

WHAT IS IT?

A concussion is a brain injury that is associated with a temporary loss of brain function. The injury must be taken seriously to protect the long term welfare of all players. A concussion is caused by a bump, blow or jolt to the head or body that causes the head and brain to move rapidly back and forth.

SIGNS AND SYMPTOMS

Most concussion injuries occur without a loss of consciousness and so it is important to recognise the other signs and symptoms of concussion. Some symptoms develop immediately while other symptoms may appear gradually over time.

•	Loss of	•	Headache
	consciousness		
•	Seizure or convulsion	•	Dizziness
•	Balance problems	•	Confusion
•	Nausea or vomiting	•	Feeling slowed down
•	Drowsiness	•	"Pressure in head"
•	More emotional	•	Blurred vision
•	Irritability	•	Sensitivity to light
•	Sadness	•	Amnesia
•	Fatigue or low energy	•	Feeling like "in a fog"
•	Nervous or anxious	•	Neck Pain
•	"Don't feel right"	•	Sensitivity to noise
•	Difficulty	•	Difficulty
	remembering		concentrating

"Presence of any one or more of the above signs and symptoms may suggest a concussion"

ACTION PLAN

Recognise – The signs and symptoms

Report – Don't hide any symptoms

Rehab – Rest / Take time to recover fully / Seek medical advice

Return – Follow a step-wise GRTP and don't return without your doctor's clearance

DANGERS

A player's brain needs time to heal after a concussion. When a player's brain is still healing, it is more likely to receive another concussion. Repeat concussions can increase the time it takes to recover and in rare cases, repeat concussions in young players can result in brain swelling or permanent damage to their brain. They can even be fatal.

COPING

The following are some tips for coping with a concussion:

Rest

The best medical management for concussion is rest (Brain and Body). Players often feel tired and may experience difficulties at work or school when carrying at task which require concentration. You should avoid "brain stimulating" activities that may delay healing (including computer, reading, television, loud music, bright lights, texting, and use of mobile phones) until all symptoms are gone. You may also encounter mood difficulties and feel depressed, anxious or irritable with family or team mates.

Support should be provided to players during this recovery period.

Avoid Alcohol

Alcohol should be avoided as it may delay recovery and put you at increased risk for further injury.

Prescribed Medications

When dealing with persistent symptoms, it is essential that you only take medications prescribed by your doctor.

Patience

Recovery form concussion should not be rushed nor pressure applied to players to resume playing until recovery is complete. The risk of re injury is high and may lead to recurrent concussion injuries which can cause long term damage.

RETURN TO PLAY

If diagnosed with concussion you should NEVER return to play on the day of injury. Return to play must follow a medically supervised stepwise approach and you MUST NEVER return to play whilst symptoms persist.

GRADUAL RETURN TO PLAY PROTOCOL

- I. There should be an initial period of <u>two weeks</u>

 <u>rest</u> for ALL female players after a concussion.
- RTP Protocols following concussion follow a stepwise approach. You should continue to proceed to the next level if no symptoms persist at the current level.
- Generally each step should take 24 hours so you would take approximately one week to proceed to full rehabilitation once you have no symptoms at rest.

- 4. If any post-concussion symptoms occur while in the RTP program, you should drop back to the previous asymptomatic level and try to progress again after a further 24 hours period of rest has passed.
- 5. Clearance from a medical doctor is required prior to return to full contact sports.

Table I Gradual Return to Play Protocol					
Rehabilitation	Functional	Objective of			
Stage	exercise at stage	stage			
I. No Activity	Physical and	Recovery			
	Cognitive Rest				
2. Light Activity	Walking,	Increase HR			
	swimming,				
	cycling, keeping				
	intensity <70%				
	maximum				
	permitted heart				
	rate				
Sports Specific	Running drills,	Add Movement			
Exercise					
4. No Contact	Progress to				
Training Drills	more complex				
	training drills -				
	passing drills,				
	progressive				
	resistance				
	training				
5. Full Contact	Following	Exercise,			
Practice	medical	coordination and			
	clearance,	cognitive load			
	participate in				
	normal training				
	activities.				
6. Return to play	Normal game	Restore			
	play	confidence and			
		assess functional			
		skills by coaching			
		staff			

OTHER RESOURCES

- CONCUSSION MANAGEMENT GUIDELINES 2013-2016
- POSTER
- E-LEARNING COURSE ON CONCUSSION AWARENESS

To access these resources, please visit – learning.gaa.ie/player

For more information on concussions visit www.concussion.ie or www.gaa.ie/returntoplay

