nothing.

"This was known as 'cocoon therapy'," Leddy says, "That was how the old guidelines were interpreted and patients were resting, literally being

told to do nothing, until they were asymptomatic. The problem with that was even non-concussed people often have some symptoms on any given day.

"The guidelines were good at keeping kids from participating at activities that risk another head injury before recovery, but were being interpreted to recommend that any level of exertion was detrimental to the brain. We now know that interpretation was wrong. All over the world, the treatment of complete rest was prolonging symptoms in many people."

After a two-day conference in Berlin, new guidelines about how to best treat concussion for individuals ages six and older were formed. And for the first time, a complete shut-down post-concussion was updated.

"We are not saying, after a [concussion](#), go crazy and resume life as if nothing happened," Leddy says. "What we are saying is that after two days of complete rest, if your symptoms have stabilized and you are starting to feel better, then it is OK to start to gradually do life activities and get your heart rate up a little. Don't just sit in a bed with the lights off."

Leddy says these guidelines have influence all over the world.

The advice offered through the guidelines, he says, is often followed by professional sports teams, college athletic departments, high schools, physical therapists, athletic trainers, sports physicians, primary care doctors and pediatricians.

Provided by University at Buffalo

Citation: New concussion guidelines updated to eliminate one key component—prolonged rest

(2017, May 18) retrieved 26 April 2024 from

<https://medicalxpress.com/news/2017-05-concussion-guidelines-key-componentprolonged-rest.html>

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