



Things That You Need To Know About Concussion

- All concussions are different
- Everyone recovers at own speed
- **The worst thing you can do is have a second concussion when recovering from the first one.**



Definition of Concussion:



A concussion (or mild traumatic brain injury) **is a complex**

pathophysiological **process** affecting the brain, induced by traumatic biomechanical forces secondary to direct or indirect forces to the head

Disturbance of brain function is related to neurometabolic

dysfunction, rather than structural brain injury, and is typically associated with normal structural imaging findings (CT Scan, MRI). Concussion may or may not involve a loss of consciousness. Concussion results in a constellation of physical, cognitive, emotional, and sleep-related symptoms. **Recovery** is a sequential

process and symptoms **may last from several minutes to days, weeks, months, or even longer in some cases.**

What Does it Feel Like to Have a Concussion?

- “I have a bad headache”
- “Light hurts my eyes”
- “Everything sounds louder”
- “I cant concentrate or remember things”
- “I feel like I am in slow motion”
- “My balance is off”
- “I feel nauseated”
- “I feel worse when I exercise”
- “My vision is messed up”
 - “Everything looks blurry”
 - “I see double”

Forces Involved with Concussion

- **Force Vectors**

- Newton's 2nd Law (Force = Mass times Acceleration)

- **Linear (translational) force**

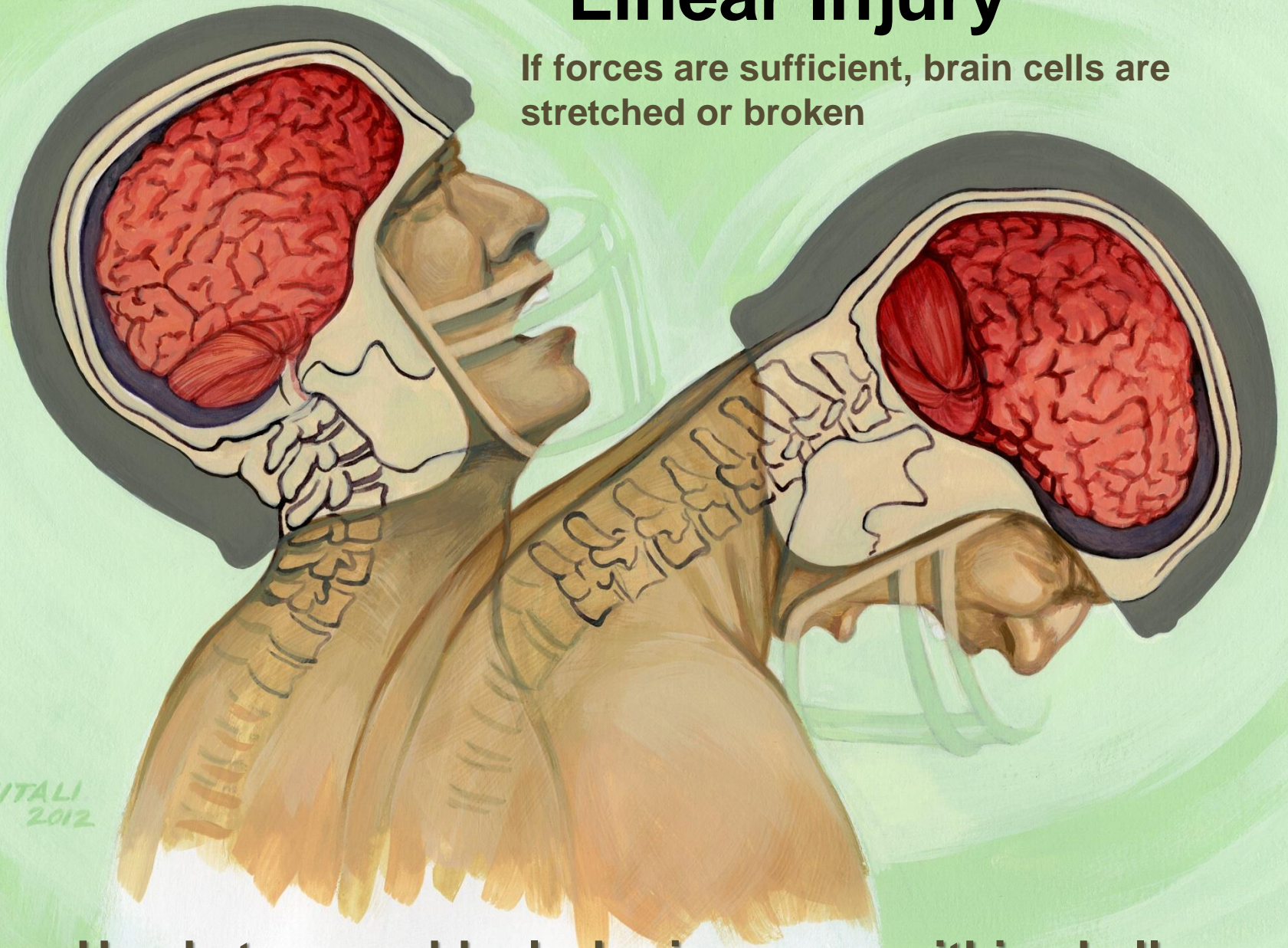
- Compression and stretching of brain cells (neurons)

