

## Is your child at risk for a sport related concussion?

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## HEALTH & FITNESS

### Concussions in sports: what should you do as a parent?

By Dr. David Bertone, PT, DPT, OCS

With the upcoming fall sports seasons fast approaching, it is important to begin thinking about concussions and the impact, literally, it can have on your child's future. The Center for Disease Control (CDC) reports that there are 38 million boys and girls ages 5-18 who participate in organized sports in the United States. Surprisingly 1 in 10 or 3.8 million will sustain a sports or recreational-related concussion each year. Parents and coaches need to be more aware of the signs and symptoms associated with concussions and what can be done

objectively to determine if your child is ready for return to play.

Concussions are basically a traumatic brain injury caused by a traumatic force by a direct or indirect blow to the body or head. The brain gets jolted within the skull which can affect the person's brain function including motor function and/or thinking capabilities. Every person responds differently to head trauma and the rate of recovery is even more unique per individual. The cumulative effects of a traumatic brain injury can be devastating, demonstrated by the early retirement of some prominent professional athletes like Troy Aikman and hockey player Eric Lindros. Second impact syndrome is the most dangerous consequence of returning to play too early before the athlete has healed from their concussion. The second impact can cause brain swelling and bleeding which can result in death. Those at highest risk for this syndrome are athletes under the age of 20.

The symptoms of a concussion are quite variable and do not always require a loss of consciousness. In fact, only about 10 percent of concussions demonstrate a loss of consciousness. If it does happen, a more serious injury may have occurred requiring immediate emergency medical attention. Most of the signs and symptoms can be divided into four categories including physical, cognitive, emotional and sleep changes. The physical changes can be things like headaches, vomiting, nausea, visual and balance problems. The cognitive signs are feeling foggy, difficulty concentrating, loss of memory, and slow speed in answering questions. The emotional changes can be demonstrated by irritability, sadness, emotional or nervousness. Lastly, the injured athlete can demonstrate difficulty falling asleep or sleeping too much.

Last year, New Jersey Gov. Chris Christie signed one of the most comprehensive concussion prevention laws in the country by mandating school districts to have a concussion management program in place for the 2011-12 school year. It also requires that athletic trainers receive 24 hours of continuing education dedicated to concussion management. This will help at the high school sports level but has no impact on youth sports or club/travel teams. This is where coaches and parents play a vital role in determining the status of an injured athlete. After an injury occurs, where there is no loss of consciousness, a sideline cognitive and functional assessment can be critical in determining a return to play. But the most prudent thing to do when in doubt is to sit them out.

The Biodex Medical Systems Inc. developed a Play it S.A.F.E. Concussion Management Program to help with the decision

(Continued on next page)

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# HEALTH & FITNESS

(Continued from previous page)

making process. Sideline testing should include cognitive testing like being oriented to person, place and time; being able to recall words and recent events in the game and demonstrating the ability to concentrate by repeating days and numbers backwards. Functional testing includes balance, eye movement testing, visual acuity and physical activity to see if it impacts their symptoms. These tests are then repeated 15 minutes after injury. If the player is asymptomatic, and they pass the sideline assessment, return to play can be

considered. But it remains prudent to hold the athlete out of further play until cleared by medical personnel. These guidelines can be found at [www.dborthopt.com/concussion](http://www.dborthopt.com/concussion).

Research has demonstrated that one of the best practices for concussion management is to perform baseline cognitive and balance testing before an injury occurs. This allows for an objective comparison of function to a level prior to injury. A few of the cognitive testing tools are IMPACT, SCAT/SCAT-2 and Axon Sports Computerized Cognitive Assessment Tool (CCAT). These are quick and cost-effective base-

line testing of cognitive skills by documenting speed of processing, memory, reaction time and attention span. The balance component of functional testing can be even more critical. Baseline, pre-injury balance testing can objectively measure the body's sway/balance control which is often impacted by head trauma. After injury, these tests are readministered and results are compared. This will be utilized by your physician in determining readiness for return to play. Many professional and college teams have already been using baseline testing. But now high school and youth sports leagues are start-

ing to require it. If not required, parents should take the prevention route and take their athlete to a qualified professional to administer these tests and be available to readminister them if an injury does occur.

*Dr. David Bertone is a doctor of physical therapy and a board certified orthopedic clinical specialist by the American Board of Physical Therapy Specialties. His solo practice, db Orthopedic Physical Therapy, PC is located in Lincroft. Dr. Bertone can be reached at 732-747-1262 or via e-mail at [dbertone@dborthopt.com](mailto:dbertone@dborthopt.com). For more information, visit [www.dborthopt.com](http://www.dborthopt.com).*

## ADVERTISEMENT

### Local Doctor & Physical Therapist Offer New Treatment Approach For Lower Back Pain & Sciatica

Dear Friend,

The sciatic nerve is the longest and largest nerve in the body. It's made up of five nerves that leave the spinal cord from the lower (lumbar) spinal column, join in the pelvic area and then down the leg. It divides into many small nerves that reach the muscles and joints of the thigh, knee, calf, ankle and toes.

