



## For parents or carers of young people who have sustained a head or brain injury

This information is provided to help you know how to help your child following their recent head injury and provides information about recovery and services that may be able help.

Your child may have been 'knocked out' or concussed. This means that they will have lost consciousness for a short time but afterwards appeared to be back to normal. Sometimes they are unable to recall what happened just before the incident and immediately afterwards. This is called post-concussion syndrome and is caused by tiny areas of bruising or other damage to the nerve cells in the brain. Tests may not show up any problems but there may still be areas of damage that in the weeks or months after injury cause:

- ∨ Headache.
- ∨ Dizziness.
- ∨ Fatigue.
- ∨ Poor concentration.
- ∨ Memory problems.
- ∨ Speaking and learning difficulties.
- ∨ Emotional and behavioural problems.

Your child may have suffered a more significant brain injury with abnormalities found on a CT or MRI scan.

Most head injuries do not cause long term problems, however, a small percentage of young people may experience difficulties for several months or much longer after injury or may be aware of difficulties emerging as they grow up and their brain continues its development.

Sometimes it is not until the young person returns to school that problems are identified. Over a period of time:

- ∨ Your child may slowly and subtly show a drop in their ability to keep up in class, may report working much harder to achieve the same as they did pre-injury, may be dropped in their 'sets'.
- ∨ Homework may become more stressful, take longer and your child may be more easily upset.
- ∨ Your child may complain of feeling constantly exhausted, especially after reading, writing or listening to the teacher.

Sometimes difficulties arise as children progress up through the school system and face increased demands and higher teacher and parental expectations. Hormonal changes, increased peer pressure and social networks during adolescence can emphasis problems in managing day-to-day life. You may notice that your child is losing their friends or changing friendship groups and may be becoming involved with unhelpful peers.

Some young people experience:

- ∨ Changes in behaviour.
- ∨ Becoming more impulsive.
- ∨ Being unable to concentrate.
- ∨ Losing their temper and being more confrontational in nature.

Your child may describe that they 'are living in a fog', 'are listening but cannot take on board what someone is saying' 'are feeling irritable, slow and different from their friends'.

Often a long time has passed between the injury and identified changes in performance and the association has been lost. However, it is very important that these changes are considered in the light of a previous head injury, in order to reduce the likelihood of your child being wrongly labelled as lazy, difficult or troublemaking. Accurate recognition is essential so that the school can be made aware of the implications of head injury so the appropriate level and type of support can be put in place.

## Prevent recurrence

Take precautions to reduce the likelihood of repeated injury by looking at safety issues in your environment:

- ∨ In the home to reduce falls and accidents and to promote safe play,
- ∨ In outdoor activities, eg. wearing helmets for cycling and skateboarding, adequate visibility clothing and road worthy bikes.
- ∨ Educating children about the dangers involved in 'risk' or 'dare' type games like 'chicken'.
- Good role modelling, education, supervision and awareness-raising regarding road traffic awareness for young people as pedestrians and cyclists. Children under the age of approx 11 years do not have the ability to perceive and assess distance or speed nor are they able to react quickly at times of danger. This, combined with youthful impulsiveness, can result in unsafe and unreliable road behaviour and as such demands adult supervision.
- ∨ Safe driving including reducing our speeds, adhering to drink / drive laws, being extra alert in areas where children may be playing.
- ∨ Ensuring appropriate condition and use of car seats, belts and restraints.
- ∨ Educating young people about the risks involved in some sports and ensuring adequate training and supervision.
- ∨ Being aware of the potential dangers of the misuse of alcohol, substances and recreational drugs.

A young person who has been concussed should always see a doctor and must not play sport for a minimum of three weeks or until medical clearance has been given.

Repeated head injuries can have a cumulative effect on the developing brain, those involved in sports and activities that have an increased risk of repetitive injury must be

mindful of the adverse effect this may have on the developing brain of a young person.

Failure to adhere to appropriate concussion management guidelines can have serious adverse consequences both in the short and longer term.

## Support

You and your child may also benefit from other services that can offer support after the head injury and help you to understand and manage the difficulties or changes your child is experiencing.

Local support group for parents and carers of young people following head injury meets alternately at Horizon Centre and at Hannah's Seale Hayne contact Penny Weekes - pennyweekes@nhs.net 07929 265 225.

Support/ Information for parents of children and young people who have sustained a head injury may also be obtained from:

The Child Brain Injury Trust <a href="https://www.thechildrenstrust.org.uk">www.childbraininjurytrust.org.uk</a>
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Contact a Family <u>www.cafamily.org.uk</u>

Headway, the brain injury association <u>www.headway.org.uk</u> / 0808 800 2244.

Brain & Spine Foundation <u>www.brainandspine.org.uk</u> / 0808 808

1000.

If you, or your child, have concerns about any problems they may be experiencing, you should visit your GP who can refer you to a paediatrician who in turn may recommend local specialists who can offer support and guidance to your child, family and educational staff. Information and guidance for medical staff is available at <a href="https://www.cdc.gov/headsup">www.cdc.gov/headsup</a>

If you have any questions about anything that contained in this literature please do not hesitate to contact:

Penny Weekes pennyweekes@nhs.net 07929 265 225.

The Paediatric Liaison Team at Torbay Hospital on (01803) 655840