

NEUROMYTHOLOGY: DEBUNKING THE TOP CONCUSSION MYTHS



UPMC's Sports Medicine Concussion Program is helping people everywhere rethink concussions. The foremost leader in the field, UPMC and its multi-disciplinary team of experts has shown that while there are many different types of concussions, the injury can be managed with the right expertise and personalized approach to care.

Michael "Micky" Collins, Ph.D., director of the UPMC Sports Medicine Concussion Program, is a preeminent sports-related concussion expert. Dr. Collins and the UPMC team are committed to changing the concussion conversation and raising awareness of treatment possibilities that make rehabilitation a reality.

To help demystify some of the misconceptions about concussion, Dr. Collins breaks down the most common "neuromythology" being perpetuated today. Learn more by visiting ReThinkConcussions.com.

 <div data-bbox="259 525 487 609" style="background-color: #333; color: white; padding: 5px; text-align: center; font-weight: bold; font-size: 1.2em;">MYTH</div>	 <div data-bbox="1071 525 1299 609" style="background-color: #333; color: white; padding: 5px; text-align: center; font-weight: bold; font-size: 1.2em;">FACT</div>
<p>A concussion only occurs as a result of a DIRECT BLOW TO THE HEAD</p>	<p>A concussion may be caused by a direct blow to the HEAD, FACE, NECK, or ELSEWHERE ON THE BODY if the force of the impact is transmitted to the head</p>
<p>A concussion occurs only when an athlete EXPERIENCES A loss of consciousness</p>	<p>Concussions can occur WITH OR WITHOUT loss of consciousness (LOC), and about 95% of concussions DO NOT RESULT IN LOC</p>
<p>Everyone is at THE SAME RISK for a concussion</p>	<p>Various factors, including AGE, GENDER, and MEDICAL HISTORY, put an individual at risk for sustaining a concussion</p>
<p>It is SAFE for a player to return to the same game or practice after suffering concussion-related symptoms</p>	<p>There are many different signs/symptoms of concussion. Any athlete who displays these symptoms SHOULDN'T be allowed to return to the current game or practice, even if the symptoms clear quickly</p>
<p>ALL concussions, treatments and recoveries are ALIKE</p>	<p>NO two concussions are identical. Our research has identified six different clinical trajectories for concussion</p>
<p>You MUST be placed in a dark room to recover from a concussion</p>	<p>EVIDENCE-BASED ACTIVE TREATMENTS for concussion exist, including vestibular therapy, vision therapy, exertion therapy and medications</p>
<p>Having one concussion places you at increased RISK for future concussions</p>	<p>Proper clinical management is the best form of prevention; recovery from one should NOT put an athlete at risk of another. But there are some inherent conditions (i.e. migraines) that can put you at higher risk</p>
<p>Concussions DEFINITELY cause long-term brain damage and chronic traumatic encephalopathy (CTE)</p>	<p>Potential long-term effects from concussion come primarily from POORLY MANAGED INJURIES. Scientific studies linking concussion and long-term effects are still in progress and no definitive conclusions can be made</p>
<p>Helmets and mouth guards CAN PREVENT concussions</p>	<p>While helmets have been shown to protect against skull fracture and severe traumatic brain injury, there is very little evidence that a particular brand of helmet REDUCES the incidence of concussion. Mouthguards, too</p>