



## SPECIAL FEATURE



Concussions may cause long-term damage to the brain which may cause early dementia, and perhaps violent behaviour.



# “IF IN DOUBT... SIT THEM OUT”

## CONCUSSION AWARENESS

**Player safety is the number one priority  
at the OMHA**

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BY LOIS KALCHMAN

**LAST YEAR,** the worldwide headlines that focussed on Pittsburgh Penguins' Captain Sidney Crosby heightened the spotlight on concussions. On the other hand, it has created an over-the-top fear that is making some parents question whether or not their child should play hockey.

“The headlines have created more fear,” suggests Barry Willer, of St. Catharines, (PhD psychology) who is head of research for the Concussion Committee at the University of Buffalo and a senior medical advisor to the Ontario Minor Hockey Association. “People

have a high anxiety about concussions. While some (anxiety) is healthy some is unhealthy.”

The OMHA concussion research has been ongoing for ten years according to Dr. Darryl Bossence, a Barrie, Ontario chiropractor who is also the OMHA Technical Director for the Hockey Trainers Certification Program. Members of the OMHA Trainer's Program regularly attend concussion conferences and consult the OMHA Medical Advisory Committee on the latest information on this topic.

“Concussion education is part of our course



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A concussion is caused by angular acceleration adding that it shakes the brain which will disrupt the neurons.

for trainers and the return to play guidelines are different from other injuries," he described. Dr. Bossence also pointed out that the trainers' manual includes answers as to what is a concussion, how to handle it and the Return to Play

guidelines.

According to Dr. Bossence, current findings indicate there is ongoing research that suggests a concussion may cause long-term damage to the brain which may cause early dementia, and perhaps

violent behaviour.

While he understands no one likes to sit out, he is frustrated that players do not understand that the medical person's permission to return to contact play does not mean you can go into a game

immediately. Trainers are taught - "If in doubt, sit them out."

"People focus on the passion," Dr. Bossence insists adding he will never be swayed." The coach may be the bench boss but the trainer is the most important person whose recognition and management of concussed players is one of the trainer's responsibilities. Their primary focus is player safety, fitness, and the overall well-being of the player.

### Return to Play

The first Concussion Seminar to educate team officials, parents, players and physicians was organized in the mid 1990's put on by Think First Canada and The Dr. Tom Pashby Sports Safety Fund followed by two at the Air Canada Centre where close to 1200 people attended.

Dr. Marc Aubry, of Ottawa, is a sport medicine physician and one of the Ottawa Senators' doctors and is the Chief Medical Officer of Hockey Canada and the International Ice Hockey Federation.

"Our safety program is for coaches, officials and parents," he says of the on-line module at [www.hockeycanada.ca/concussions](http://www.hockeycanada.ca/concussions).

"Recognize a concussion, get them off the ice and don't allow them back to play and make sure parents get them to the proper

**Recognize a concussion, get them off the ice and don't allow them back to play and make sure parents get them to the proper medical people.**

medical people," Aubry emphasized. "We have discussed and put in place the Return to Play Guidelines and they must have a letter from a medical person for Return to Play."

He explains that a concussion is caused by angular acceleration adding that it shakes the brain which will disrupt the neurons. It is also important to note that a concussion is not unique to sport and can happen anywhere

# KNOW WHEN YOUR HELMET IS **TOAST!**

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American Association of Neurology study December of 2011.



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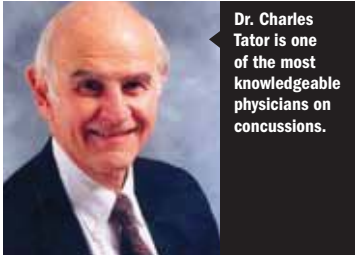
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Dr. Charles Tator is one of the most knowledgeable physicians on concussions.

**“Not all symptoms appear immediately,” he continues. “It can be a day or a week later. First is usually a headache, dizziness and maybe the next day they might vomit.”**

including the backyard, playground, cycling, a motor vehicle accident or at home.

Toronto neurosurgeon Dr. Charles Tator is one of the most knowledgeable physicians on the subject.

“It is very important that the patients (and parents) be knowledgeable and recognize the signs, symptoms and main features of management of a concussion particularly if they think they may have suffered a concussion,” Dr. Tator says. “They can take an online course at [www.ThinkFirst.ca](http://www.ThinkFirst.ca) for \$9.00.”

“Not all symptoms appear immediately,” he continues. “It can be a day or a week later. First is usually a headache, dizziness and maybe the next day they might vomit.”

