

## Raising Awareness of Concussions in BC

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# **Purpose**

- To highlight the need for standardized concussion recognition, treatment and management
- An overview of the burden of concussions/minor TBIs
- An orientation of the Concussion Awareness Training Toolkit (CATT)
  - Health Practitioners
  - Parents, Players and Coaches
  - Educators (Sept 2014)



How a concussion is handled in the minutes, hours and days after injury can SIGNIFICANTLY influence the extent of damage and recovery from this injury

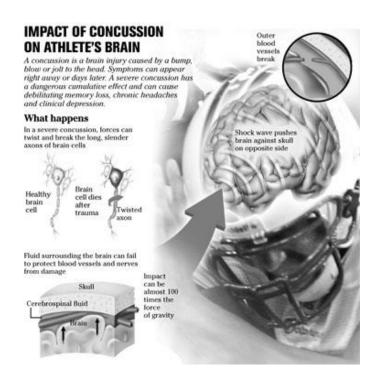




## Concussion – Burden in BC

- 16,888 concussions seen in emergency departments throughout the BC Lower Mainland for all ages:
  - 6,651 from VCH (2011)
  - 8,959 from FH (2011/12)
  - 1,278 presenting to BCCH (2009)
- 39.5% of the total children and youth ages 0-19 years
- 59.4% of the total males
- 9,027 children & youth ages 0-19 years presented to BCCH with a concussion / minor head injury during the 2001-2009 period.







- Brain Injury
- Complex
- Head or other part of the body
- Loss of consciousness?
- Imaging
- Immediate or after several days
- Lasting days/weeks/months



# **Signs and Symptoms**

### **Physical**

- Headache
- Nausea
- Vomiting
- Balance problems
- Dizziness
- Visual problems
- Fatigue
- Sensitivity to light
- Sensitivity to noise
- Numbness/ Tingling
- Dazed or stunned

### Cognitive

- Feeling mentally "foggy"
- Feeling slowed down
- Difficulty concentrating
- Difficulty remembering
- Forgetful of recent information or conversations
- Confused about recent events
- Answers questions slowly
- Repeats questions

### **Emotional**

- Irritability
- Sadness
- More emotional
- Nervousness

### **Sleep-related**

- Drowsiness
- Sleeping less/more usual
- Trouble falling asleep



## Concussion – of note....

- An individual is 3-times more likely to sustain a second concussion in recovery from a concussion.
- If a second concussion is sustained before recovering from the first, a condition known as second-impact syndrome (SIS) may occur: a swelling of the brain that can result in brain damage causing severe disability or even death.
- Repeated episodes may cause permanent deficits such as dementia, seizures, movement disorders, depression, possible death
- Children are at a greater risk for concussion than adults.
- Children can take longer to recover from a concussion than adults and are at higher risk for permanent damage.
- Each concussion MUST be treated on a case-by-case basis



## Concussions

## Good concussion management will potentially:

- Reduce future related-health problems
- Decrease the risk of long-term brain damage
- Lower total health care costs



# What is the Key?

- Accurate Detection
- Expert Management



### www.cattonline.com



Cattonline.com currently provides two free online concussion toolkits: the Concussion Clinical Toolkit for Medical Professionals and the Concussion Awareness Training Toolkit for Parents, Players, and Coaches.

Both websites provide up-to-date education, tools and resources to help prevent, recognize, treat and manage concussions as well as support decreasing the impact of concussion when they do occur.

These resources are updated on a monthly basis and will provide the latest evidence on how to deal with concussions.







#### Medical Professionals

Learn the latest care and management of patients who have sustained a concussion. This includes a 40 minute online course that both physicians and nurses can take, as well as in-office assessments, printable resources for both the physician and patient, video commentary by experts and case studies.

#### Parents, Players, and Coaches

Learn how to recognize and respond to a concussion and manage a player's recovery through a variety of web-based tools and resources. This includes a 30 minute online course as well as printable resources, online videos and additional handouts for parents.