- **Rotational (angular) force**

- Rotation of the head stretches neurons

Linear Injury

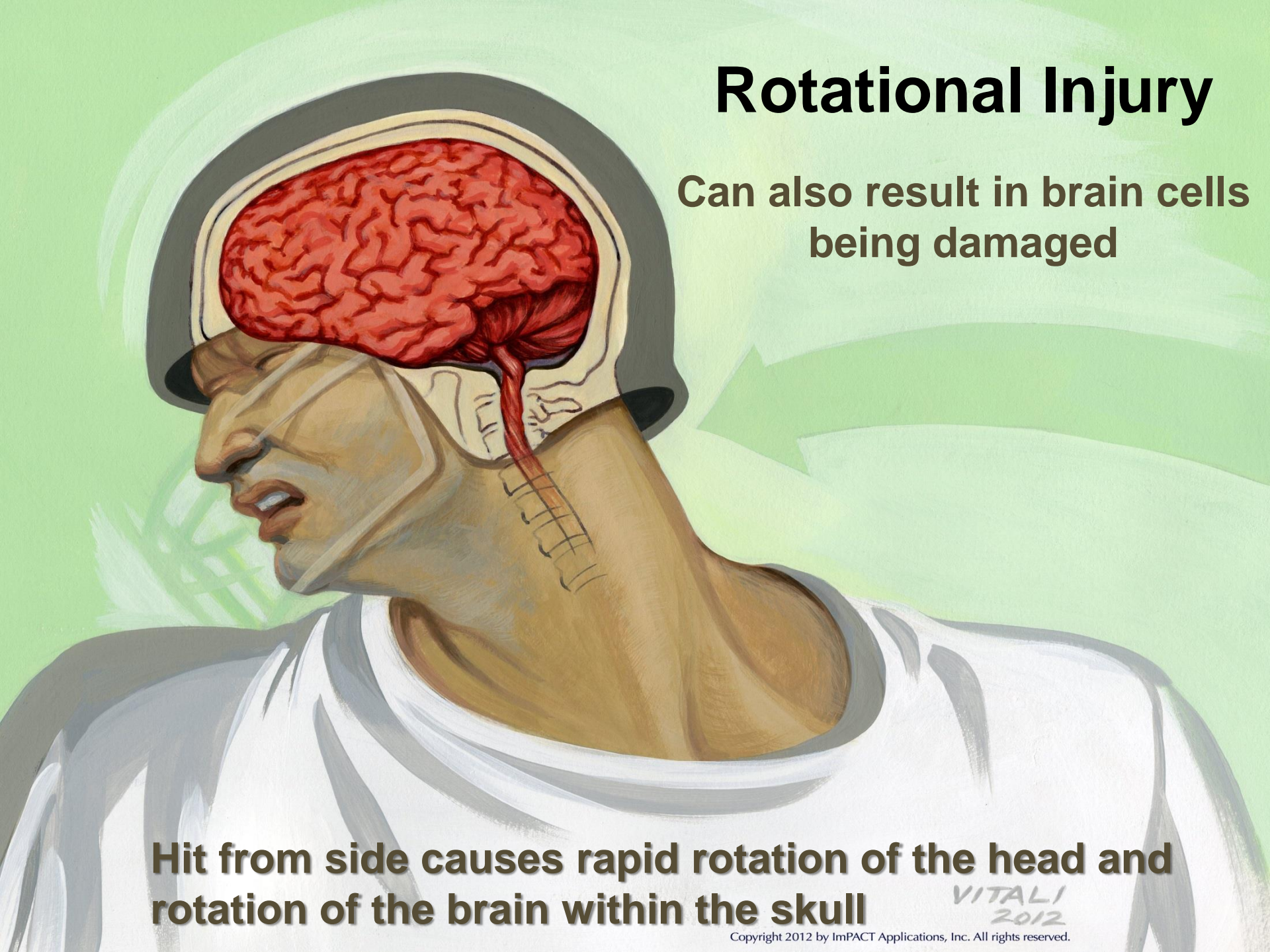
If forces are sufficient, brain cells are stretched or broken