Dr. Tator adds that the injured player needs cognitive and mental rest with no computer, no videos and no school assignments.

“For a lot of parents, the return to learn (school participation) is more difficult,” he explained. “It is individualized and the teacher and principal must be informed.”

Many of the states in the USA have legislated rules for amateur athletes and now the Ontario Government is expected to pass Bill 39, which will require school boards to conduct player, parents, teacher and coaches concussion management education including both a Return to Play and Return to Learn module.

“If a player is concussed, the

principal and teacher will have to play a significant role in the Return to Learn section,” Dr. Tator says.

### Player Equipment

Kinesiology, Dr. Pat Bishop is the chair of the Canadian Standards Association Committee that creates standards for hockey equipment and is sympathetic with parents trying to reduce the cost of equipment by buying on-line.

However, Bishop warns, “There is no such thing as a helmet that will prevent a concussion. Helmets are designed to prevent skull injuries and bleeding on the brain which tend to be lethal.” Dr. Tator, Dr. Willer, Dr. Bossence and Dr. Aubry all agreed with this statement.

“There are claims by people on the internet that their helmets meet CSA standards,” he says but adds that, “if a helmet does not have a CSA sticker, it is not certified.”

In the OMHA if a player attempts to play a game with a non-certified helmet, the referee can give the team a minor penalty and the illegal helmet removed.

## RETURN TO PLAY

**Step 1** No activity, only complete mental and physical rest. Proceed to step 2 only when all symptoms are gone. This includes avoiding both mental and physical stress.

**Step 2** Light aerobic exercise, such as walking or stationary cycling. Monitor for symptoms and signs. No resistance training or weight lifting.

**Step 3** Sport specific activities and training (e.g. skating).

**Step 4** Drills without body contact. May add light resistance training and progress to heavier weights. Go to step 5 after medical clearance. (reassessment and note)

**Step 5** Begin drills with body contact.

**Step 6** Game play. (The earliest a concussed athlete should return to play is one week, although for children and youth, most experts are recommending a two-week minimum).

**Note:** Players must have TWO LETTERS from their healthcare professional. The first after step two and the other following step four.

Players should proceed through return to play steps only when they do not experience symptoms or signs and A PHYSICIAN has given clearance. Each step should be a minimum of one day. If symptoms or signs return, the player should return to step 1, and be re-evaluated by a physician. The time needed to progress from non-contact to contact exercise will vary with the severity of the concussion, and the individuals response to gradually increasing activity.

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The OMHA' mouthguard policy was introduced in 1999 and was first organization in Canada to implement this policy.

"The mouthguard is primarily to prevent dental injuries," says Dr. Paul Piccininni a dentist who made presentations at Concussion Seminars for Hockey. Piccininni and has tended Canadian athletes at nine Olympics.

"An additional benefit may be a reduction in the incidence or severity of concussions but that has yet to be proven in a controlled scientific study," he says.

### Baseline Testing

Baseline Testing is the other hot topic in the rinks. First and foremost, all the above experts agree that baseline testing does not prevent a concussion. It is only one tool used in assessing the readiness of a person to return to play.

Dr. Willer says his research shows that "Baseline testing does not tell us a thing. The scores on baseline testing did not predict the time for return to play."

Research into Baseline Testing is an ongoing process and the OMHA Trainer's Program continues to monitor it very closely.



Baseline testing is a tool that helps assess the readiness of a person to return to play

Getty Images



Mouthguards primarily prevent dental injuries. Research is ongoing to determine if moutguards reduce the severity of concussions.



Until recently, Canadian physicians were taught very little about concussions in medical school. Dr. Tator has created a concussion segment that will be used in all seventeen medical schools across Canada next season. As well, Dr. Aubry reports there could be breaking news from the fourth International Symposium on Concussion in Sport organized by the International Ice Hockey Federation, International Olympic Committee, International Federation of Football Association and the International Rugby Board to be held in Zurich Switzerland in November 2012.

And last but not least watch for the name PARACHUTE CANADA. The provincial government requested four groups who have all been focussing on safety issues in sport to unite and work together and thus in July, Think First Canada, Safe Kids Canada, Safe Communities Canada and SmartRisk are all under the name Parachute Canada.

Dr. Bossence wants parents and organizations to know that the OMHA will run mini concussion seminars ranging from one to four hours depending on the needs of those who request it. He suggests that associations contact the OMHA Office to learn more about these seminars or to ask your Head Trainer.

Player safety remains the OMHA's number one priority. The Trainer's Program will continue to work with their Medical Advisory Committee and other industry experts to ensure that the organization remains on top of the latest research and development of concussions.



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