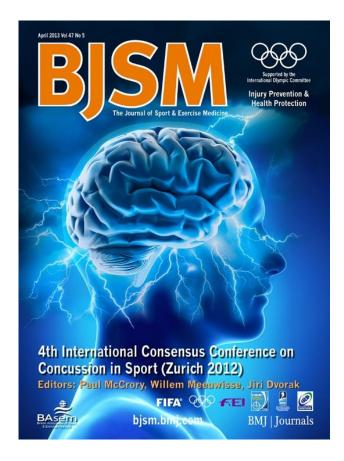
#### Educators

Available Fall 2014

Clinical Toolkit

Awareness Toolkit

## **Consensus Statement on Concussion in Sport**





# **CATT Goals**

- Training
- Quick and easy access
- Additional resources
- Links
- Printable resources
- FAQs



# **CATT Development**

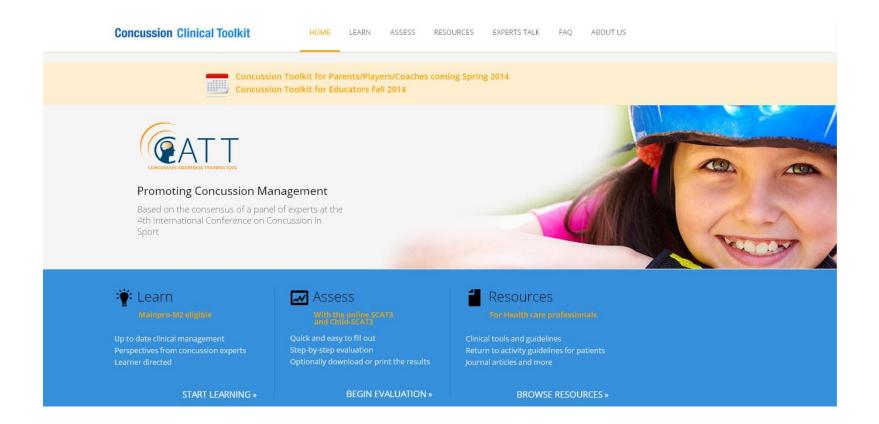
### Look & Feel:

- Multisensory content via text, audio and video (based on focus group discussion)
- Culturally appropriate for Canada
- Interviews with Canadian experts

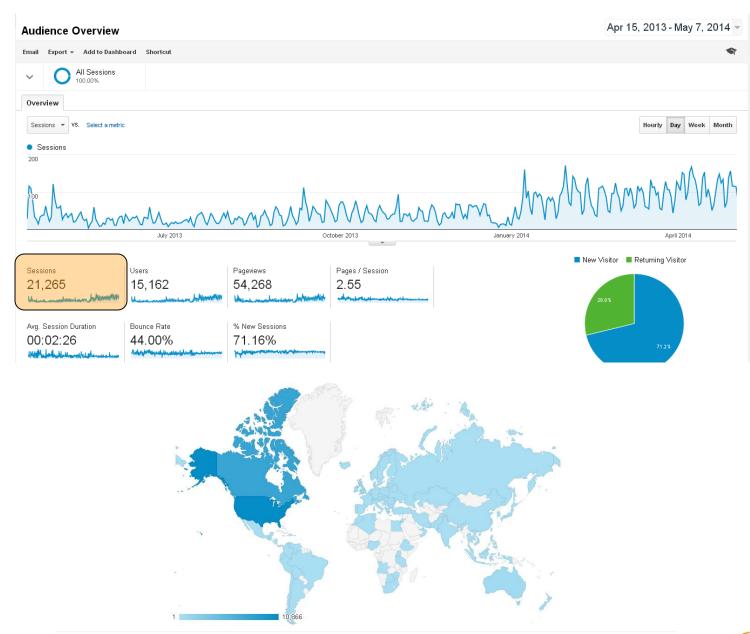
Extensive external review & revisions (provincial and national)



# **CATT for Health Practitioners**









# CATT for Parents, Players and Coaches

Concussion Awareness Training Tool Home PARENTS + PLAYERS + COACHES + RESOURCES + ABOUT US



Cattonline.com provides up-to-date concussion education for parents and coaches. It includes video lessons and resources to effectively prevent, recognize and manage a players recovery.





