



by Evelyn Selber, MD

THE "HEADS UP" INITIATIVE:

What Should Parents Know about Concussions?

Over the last decade, the number of children and adolescents brought to an emergency department because of a *concussion* has increased by 60%!

Concussions occurred most frequently during bicycling, football, basketball, and playground activities. A *concussion* is a type of traumatic brain injury that causes the head to move rapidly back and forth and is caused by a bump, blow, or jolt to the head. A national "Heads Up" initiative has been designed to help improve awareness, prevention, recognition, and response to head injury. *Clarkstown Pediatrics* will partner with parents and schools in this initiative.

How can parents recognize a possible *concussion*? You may observe your child experience one or more of the following symptoms: At the time of head injury your child may lose consciousness (even briefly) or simply appear dazed or stunned. He/she may be confused about an assignment or an instruction or is unsure of game, score, or opponent. Your child may move clumsily or answer questions slowly, or show mood, behavior, or personality changes, perhaps even have difficulty recalling events prior to a hit or fall. Physical symptoms include: headache, nausea or vomiting, balance problems, dizziness, double or blurry vision, sensitivity to light or noise, feeling sluggish, hazy, foggy, or groggy, concentration or memory problems, confusion, does not "feel right" or is "feeling down." Remember, you can't see a *concussion* and some athletes may not experience and/or report symptoms until hours or days after the injury.

What should you do if a possible *concussion* occurs? Contact your doctor promptly. Together we will decide if an emergency department or office evaluation is needed.

Do not return to sport or recreational physical activity for the day. You will be instructed further after a medical evaluation. Some patients will require a brain CT scan while most only require office evaluation followed by physical and mental rest. Avoidance of all exertional activities is important until symptoms resolve.

Once 24 hours symptom free, your child will need a follow up office visit to assess recovery from their *concussion*. Clearance to return to recreational or sport activities is decided at that visit. Most people with a *concussion* will recover quickly and fully. But for some people, signs and symptoms of *concussion* can last for days, weeks, or longer.

We will keep track of your child's *concussions*, since a history of multiple *concussions* may change your doctor's instructions for care and follow up. Research has shown that damage from multiple *concussions* add up and could have long term effects on brain function. The risk of dementia later in life seems to increase with



an increasing number of concussions. Many neurologists now feel that participation in contact sports (football, basketball, hockey, etc.) should end for anyone who has had three significant *concussions*. This is the "three strikes your out!" rule.

What can I do to prevent *concussions* in sports? Work closely with your child's coach or school to ensure knowledge of *concussion* prevention and recognition protocols. NY State is the 33rd state to sign the *Concussion Management and Awareness Act* in 2011 which requires a parent sign permission slip to participate in sports, immediate removal from play of any athlete suspected of having a *concussion* and medical clearance for any athlete desiring return to play.

Baseline (pre-injury) testing may be offered to assess your child's balance and brain function. We encourage this testing if it is available.

We recommend a gradual, step wise approach to returning to play. Make sure drills and practice go well without any return of concussive symptoms (dizziness/balance issues/etc.).

Make sure your child/teenager wears a helmet for all activities which involve increased speed: bicycle riding, skiing, skateboarding, etc. Helmet attachments or alarms have not been proven to prevent *concussions*, but we do support improved helmet technology.

Most importantly, teach your child that returning to sport activities while injured does not show strength or courage! Allow your young athlete's brain time to heal. A repeat concussion that occurs before the brain recovers from the first—usually within a short time period (hours, days, weeks)—can slow recovery and increase the risk of long-term problems.



WHAT TO DO FOR a poisoning emergency...

by Monica Hamburg, MD

What should you do if your child swallows a possible poison or wrong medication? **Call POISON CONTROL!** Keep this phone number in a visible place, like the fridge, or by the phone, and in your contacts. The *Poison Control Center* will direct you on what you can do at home and whether or not your child needs to go to the emergency room. We no longer recommend *Ipecac* and it should not be in your home! *Ipecac* used to be given to induce vomiting in the past (Grandma may tell you to give it) but it didn't work and can cause serious problems and damage to your child's digestive tract and airway.



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