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Concussion program gives team heads up on brain injuries

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ROYAL OAK -- After Anthony Carter, 16, got sacked by three opponents during a pre-season scrimmage for the Ravens, he wasn't himself.

Teammates knew his game was off when they had to remind him where to get in line for plays. Then, on the bus ride home, the junior lineman was unusually quiet. When they returned to Royal Oak High School, he also seemed unbalanced and confused. He couldn't find his locker and didn't remember the combination.

Recognizing the signs of a concussion, friends told the assistant coach. A month before the August scrimmages -- the team played three in one day -- the Ravens had gone through a free concussion screening program by Beaumont Health Systems. They realized that Anthony had the classic symptoms.

His mother, Yvonne Carter, got one of those phone calls parents of athletes fear. Her son needed to go to the emergency room.

"You just hope it isn't serious," she said. "His speech was slurred and his memory was very slow, very delayed. It was scary. I'm so glad his teammates look out for each other and knew the signs of a head injury. So many concussions go unreported."

Six myths: Young athletes and concussions

Doctors at Beaumont Hospital, Royal Oak, confirmed Anthony had a concussion -- a brain injury caused by the head and brain moving rapidly back and forth. The sudden movement can cause the brain to bounce around or twist in the skull, stretching and damaging the brain cells and creating chemical changes in the brain.

This year about 2 million U.S. youth have suffered concussions and although football and soccer seasons are over, the danger is not as young athletes move from fields to ice rinks and slopes.

"Concussions account for about 46 percent of U.S. winter sports injuries," Beaumont spokesman Robert Ortlieb said.

Anyone suspected of having a concussion should be removed from play immediately and never return to the activity the same day. They should be evaluated and cleared by a health professional.

"I don't even remember playing the third game," Anthony said.

Return to play is a critical decision because children are at increased risk for both repeat concussions and delayed recovery. The free concussion screening Anthony took in July helped his doctor determine when he was ready for football again.

Neal Alpiner, M.D., had a baseline test of Anthony's memory recall and response times under normal conditions. Anthony repeated the online test after being sacked by three large football players and the concussion specialist compared the results.

"The results came back 'unacceptable,' " Carter said, adding her son had obvious memory, speech and balance problems for the 48 hours following the injury and headaches for about another week.

"People around us were saying they had a concussion and a week later were playing again, but as a mom you want to make sure your kid is ready to be hit again because that second concussion could be more serious."

She has come to realize the importance of the baseline concussion test for families and doctors. Her son was sidelined from practice for three weeks and from games for four weeks.

"It was a good two weeks before Anthony's test came back at his baseline," Carter said. "The extent of his injury could have been overlooked had the test not shown his memory wasn't back to where it had been."

Six myths: Young athletes and concussions

Most athletes know when they've experienced a concussion.

Not so, according to Neal Alpiner, M.D., a pediatric concussion specialist with Beaumont Hospital, Royal Oak.

"That 'wow' moment is rare," Alpiner said. "It's really important that teammates, trainers, coaches and parents understand the seriousness of concussions. This includes the symptoms and the need for timely medical treatment. Athletes may not recognize changes in their own behavior and thinking."

Concussions are always a result of high impact.

Not necessarily, Alpiner said. A concussion doesn't have to result from a great force or impact. The event can also be subtle. All it takes is a blow to the head or body, resulting in rapid movement of the head. If a coach suspects a concussion they should remove the athlete from play. All concussions are serious.

If a young athlete doesn't lose consciousness, he did not suffer a concussion.

False. It can happen even if they have not lost consciousness or been knocked out.

Boys are at greater risk than girls for concussions.

Not true. Girls are equally at risk to have a concussion as male athletes. Female athletes also compete in physically demanding sports including: soccer, lacrosse, hockey, skiing, volleyball, basketball and softball.

Follow-up care isn't necessary after an athlete has a concussion.

Wrong. Ignoring follow-up care and advice can have serious consequences. If an athlete resumes participation in their sport too soon, a second concussion can lead to brain damage, and in some cases death.

"It's better to miss a game or two than the whole season," Alpiner said.

Pediatric concussions and adult concussions are similar.

False. Because of ongoing brain development, children and teens are more likely to experience a concussion than adults. The brains of teens are much more dynamic.

A recent study published in Pediatrics reported that recovery from concussions in young athletes may take longer than thought. Most of the athletes followed in the study had improved reaction times and memory skills two weeks post concussion. After four weeks most were ready to resume sports.

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