Information and resources for parents to help manage a child with a concussion



Helpful videos to teach players about



Information and tools to help coaches manage a player with a concussion

Sidney Crosby

Peter Mansbridge interviews Sidney Crosby to distance have infantage than the same



## **CATT PPC - Parents**

### **Parents**

- Central to the management of their child's concussion recovery
- Responsible for monitoring their child on a day-to-day basis
- Responsible for seeking medical attention for their child
- Responsible for ensuring their child follows recommended treatment



# **CATT PPC - Players**

## **Players**

- Need to understand what a concussion is and how it occurs
- Need to understand what the symptoms are
- Need to understand the importance of acknowledging a potential concussion



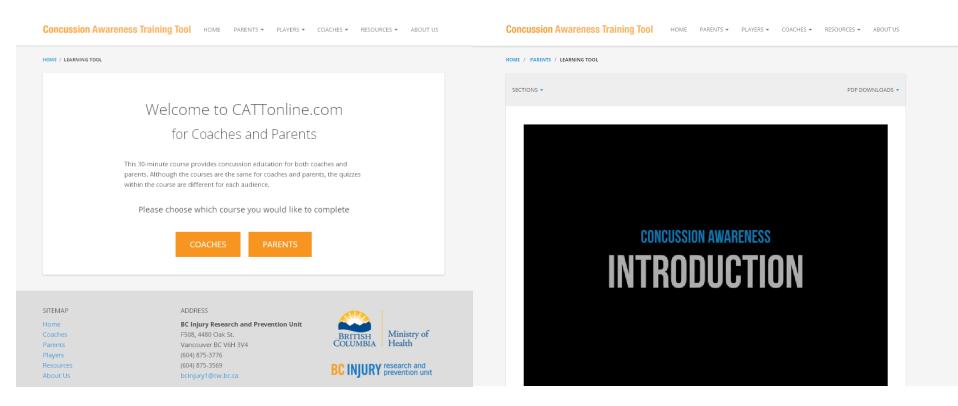
## **CATT PPC - Coaches**

## Coaches, including community volunteer coaches

- Need to know the principles of concussion management
- Need to identify high-risk activities
- Need to compile pre-participation information
- Need to take appropriate action when a player sustains an injury that could cause a concussion



# CATT PPC Online training module





# **CATT PPC Frequently Asked Questions**

#### **Concussion Awareness Training Tool**

HOME

PARENTS \*

PLAYERS ▼ COACHES ▼ RESOURCES ▼

ABOUT US

HOME / PARENTS / FAQ

- 1. What is a concussion?
- 2. Does my child have a concussion?
- 3. What do I do if I think my child has a concussion?
- 4. My child has a concussion. What is the recovery process?
- 5. How does my child successfully return to school and play?
- 6. How can I help to prevent concussions?

#### **Red Flag Symptoms**

If your child shows any of the following Red Flag Symptoms call 911 immediately.

- Neck pain
- · Increased confusion or irritability
- · Repeated vomiting
- Seizure or convulsion
- · Weakness in arms/legs
- · Tingling or burning in arms/legs
- · Deteriorating consciousness
- Loss of consciousness
- · Severe or increasing headache
- · Unusual behaviour change
- Double vision



# **CATT PPC Players section**

#### **Concussion** Awareness Training Tool

HOME

PARENTS \*

PLAYERS ▼

COACHES ▼

RESOURCES ▼

ABOUT US

HOME / PLAYERS / WHAT IS A CONCUSSION?

What is a concussion?

