

Concussions in Soccer

Concussions in soccer are extremely common and second only to American football in frequency. It is estimated that in college a soccer season 60% of the athletes sustain a concussion. In high school nearly 15% of sports related injuries are concussions. The rate could be higher when one takes into account underreporting and common misconceptions of the definition of a concussion.

A Concussion is defined as a traumatically induced transient disturbance in brain function. They can occur with and without (whiplash) contact. The symptoms vary from headache, dizziness, visual changes and nausea to difficulty concentrating and change of personality. Notice that the loss of consciousness is NOT required to be considered a concussion.

The treatment for a concussion starts with recognition of symptoms. No athlete can return to play the day of a concussion. A physician or an athletic trainer needs to be notified if symptoms have been identified. The need for imaging (CT scan or MRI) will be decided upon after a thorough history and physical exam. In the vast majority of cases imaging is not useful. A return to play protocol will be followed and the athlete can return to play when cleared by a medical professional.

Pediatric and adolescent athletes will frequently take longer to recover, sometimes taking weeks or months. A brain injury is one type of injury where youth tends to slow the healing rather than speed it up as the growing brain is more vulnerable.

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Important Points:

Loss of consciousness is not necessary to be a concussion

Young athletes take longer to heal

WHEN IN DOUBT HOLD THEM OUT

