

ALL SPORT INSURANCE MARKETING

Concussions: brain wave



By Gina Bennett

It used to be that we seldom heard much about concussion-related injuries in sports. Recently, however, we have been learning a great deal about what is now being called a “silent epidemic.” Concussions are not just happening to our insured athletes, but to our children as well.

Fortunately, the media has helped educate us all about the dangers of concussions, and people are being made aware of the signs and symptoms. Many coaches are pushing for return-to-play guidelines – a gradual, six-step return to play. As a result of this growing awareness, concussions are now being taken seriously – as potentially life-altering, sometimes even life-threatening, injuries.

What is it?

A concussion is a brain injury. Any blow to the head, face or neck – to anywhere on the body, in fact – that causes a sudden shaking or jarring of the brain can cause such an injury. A concussion can happen to a hockey player receiving a check or a gymnast taking a fall. A slip on an icy sidewalk can cause a concussion. So can a car accident. One does not have to lose consciousness to suffer a concussion.

There are several concussion-recognition tools available. All Sport Insurance acknowledges Parachute Canada, a national organization dedicated to preventing injuries and saving lives by providing solutions to prevent and recognize concussions. The key is to identify a concussion and remove the athlete from play.

Visible clues

Visible clues of suspected concussion

can include one or more of the following: Loss of consciousness or responsiveness; lying motionless on ground/slow to get up; unsteady on feet/balance problems or falling over/uncoordinated; grabbing/clutching of head; dazed, blank or vacant look; confused/not aware of plays or events.

Memory function or failure to answer simple questions may also suggest a concussion. What venue are we at today? Did your team win the last game? What is today’s date? What’s your phone number?

a severe or increasing headache, double vision or an unusual change in behaviour, they should be safely and immediately removed from the playing surface. If there is not a medical professional present, the athlete should be transported for urgent medical assessment.

It’s also important to remember that in all cases, the basic principles of first aid – danger, response, airway, breathing and circulation – should be followed. Do not attempt to remove a helmet or move the athlete, other than required for airway support, unless trained to do so.

Recovery

As with any injury, concussion recovery times can vary from individual to individual. Symptoms differ, and having the athlete listen to their own brain and body is vital to recovery.

Both physical and cognitive rest are important. Participating only in daily life activities without increasing heart rate or breaking a sweat and limiting activities requiring a high level of concentration should not trigger or worsen symptoms.

To prevent social isolation or depression and anxiety, low-level interaction such as short telephone conversations with family or friends is suggested. Once the athlete is symptom-free at rest, they should return

to work or school before playing sports. Returning to play too soon could result in more severe or long-term problems.

Those who have suffered a concussion should be patient. The brain needs time to heal. If symptoms return, the activity should be stopped. The recuperating athlete should rest and try again when symptom-free.

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Any sudden shaking or jarring of the brain can cause a concussion, a potentially life-altering, even life-threatening injury.

Suspected concussion

Any athlete with a suspected concussion should be removed from play immediately and should not return to activity until medically assessed. They should not be left alone and should not drive. In all cases of suspected concussion it is recommended that the athlete be referred to a medical professional for a diagnosis. It is also recommended that return-to-play guidelines be followed, even if the symptoms appear to have passed.

If an athlete is experiencing or indicating neck pain, confusion or irritability, vomiting, seizure or convulsion, a weakness or tingling/burning sensation in the arms or legs, deteriorating consciousness,