Concussion Stories

Recovering from a concussion

Complications of concussion

Playing smart



#### Brain 101: What's a Concussion

An animated, informative video that provides an overview of what a concussion is, signs and symptoms and emphasizes the importance of working together to recognize, respond and report concussions.



### Concussion 101: A Primer for Kids and Parents

A whiteboard video providing an overview of concussion including cause, signs and symptoms and recovery.



### Concussion 101: Symptoms, Risk and Return to Play

Concussion experts discuss signs and symptoms of concussion and what you can do to help prevent head injuries.



#### **Concussions in Teens - Teenology 101**

Provides an overview on how you get a concussion and what signs and symptoms to look for.



# **CATT PPC Resources**

#### **Concussion** Awareness Training Tool

HOME P

PARENTS ▼

PLAYERS ▼

COACHES ▼

RESOURCES ▼

ABOUT US

HOME / RESOURCES / HANDOUTS **Concussion Response Tool** Handouts BC Injury Research and Prevention Unit Related Websites **Concussion Response Tool (user fillable)** Additional Resources BC Injury Research and Prevention Unit Journal Articles **Questions To Ask Your Doctor** BC Injury Research and Prevention Unit Clinical Resources Playing Smart **Return to Learn Communication Tool** BC Injury Research and Prevention Unit Videos **Return to Play Communication Tool** BC Injury Research and Prevention Unit **Concussion Fact Sheet** BC Injury Research and Prevention Unit **Concussion Guidelines for Coaches/Trainers** Parachute **Concussion Guidelines for Parents/Caregivers** Parachute

#### **Concussion Response Tool**

Ciliu's Hairie.	Age:	
Name of parent/guardian:		
Name of person monitoring child a	t scene:	
Date of incident:		
Description of incident:   Blow	to the head	
What happened?	-	
	At the seems of the incide	m4
	At the scene of the incide	nt
Step 1: Determine if this	is a medical emergency	
Step 1: Determine if this a) Follow basic first aid:	is a medical emergency	
•	is a medical emergency	
a) Follow basic first aid:	is a medical emergency	
a) Follow basic first aid:  • Danger	is a medical emergency	
a) Follow basic first aid:  Danger Response Airway Breathing	is a medical emergency	
a) Follow basic first aid:  Danger Response Airway	is a medical emergency	
a) Follow basic first aid: Danger Response Airway Breathing Circulation	ows any of these Red Flag Symptoms at	any time.
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a) Follow basic first aid:  Danger Response Airway Breathing Circulation  CALL 911 if the child sho	ows any of these Red Flag Symptoms at RED FLAG SYMPTOMS	
a) Follow basic first aid:  Danger Response Airway Breathing Circulation CALL 911 if the child sho	ows any of these Red Flag Symptoms at  RED FLAG SYMPTOMS  The child complains of:	The child is showing:
a) Follow basic first aid:  Danger Response Airway Breathing Circulation CALL 911 if the child shows You see: Repeated vomiting	RED FLAG SYMPTOMS  The child complains of:  Neck pain	The child is showing:  Unusual behavior
a) Follow basic first aid:  Danger Response Airway Breathing Circulation CALL 911 if the child shows  You see: Repeated vomiting Seizure or convulsion	RED FLAG SYMPTOMS  The child complains of:  Neck pain Double vision	The child is showing:
a) Follow basic first aid:  Danger Response Airway Breathing Circulation CALL 911 if the child shows You see: Repeated vomiting	RED FLAG SYMPTOMS  The child complains of:  Neck pain	The child is showing:  Unusual behavior

• SMARTPHONE/IPAD FILLABILITY

#### **Questions to Ask Your Doctor**

If you suspect your child may have a concussion, you should see your doctor right away. This is a list of questions you can take with you.
Caring for my child
What kind of medication can I give my child?
Does someone need to be with my child at all times?
What my child can do
Can my child eat? Will they have an upset stomach?
What kind of activities can my child do at this stage of their recovery?
Can my child read/use the computer/play video games?
When can my child go back to school or work?
When can my child return to physical activity?
Can my child drive?
Symptoms
What symptoms should I be watching for?
How soon will symptoms begin to improve?
How long will these problems last?
The risks
What is the risk of a future concussion?
What is the risk of long term complications?
Follow-up with the doctor
When should we come back to see you?
Under what circumstances should I call you?
Should a specialist be consulted?
Are there any resources you recommend?