Head stops suddenly, brain moves within skull

Rotational Injury

Can also result in brain cells being damaged



Hit from side causes rapid rotation of the head and rotation of the brain within the skull

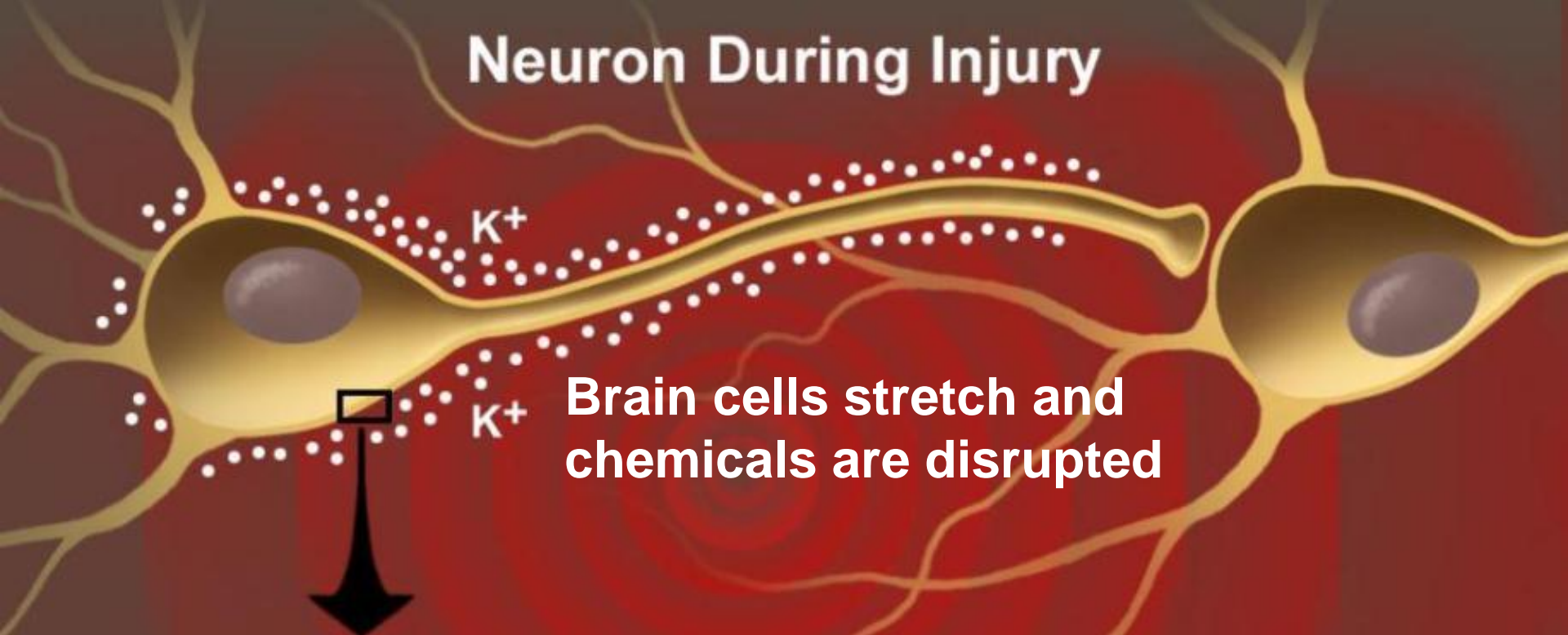
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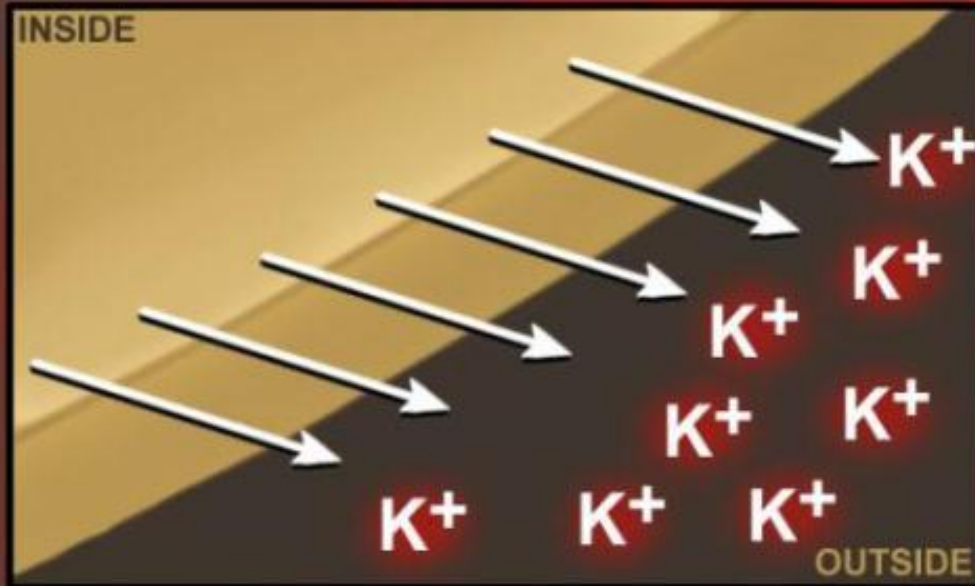
Brain Function and Concussion:

