# Post-Concussive Syndrome: Is it Real?

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#### **DEFINITION**

- Post-concussion syndrome is the persistence of a combination of physical, cognitive, emotional, and sleep symptoms beyond the usual recovery period after a concussion.
- WHO Definition and ICD-10 Definitions
  - a syndrome that occurs following head trauma (usually sufficiently severe to result in loss of consciousness) and includes a number of disparate symptoms such as headache, dizziness, fatigue, irritability, difficulty in concentration and performing mental tasks, impairment of memory, insomnia, and reduced tolerance to stress, emotional excitement, or alcohol.<sup>1</sup>

<sup>1.</sup> WHO (World Health Organization) International Statistical Classification of Diseases and Related Health Problems. 2010. [October 3, 2013]. (10th Revision. [Online version.])



## PROBLEMS WITH DEFINITION

- Does not define the duration of the post-acute period.
  - Operationally, this seems to hover around 3 months
- Symptoms are nonspecific
  - Consider Concurrent PTSD
- Does not take into account presence of symptoms pre-injury





## WHAT DO THE STUDIES SHOW?

- Only one prospective study with good baseline
  - (McCrea et al 2013)
- This study was in sports related injury in youths, not adults
  - PCS presence and duration was related to LOC, presence of HA, and initial symptoms of pain and memory issues
- Similar findings in ER prospective study of adults and children >13
  - (Eisenberg et al 2013)
- A very recent cohort study comparing mTBI vs non TBI soldiers found that 47% vs 25% met criteria for PCSh
  - (Schwab wt al 2017)





# MARKERS REPORTED AS ABNORMAL

- Neuropsychological testing
- fMRI
- Neurological examination
- MRI tractography

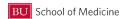




# ARE THESE UNIQUE TO TBI?

Absolutely not





# **POSSIBLE EXPLANATIONS**

- Presence of pre morbid pathology
  - Supported by multiple studies
- Presence of pre morbid PTSD
- Concurrent development of PTSD
- Perhaps something we don't know yet





#### REFERENCES

- Committee on Sports-Related Concussions in Youth; Board on Children, Youth, and Families; Institute of Medicine; National Research Council; Graham R, Rivara FP, Ford MA, et al., editors.Washington (DC): <u>National Academies Press (US)</u>; 2014 Feb
- McCrea M, Guskiewicz K, Randolph C, Barr WB, Hammeke TA, Marshall SW, Powell MR, Woo Ahn K, Wang Y, Kelly JP. Incidence, clinical course, and predictors of prolonged recovery time following sport-related concussion in high school and college athletes. Journal of the International Neuropsychological Society. 2013;19(1):22–33
- Makdissi M, Cantu RC, Johnston KM, McCrory P, Meeuwisse WH. The difficult concussion patient: What is the best approach to investigation and management of persistent (>10 days) postconcussive symptoms. British Journal of Sports Medicine. 2013;47(5):308–313.
- Schwab, K, Terrio, H, Brenner, L., Pazdan, R, McMillan, H., MacDonald, M., Hinds, S., Scher, A. Epidemiology and Prognosis of mold traumatic brain injury in returning soldiers. Neurology 2017;88:1571-1579