# Return to Play Communication Tool

Return to Play Communication Tool Return to Learn should be completed before Return to Play.

STAGE 1:  No sporting activity  Symptom-limited physical and cognitive rest	STAGE 2: Light aerobic exercise Walking, swimming, stationary cycling. No resistance training. Heart rate <70%	STAGE 3:  Sport-specific exercise  Skating drills (ice hockey), running drills (soccer). No head-impact activities  Add movement	STAGE 4:  Non-contact drills  Progress to complex training drills (e.g., passing drills).  May start resistance training  Exercise, coordination, cognitive load	Full-contact practice  Following medical clearance participate in normal training activities  Restore confidence; assess functional skills	STAGE 6:  BACK IN THE GAME  Normal game play
Symptom-free for 24 hours? Yes: Begin Stage 2 No: Continue resting Time & date completed:	Symptom-free for 24 hours? Yes: Move to Stage 3 No: Return to Stage 1 Time & date completed:	Symptom-free for 24 hours? Yes: Move to Stage 4 No: Return to Stage 2 Time & date completed:	Symptom-free for 24 hours? Yes: Move to Stage 5 No: Return to Stage 3 Time & date completed:	Symptom-free for 24 hours? Yes: Return to play No: Return to Stage 4 Time & date completed:	

If symptoms reappear at any stage, go back to the previous stage until symptom-free for 24 hours. You may need to move back a stage more than once during the recovery process.

Medical clearance required before moving to Stage 5







## **CATT Evaluation**

### Parents, Players and Coaches

- Parents with a child registered in soccer, hockey, lacrosse and/or gymnastics
- Pre/post survey design using FluidSurveys
- Measuring changes in Knowledge, Attitudes & Practices

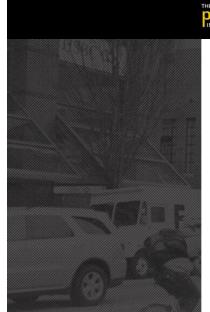
# **CATT** Dissemination

### Parents, Players and Coaches (Provincial / National)

- Face-to-Face Meetings
- Presentations
- Newsletters/Newspapers
- Websites
- Sports Organizations
- Arenas, soccer fields, libraries, etc.



# **Social Marketing**



preventable INJURIES

Learn More

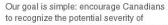
Our Work

**Media Room** 

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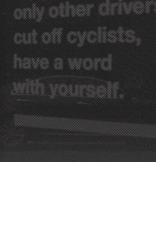
### Not just pro-athletes get concussions

Our concussion campaign gets the message out to Canadians about the importance of concussion recognition and management. This initiative is the result of a partnership between Preventable, Parachute, and the BC Injury Research and Prevention Unit. Through partnerships with various sports organizations and health and recreation agencies, we placed key messages in select recreational centers, ice rinks, soccer pitches and libraries



concussions. This starts with recognizing that concussions can happen to anyone.







# **Preventable**





## In Conclusion....

- 1. Astute Detection
- 2. Accurate Diagnosis
- 3. Optimal Management
- 4. Appropriate Follow-Up

"We're at the end of the beginning...we know so much, yet so little"

# Acknowledgement

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### **BCCH Project Team for CATT- HP:**

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- Dr. Paul Korn
- Dr. Ran Goldman
- Dr. Ian Pike
- Ms. Christy Hay
- Ms. Kate Turcotte



## www.cattonline.com

# Thank you

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