What Happens?

Neuron During Injury




Brain cells stretch and chemicals are disrupted



During injury, potassium ions (K^+) rush out of the cell...

Neuron Following Concussion

A diagram illustrating the recovery of a neuron after a concussion. The neuron is shown in a yellowish-gold color with a purple nucleus. The left side of the neuron is filled with numerous small white dots, representing the initial state of the neuron after a concussion. The right side of the neuron is empty, representing the state after recovery. The text 'Neuron Following Concussion' is at the top, 'The Brain Returns to Normal (in most cases)' is in the middle, and 'After many days' is at the bottom. The background is dark grey.

The Brain Returns to
Normal (in most cases)

After many days

Everyone Recovers at their Own Rate!!



New Technologies

- New devices to measure force
 - Helmet-based sensors
 - Mouth guard sensors
 - Ear piece sensors
 - Other wearable technologies

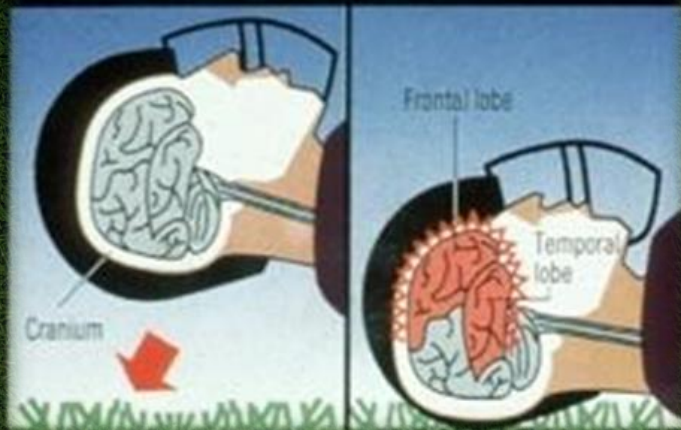
Very useful but never a substitute for diagnosis by healthcare professional

The Pittsburgh Steelers Program (1990's)

- First program to monitor professional athletes
- Resulted in league wide programs in NFL/NHL/MLB
- Resulted in adoption by other sports/leagues/Colleges
- Led to development of ImPACT Program
- Currently over **8 million kids have been tested**

THE BIG CRUNCH

A concussion is a temporary loss of consciousness caused by a blow to the head. The brain shifts violently, sometimes smashing into the skull. Many nerve cells may break, producing such symptoms as headaches, slurred speech and loss of balance or memory.





