RECOVERY & RETURN TO SPORT AFTER CONCUSSION

WHAT IS CONCUSSION?

Concussion is a mild traumatic brain injury sustained when the brain is shaken or the head impacts something with force. It is usually not visible on a scan but diagnosed by symptom assessment. In Motorcycle Sport, concussion can occur while you are wearing a helmet or even in low-speed crashes.

Motorcycling Australia's medical concussion policy is activated the moment the nature of the injury/illness is identified on the Injury Report Form as concussion, irrespective of the severity of the concussion or if it is considered a suspected concussion. Any reported concussion is therefore required to follow the MA Return to Sport Framework.

ASSESSMENT & TREATMENT

While there is no cure for concussion there are strategies that have been found to reduce severity and duration of symptoms.

It is important to avoid being in a situation to sustain another concussion within the 10 days post injury for an adult (19 years old and older) and 20 days for a child (18 years old and younger). Multiple concussions can lead to more serious brain injuries and potentially long-term damage.

- **Immediate review by a medical practitioner** and no food or drink until assessment.
- **SCAT-6** assessment by the medical team at the time of injury and repeated by your medical practitioner to assess severity of concussion.
- **Paracetamol** for headaches, try to avoid aspirin and anti-inflammatories like ibuprofen.
- **Anti-nausea** medications such as ondansetron.
- **DO rest.** Most importantly rest, sleep, avoid strenuous activity particularly in the first 48hrs post injury. Stay in the company of an adult for 24hrs.
- **DON'T consume alcohol** or take sleeping tablets for at least 48hrs or until symptoms are resolved.
- **DON'T drive** for at least 24hrs or until any symptoms resolve.
- **REVIEW** with a specialist in concussion if symptoms are persisting 10 days post injury. There is a list of these available on the MA website.

COMMON SYMPTOMS

Concussion can lead to physical, cognitive and emotional disruption. Symptoms that are common are:

- Unsteadiness on the feet immediately post injury
- Mild headaches
- Tiredness
- Reduced concentration
- Nausea
- Memory difficulties
- Irritability or difficulty controlling emotions
- Dizziness or vertigo
- Balance problems
- Sensitivity to light or noise

However, if symptoms become severe seek help immediately….

WHEN TO SEEK HELP

These symptoms can be signs of a more severe concussion and warrant an urgent medical review or call an ambulance on 000:

- More than 2 vomits
- Loss of consciousness
- Seizure or fit
- Difficult to wake up or stay awake
- Visual disturbances
- Slurred speech
- Loss of hearing
- Weakness or numbness in any part of the body
- Severe or worsening headaches
- Confusion
- Bladder or bowel loss of control

RECOVERY

While there is no cure for concussion there are strategies that have been found to reduce severity and duration of symptoms. Symptoms often come and go over the course of the day and often last up to 10 days.

- It is important to avoid being in a situation to sustain another concussion within the 10 days post-concussion for an adult (19 years old and older) and 20 days for a child (18 years old and younger).
- Graduated return to physical activity and resting if symptoms worsen guided by your doctor and/or physiotherapist with experience in this field.
- Limit use of screens such as mobile phone, TV and computer.
- Slower recovery is more likely if you had severe symptoms post-concussion, have had repeated concussions, have a history of headaches, are older or are female.
- Children recover more slowly than adults from concussion. Return to learning strategies should also be considered and can be found at:

  https://www.rch.org.au/kidsinfo/fact_sheets/Head_injury-return_to_sport/

EXAMPLE RETURN TO SPORT FRAMEWORK

Step	Exercise Strategy	Activity at each step	Goal
0		Rest for 24-48 hours after the incident.	Observation.
1	Symptom limited activity	If the rider's symptoms have recovered COMPLETELY at rest, commence activities of daily living (such as reading, walking, watching TV, etc.) and returned to full work and/or school, without restrictions or the need for medication.	Gradual return to typical activities.
2	Aerobic exercise (up to 70% Max HR)	The rider to complete stationary cycling, walking at slow to medium pace and start light resistance training. The rider is to remain free of concussion related symptoms during the completion of a light/moderate aerobic exercise session.	Increased heart rate. See if physical activity highlights any concussion symptoms.
REST DAY			
3	Individual sport-specific exercise	The rider to complete sport-specific training away from the track environment (e.g., running, change of direction, cycling, and/or individual training drills) including computer gaming/race simulators/low impact recreational karting. No activities at risk of head impact.	Add movement and change in directions. Observe if increased physical activity and G-force simulation highlights any concussion symptoms. Observe if simulated cognitive activity highlights any concussion symptoms.
REST DAY			

Step	Exercise Strategy	Activity at each step	Goal
4	Non-Impact Training Drills	The rider to complete high-intensity exercise including more challenging aerobic training drills. Continued computer gaming/race simulators/ low impact recreational karting to be completed after high aerobic exercise.	Increased intensity of training. Observe if increased physical activity and G-force simulation highlights any concussion symptoms. Observe if simulated cognitive activity highlights any concussion symptoms.
REST DAY			
5	Mandatory Exclusion Period Note, the Mandatory Exclusion Period must be adhered to, regardless if the certificate is provided prior to the exclusion period's end.	**Adult** From the perspective of brain development an Adults is considered to be 19 years and over The minimum period of exclusion for an Adult is 10 days from diagnosis, including the day of the incident. Permitted to return to sport on the 11th day. **Child** From the perspective of brain development, a Child is considered be 18 years and younger. The minimum period of exclusion for a Child is 20 days from diagnosis, including the day of the incident. Permitted to return to sport on the 21st day.	If the rider feels confident to return to the sport. The rider must obtain a Medical Concussion Clearance for a medical practitioner and then present that to the relevant SCB.
Once the following process has been adhered to: • Return to Sport Framework completed • The minimum timelines met • The MA specific Medical Concussion Clearance form completed by a medical practitioner • Submitted to the relevant SCB The relevant SCB will then consider removing the medical concussion suspension.			
6	Return to Practice	Participate in normal training. High speed motorcycling, private practice, event practice sessions (with clinical review post session).	Restore confidence and assess functional skills by coaching staff.
7	Return to Competition	Normal event inclusion. Practice, qualifying and racing/competition.	