#### What is Sciatica?

When the sciatic nerve is inflamed, the condition is called sciatica, pronounced SIA'DIKA. Not all leg pain is sciatica, but most all sciatica involves leg pain. When is leg pain sciatica? This is a grey area. In our discussion of sciatica, let us keep in mind that leg pain may or not may be sciatica; if it is, chiropractic care should be used. Sciatica sufferers often have severe pain along with the sciatic nerve path usually in the back of the legs and thighs, sometimes to the ankle, foot and toes. There's not only searing, sharp pain, but also paresthesia-strange nerve experiences such as pins and needles, burning, tingling, prickling, crawling sensations or tenderness- that may be felt. Ironically, along with all the pain and nerve sensations, the leg might feel numb! To complicate matters, the location of the sciatica pain may vary. Although it's usually in the back of the legs or thighs, in some individuals the pain is in the front or side of the legs. Sometimes the pain is in the hips. For some hapless sufferers, the pain is in both legs.

#### The Pain Varies

The quality of the pain may vary as well. There may be constant throbbing pain, but then it may let up for hours or even days. The intensity may also vary. It may ache, or be knife-like. Sometimes postural changes, like lying down or changing positions, affect the pain, and sometimes they don't. In that way, sciatica is like a toothache or earache. It's always there, no matter what you do. In severe cases, sciatica can cause loss of reflexes or even a loss of muscle tone. For sciatica sufferers, a good night's sleep may be a thing of the past. Simple things like walking, bending, turning, sitting, standing up can be difficult or impossible.

#### Causes of Sciatica

Like most other conditions, sciatica has a wide variety of causes. Unlike most other conditions, however, this health problem's relationship to the spinal column is often very obvious. A misaligned spine or protruded or ruptured disc can irritate the sciatic nerve, which may result in sciatica. Cases of sciatica have been

reported following accidents, injuries and even childbirth, usually due to spinal misalignments.

#### The Medical Care

The medical approach to sciatica pain is to treat the symptoms using painkillers, muscle relaxers and various orthopedic treatments which may include traction, physical therapy and other therapeutic measures. Sciatica is particularly frustrating to the medical doctor because in many cases even strong pain killing drugs bring little or no relief. However, medical relief may be obtained from injections of painkillers directly into the nerve roots. Drug dependency, however, may develop among some patients. If the pain is not relieved, orthopedic and neurosurgery may be resorted to as alternative treatments.

#### Chiropractic Care

Dr. Robert Chickara is a chiropractor and has completed extensive study in the field of spinal biomechanics and low back pain. Understanding that the human body thrives on the balance and healthy structure, Dr. Chickara uses gentle manipulation and adjustment techniques to correct poor spinal alignment. As most people know, pinched nerves can cause unrelenting, lancinating pain to the low back and leg. With the proper use of x-ray imaging and nerve exams, Dr. Chickara can remove this debilitating pressure on nerves allowing your spinal nerves to function properly.

#### Physical Therapy

Our staff physical therapists are highly trained in pain relieving techniques and procedures designed to strengthen weak muscles of the back muscles of the back, hip and leg that may contribute to back pain and sciatica. Tight muscles in the low back and hip that restrict movement, benefit from manual therapy and massage techniques also. Our Physical Therapy approach, when used in conjunction with proper medical and chiropractic care, will give you the low back and hip strength you need to give you the confidence to return to work and play without the risk of re-injury.

Rehability, LLC focuses on a team oriented approach to restoring your functional potential and optimizing your health. We provide coordinated care that involves your personal family physician if needed to arrive at a comprehensive treatment plan.

#### Highly Qualified and Dedicated to the People of Monmouth County

My name is Robert Chickara, D.C., and I am the Director of the Rehabilitation Pain and Injury Center. Having worked along side both Physical Therapists and Medical Doctors for the last several years, I have developed a comprehensive treatment approach that benefits the patient in all aspects of pain relief and spinal correction. With the availability of chiropractic care and physical therapy on the same day, most patients start feeling better almost immediately. An X-Ray facility is on premises as well as Board Certified Electro-Diagnosticians who will accurately assess if your condition is nerve related, so we can treat it most effectively.



#### Conclusion

Those suffering from sciatica and leg pains would do well to visit a doctor of chiropractic. To many millions of sufferers, its unique approach to wellness has been a blessing. Rather than a disease-oriented approach that asks, "How can we get rid of symptoms?" the doctor of chiropractic asks, "How can we get rid of the problems and make your body stronger so it may heal itself?" Why sit passively waiting for problems to creep into your life and ruin your health? Address your health now by getting a chiropractic examination which will reveal the source of your problems. A chiropractic approach is active, working with you to strengthen your body so these conditions will not suddenly crop up to plague you later. Get up and take control of your health and your life. There's no excuse for waiting. Call anytime between the hours of 9:30 a.m. and 6:30 p.m. Mon, Tues, Wed, and Thursday.

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