UPMC HEALTH SYSTEM

PITTSBURGH, PENNSYLVANIA

affiliated with the University of Pittsburgh schools of the health sciences



The ImPACT Program

- Invented in the 1990's to better manage concussion.
- Tests brain functions that are affected by concussion.
- Is designed to be used as part of a comprehensive concussion management program.
- Now used by NFL, NHL, MLB, NASCAR, Indy Racing, Motocross, WWE, MLS, thousands of colleges and High Schools and **Jockeys Guild**.
- Available in 14 languages including Spanish, French, Portuguese and almost all European languages.
- **Over 8 million athletes tested.**



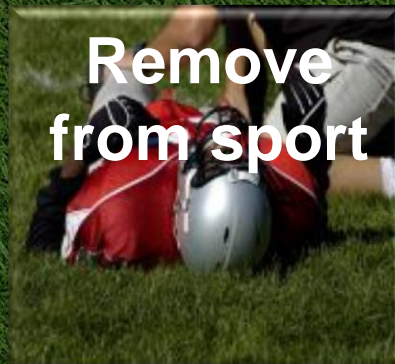
Concussion Management

Pre-
Season

Concussion

1-3 Days?

Return to Sports



- SCAT-II
- Balance
- Vestibular Testing

- Evaluation
- ImPACT
 - Balance
 - Vestibular

- Back to baseline?
- Normal Vest/Balance
- **No symptoms with exertion**

Typical Evaluation

Clinical Interview

Balance and Vestibular-Ocular
(visual) Screening



ImPACT testing

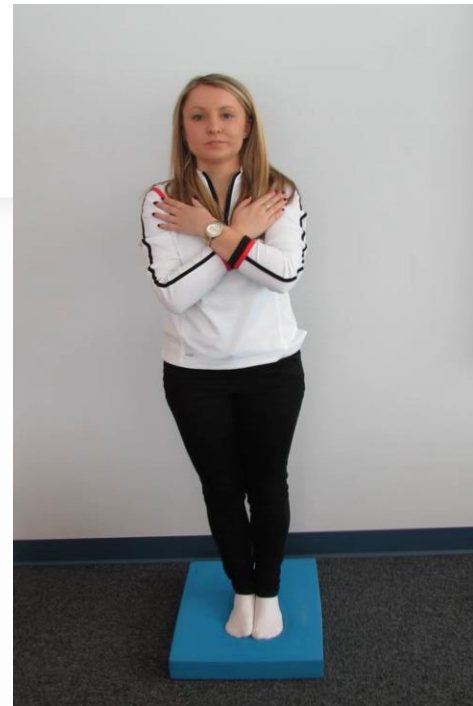


Same day patient feedback



- Severity of Injury?
- Prognosis for Recovery?
- Neuroimaging indicated?
- Referral to Other Doctors?
- Level/type of Physical Exertion Allowed?
- Level of Cognitive Exertion Allowed?
- **Return to Sport?**

Communication to Athlete,
Doctors and to staff



Vestibular and Visual Processes

- Dizziness, Fogginess, Feeling detached
- Motion discomfort, Nausea
- Difficulty in busy visual environments
- Anxiety, nervousness, intolerance to busy places
- Blurred vision, Difficulty with Reading





Returning to Sport After Concussion:

Protecting Your Health



Step 1: Light Aerobic Exercise

The Goal: only to increase an athlete's heart rate.

The Time: 5 to 10 minutes.

The Activities: exercise bike, walking, or light jogging.

Absolutely no weight lifting, jumping or hard running.

Step 2: Moderate Exercise

The Goal: limited body and head movement.

The Time: Reduced from typical routine

The Activities: moderate jogging, brief running, moderate-intensity stationary biking, and moderate-intensity weightlifting

Step 3: Non-contact Exercise

The Goal: more intense but non-contact

The Time: Close to Typical Routine

The Activities: running, high-intensity stationary biking, the player's regular weightlifting routine, and non-contact sport-specific drills. This stage may add some cognitive component to practice in addition to the aerobic and movement components introduced in Steps 1 and 2.

Step 4: Practice

The Goal: Reintegrate in full contact practice activity.

Step 5: Return to Sport

The Goal: Return to competition

Pressure to Return to Sports: Can we rely on what the athlete is telling us?

