Concussion

Patient information leaflet (Adult)

NEUROPSYCHOLOGY

NHS Highland na Gàidhealtachd

We have assessed your head injury and it's very unlikely to cause worrying symptoms in the coming days. It is safe for you to leave hospital but it is best not stay at home alone for the first 24 hours after leaving hospital. Also, stay near a telephone for the first 24 to 48 hours in case you need to access emergency medical help.

When to go back to hospital?

Go to your nearest hospital emergency department as soon as possible, if you develop any of these symptoms:

- Unconsciousness or lack of full consciousness (for example, a problem keeping your eyes open)
- Drowsiness (feeling sleepy) that lasts longer than 1 hour when you would normally be wide awake
- Problems understanding or speaking
- Loss of orientation (not knowing where you are, what time it is, who you're with and what's going on around you)
- Loss of balance or problems walking
- Weakness in 1 or more arms or legs
- Problems with your eyesight
- A painful headache that will not go away or ease
- Vomiting (being sick)
- Seizures (also called convulsions or fits)
- Clear fluid coming out of your ears or nose
- Bleeding from 1 or both ears

If you're unwell, get someone to take you to the emergency department or call 111 or 999

Do not drive, cycle or operate machinery until you feel completely better. Please refer to the DVLA website for more information.

Concussion is usually caused by an impact to the head or body. **Most people make a full recovery after a few days or weeks**. Common symptoms detailed overleaf such as headache, mood changes, or feeling slowed down,can last for a few months.

Follow the recommended advice in this leaflet to help your recovery and manage symptoms.

If your symptoms are causing problems after six weeks speak to your GP for advice or **call NHS 24 121**

Common symptoms detailed below can last for a few months.

Follow the recommended advice in this leaflet to help your recovery and manage symptoms.

Common symptoms and signs indicating possible concussion

Physical

- Headache
- Neck pain or tenderness (mild-moderate)
- Nausea/vomiting
- Tinnitus
- Taste/smell impairment
- Dizziness/vertigo
- Photo sensitivity or sensitivity to noise
- Transient diplopia (double vision)
- Balance or motor inco-ordination

Cognitive

- Confusion
- Brief loss of consciousness (< 2 mins)
- Difficulty concentrating
- Difficulty remembering things
- Feelings of being 'slowed down' or 'in a fog'
- Witness reports person was slow to get up after injury

Behavioural/emotional

- Irritability and other transient personality changes, e.g disinhibition
- Emotional lability
- Psychological adjustment problems and depressive/anxious symptoms
- Difficulty attending work or school
- Fatigue, drowsiness and sleep disturbances (including insomnia) or sleeping more than usual

Recommended advice

Rest

Recommend

Mental and physical rest (24-48 hours)

- ✓ In a quiet environment
- ✗ No reading, screen time (e.g computer, phones, TV) or strenuous activities

Progressive return to work/education and activities

Progressive re-engagement

Initial stages → **Increase activity as tolerated**

- ✓ Low-intensity aerobic activities (e.g. walking, light jogging)
- ✓ Light mental stimulation (e.g. listening to music or reading
- ✓ Gradually resume normal daily activities

If re-engagement exacerbates symptoms, the activity intensity should be temporarily reduced to a more tolerable level

Self care

Managing headache or other pain

- ✓ Prescribe paprcetamol if required for short-term relief
- ✗ Avoid NSAIDs and aspirin within the 48 hours, as well as opioids or other sedatives

Managing sleep disturbances: prioritise behavioural and environmental changes over pharmacological interventions

Other self-care techniques

- ✓ Remain hydrated
- ✓ Use an ice/cool pack intermittently, if required
- ✗ Avoid alcohol or recreational drugs, if applicable

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