

International panel revises management of concussion in sport for optimal care of athletes

JOHANNESBURG, GAUTENG, SOUTH AFRICA, June 15, 2023 /EINPresswire.com/ -- Latest Consensus Statement on Concussion in Sport includes:

☐ New and updated age appropriate tools to aid identification and management of condition
☐ New versions of return to active sport and education strategies
☐ Stronger evidence for benefits of light intensity exercise within first 48 hours to aid recovery
□ New targeted approach to rehabilitation
Call for interdisciplinary working group to guide research into potential long term effects

Over a100 international expert researchers and clinicians, co-chaired by Professor Jon Patricios of Wits Sport and Health (WiSH) at the University of the Witwatersrand, South Africa has distilled and synthesised new scientific evidence and updated existing recommendations with the aim of optimising the care of athletes at all levels of participation who have, or who are at risk of, concussion.

Based on the outcomes from the International Conference on Concussion in Sport, held in Amsterdam in October 2022, and published in the British Journal of Sports Medicine (BJSM), the Statement is informed by 10 systematic reviews and methodology outlining the new consensus process. The process took more than 4 years to complete.

In a bid to be more transparent and inclusive than in previous years, the process adopted anonymous voting, alternative viewpoints, open declarations of potential conflicts of interest, and included the views of athletes, a focus on para-athletes, and ethical perspectives.

The Statement includes a series of new and updated age-appropriate tools for clinicians and sports organisations to help them better identify and manage sports related concussion in the short and longer term.

It features new evidence-based strategies for returning to active sport and education after concussion; early exercise and treatment recommendations; approaches to prevention; targeted rehabilitation; and a call for a working group to be set up to guide further research on the potential long term effects of concussion on health.

Prevention
□ Policy or rule changes to minimise collisions, such as disallowing body checking in ice hockey □ Neuromuscular training — aerobic, balance, strength, agility exercises +/-neck-specific components — in warm ups □ Mouthguard use in ice hockey (all ages) □ Implementing laws and protocols, such as mandatory removal from play after actual or suspected concussion; healthcare professional clearance to return to play; and education of coaches, parents, and athletes on the signs and symptoms of concussion
Early interventions
☐ Strict rest isn't recommended. There's stronger evidence that light intensity physical activity, such as routine activities of daily living, and aerobic exercise, such as walking and stationary cycling, can aid recovery, as can limiting screen time during the first 48 hours.
Rehabilitation
☐ For those experiencing dizziness, neck pain and/or headaches for more than 10 days, the Statement recommends cervico-vestibular rehabilitation — physiotherapy to reduce symptoms and improve function. ☐ Rehabilitation should be targeted to individual needs.
Persisting symptoms
☐ Multidisciplinary team assessment to identify the types, pattern, and severity of symptoms and any other contributory factors is advised for those with symptoms lasting more than 4 weeks. Recovery ☐ Advanced neuroimaging, biomarkers (chemical signals from nerves or blood vessels), genetic tests, and other emerging technologies to assess recovery are useful for research into the diagnosis, outlook, and recovery from sports related concussion, but as yet, they are some way off from being used in clinical practice.
Return to education and sport
☐ Academic support may be needed for some athletes in the form of a return to learn strategy: this can include modified school attendance, limiting screen time, avoiding any contact sports or extra time to complete assignments or tests. ☐ Light intensity activity in the early phases of the return to sport strategy is recommended, with full sports participation usually occurring within 1 month of injury.

☐ Athletes should be managed on an individual basis, accounting for specific factors that may

Among the key recommendations:

affect their recovery, such as a history of migraine, anxiety, and social factors.

Potential long term effects

☐ The Statement notes the "increasing societal concern about possible problems with later in life brain health in former athletes, such as mental health problems, cognitive impairment and neurological diseases."

☐ Studies tracking the mental health of people over time (cohort studies) have found that former amateur and professional athletes don't seem to be at heightened risk of depression or suicidality later in life.

☐ No heightened risk of neurological disease has been reported in former amateur athletes, but some studies of former professional athletes have reported an association between playing professional American football and professional soccer and neurological disease in later life. ☐ Studies to date on the links between early sports participation and later life dementia and neurological disease are limited because they haven't been able to adjust for a range of

potentially highly influential factors.

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☐ The setting up of an interdisciplinary working group to guide appropriate research into the potential long term effects of concussion on health is recommended.

Evidence gaps still to be filled

☐ There's limited evidence on the management of sports related concussion in 5-12 year olds and in para sport athletes, who are known to be at heightened risk of sports related concussion.

☐ Little research on concussion exists for certain regions of the world, diverse cultural contexts, sex and genders.

"This Statement sets out a range of new evidence-based recommendations, including those for concussion prevention as well as new versions of the concussion assessment tools and return to sport and school/learning strategies," says Kathryn Schneider, University of Calgary, Canada and Consensus statement co-chair.

"We encourage clinicians and sports organisations to adapt these recommendations to their own geographic and cultural environments to optimise the care of athletes who have sustained, or who are at risk of concussion."

Patricios says the new consensus is improved, due to the rigorous methodological process adopted, the new generation of tools available to clinicians, and the emphasis on the positive impact of exercise and targeted rehabilitation as effective interventions.

"These have the potential to positively change the management of sport-related concussion."

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