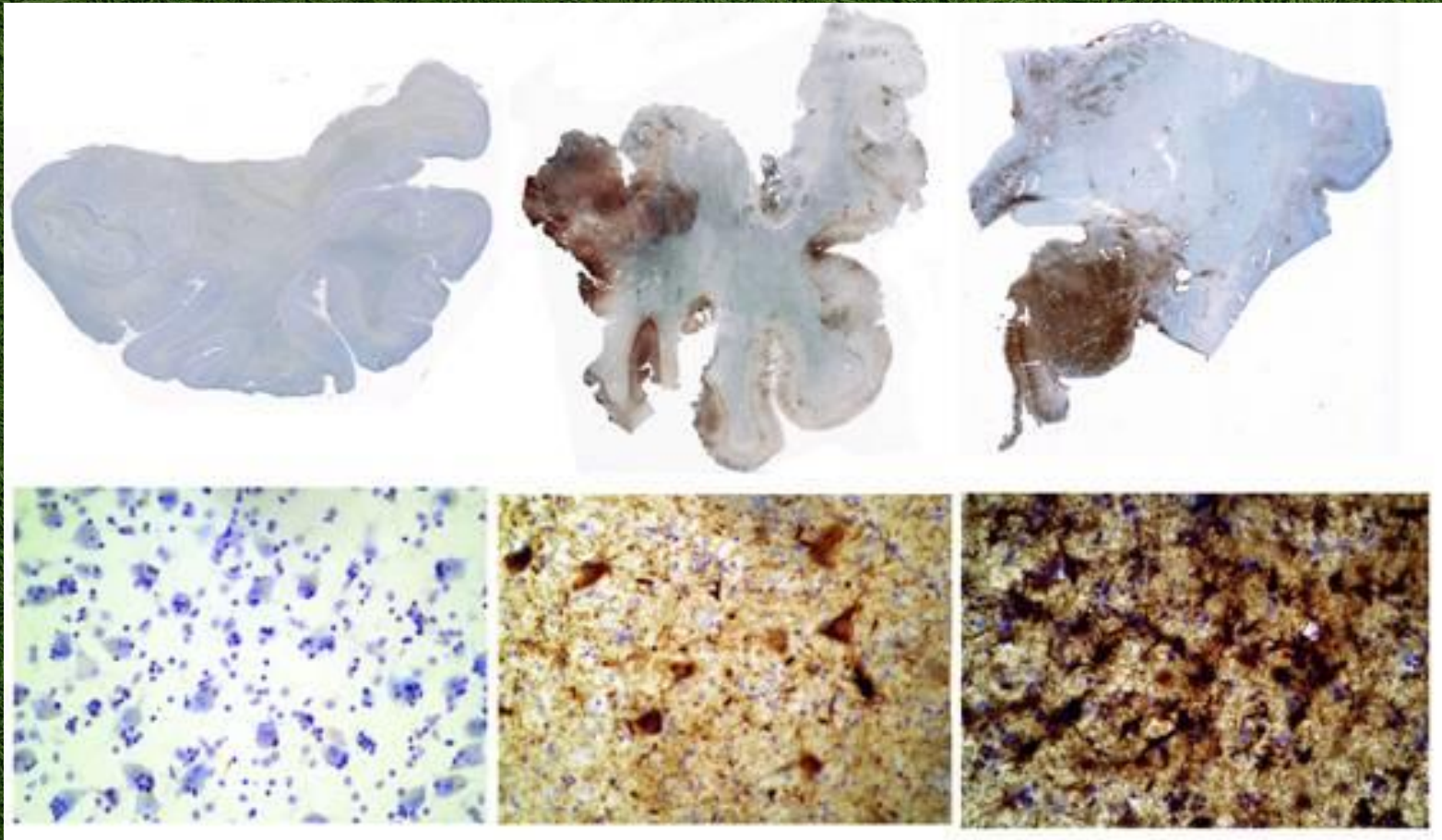
Not Really

- ✓ Athletes should never diagnose their own injury
- ✓ Studies suggest that up to 50% of athletes experience concussion symptoms per year but only 10 percent report having an injury
- ✓ **Returning to sport with to early is dangerous and can delay recovery**

Ongoing Controversies

- How many is too many?
- When is there risk of long-term problems?
- What is the risk of *Chronic Traumatic Encephalopathy (CTE)*?

CTE-What Does it Mean?



Normal

Pro-Football

Boxing

A Lifespan Model of Understanding Concussion



Genetics?

Migraine
HX?

LD/ADD?

Genetic
Expression?
Brain
Development?

Sports?

Bigger?
Faster?
Stronger?
Injury HX?
“Natural
Selection”

CTE?
Aging?
Other Diseases?

Alzheimer's?
Obesity?
HTN/Stroke

Case Example: High School Quarterback

- ✓ 15 year old, Sophomore
 - Honors student, High Average standardized testing
 - No other medical history-no prior concussion
 - Strong migraine history in maternal family
- ✓ In retrospect, difficulties with concussion started on September 11, 2009

He suffered two concussions during season but only reported *after season*



ImPACT™ Clinical Report

High School Football QB

Exam Type	Baseline	Post-injury	Post-injury	Post-injury	Post-injury	
Date Tested	08/13/2008	11/16/2009	11/30/2009	12/18/2009	01/11/2010	
Last Concussion	11/23/2008	09/11/2009	09/11/2009	09/11/2009	09/11/2009	
Exam Language	English	English	English	English	English	
Test Version	4.5.805	4.5.805	4.5.805	4.5.805	4.5.805	
Normative Comparison Group	M 14-15	M 14-15	M 14-15	M 14-15	M 14-15	

Composite Scores *										
Memory composite (verbal)	91	68%	83	38%	77	18%	89	60%	83	38%
Memory composite (visual)†	89	80%	73	36%	55	5%	83	69%	89	80%
Visual motor speed composite	46.58	95%	29.05	19%	29.05	19%	47.33	96%	52.68	99%
Reaction time composite	0.49	90%	0.78	1%	0.76	1%	0.44	97%	0.42	98%
Impulse control composite	4		45		9		2		1	
Total Symptom Score	0		17		18		7		3	

* Scores in **bold** type indicate scores that exceed the Reliable Change Index score (RCI) when compared to the baseline score. However, scores that do not exceed the RCI index may still be clinically significant. Percentile scores, if available, are listed in small type. Please consult your ImPACT User Manual for more details.

† Clinical composite score is available only for exams taken in ImPACT version 2.0 or later.



Exam Type	Baseline	Post-injury	Post-injury	Post-injury	Post-injury	
Date Tested	08/13/2008	11/16/2009	11/30/2009	12/18/2009	01/11/2010	
Last Concussion	11/23/2008	09/11/2009	09/11/2009	09/11/2009	09/11/2009	

Symptom Inventory (at time of exam)

Headache	0	0	2	0	0	
Nausea	0	0	0	0	0	
Vomiting	0	0	0	0	0	
Balance Problems	0	0	1	0	0	
Dizziness	0	0	1	0	0	
Fatigue	0	2	2	0	0	
Trouble falling asleep	0	0	0	0	0	
Sleeping more than usual	0	2	2	1	0	
Sleeping less than usual	0	0	0	0	0	
Drowsiness	0	2	2	0	0	
Sensitivity to light	0	1	1	2	0	
Sensitivity to noise	0	0	0	0	0	
Irritability	0	0	0	0	0	
Sadness	0	0	0	0	0	
Nervousness	0	0	0	0	0	
Feeling more emotional	0	0	0	0	0	
Numbness or tingling	0	0	0	0	0	
Feeling slowed down	0	1	0	0	0	
Feeling mentally foggy	0	2	2	0	0	
Difficulty concentrating	0	4	3	2	2	
Difficulty remembering	0	3	2	2	1	
Visual problems	0	0	0	0	0	
Total Symptom Score	0	17	18	7	3	

Case Example: High School Quarterback

- Athlete had a “mild” injury but did not report it.
- Second injury made things worse
- He put himself at risk for permanent brain injury and required more treatment
- If he would have reported his first injury, he probably would have recovered in a week or two.

Case Example: High School Quarterback

- Initially hid symptoms from Athletic Trainer, coach and parents (told friends)
- Struggled in school and grades dropped
- Severe headaches, dizziness, cognitive problems
- Required vestibular therapy and medical management
- **He risked permanent injury**



Thank you!

Mlovell@impacttest.com