Medical Equestrian Association Ireland

Concussion Summary

- **Concussion - Is a Brain Injury** with complex neuropathology
- Caused by blow / hit/ biomechanical force to Head or Body, transmitted to Brain.
- May or May Not be associated with Loss of Consciousness
- Rapid (not Immediate >10 mins.) or delayed onset of symptoms and/or signs
- SYMPTOMS/Complaints (e.g. headache, dizziness) vary in type and in severity
- SIGNS / Observations may include Behavioural changes and Unsteadiness
- Usually short lived neurological / cognitive impairment
- Usually resolves with REST (? how long)
- NB ----- May also indicate other serious Head or Brain Injuries

Concussion Recognition

- Rider / injured person - obviously unconscious, dazed or disorientated
- OBSERVE and use Common Sense
- OBTAIN - History of Fall / Accident / Injury ... Ask Fence Steward or Spectator
- SYMPTOMS or What does Faller complain of? (Not complaining or silent may also be indicative)
- SIGNS or What do you see? (Be aware of Behavioural change and Unsteadiness)
- ORDER -10 minute stand down period off course and REASSESS

Signs and Symptoms of Concussion

- Symptoms – (include) headache, nausea, confusion, amnesia, dizziness, loss of balance, blurred vision/ visual disturbance.... may vary in type and in severity
- Signs – (include) Loss of consciousness, confusion, disorientation, behavioural change, unsteadiness, convulsions, etc.

Concussion Management

- Sideline assessment – **Remove from course or arena**, ask Maddock’s Questions, EXAMINATION-General & Neurological, score symptoms and memory assessment
- Reassess after 10minutes and 30minutes. Is rider’s condition improving, the same or worsening? If not improving, get Medical help or Refer to Hospital
- REST. Do NOT Ride. REASSESS. REST. Recovery. REST. **Only when an athlete has been assessed as symptom free may they return to riding.**
- If in doubt, SIT IT OUT!

Concussion Side-line Assessment Questions *(Maddock’s Qs, Modified for Equestrian Sport)*

- Which event are we at?
- What is the name of the horse you are riding?
- Which competition is it?
- Which fence did you fall at?
- What event and where did you last compete?
- Who is the current World Champion in Eventing or Show Jumping?
- Where were the last World Equestrian Games held?
- How did you get here today?
Instructions for Athlete Care (24 hours following concussion/head injury)

These instructions should be read to you and then given to a responsible adult who will be available to accompany you over the next 24 hours

For the next 24 hours:

**DO NOT**

- Do Not Ride a Horse or operate heavy machinery
- Do Not Drive a Motor car, Do Not Ride a Motor bike or bicycle,
- Avoid excess visual stimulation Do NOT use a computer
  - Do Not drink Alcohol

**DO**

- Get plenty of rest
- Take prescribed medications or Paracetamol for Pain

RETURN to the Accident & Emergency Department IF YOU

- Have Severe HEADACHES
- Are CONFUSED or Have Difficulty Concentrating
  - Start VOMITING
- Have Blurred or Double VISION
- Have excessive DROWSINESS or Have a FIT or CONVULSION

Note: After a Head Injury, it is common to have mild headaches, difficulty with concentration, irritability or dizzy turns. If the above should persist more than a few days, you should visit your own GP or return to the Accident & Emergency Department.
Rehabilitation and Return to Riding Following Concussion

Follow the “Return to Play - Rehabilitation Plan” guidelines of FEI and Acquired Brain Injury Ireland

**Note:** Cognitive Judgement, Balance and Co-Ordination are impaired in concussion injury. A rider/athlete must not ride a horse in the first stages of recovery.

**Levels / Stages of Return to riding**

Note: Cognitive Judgement, Balance and Co-Ordination are impaired in Concussion injury.

A Rider/Athlete Must Not ride a horse in the first stages of recovery.

1. **REST** - No activity, complete cognitive and physical rest, Do NOT Ride a Horse. Once asymptomatic proceed to level 2.
2. Progress to light aerobic training (walking, jogging), no resistance training.
3. Progress to sports specific exercise, i.e. Riding - going out for a hack / flatwork
4. Non-contact training drills, i.e. work riding.
5. Full training after medical clearance including neuropsychological testing.

If at any of these stages, the rider/athlete becomes symptomatic, he should revert to the first level of activity for 24 hours before attempting again to move on to the next level.

**KEY PRINCIPLES FOR RETURN TO EQUESTRIAN SPORTS FOLLOWING CONCUSSION**

1. **REST.** Riders/Athletes MUST NOT RIDE A HORSE the same day that their head injury occurred.

   2. Riders/Athletes should NOT return to Riding if they still have **ANY symptoms**.

3. Riders/Athletes, MUST INFORM your coach and/or trainer of your Concussion injury, symptoms, and GIVE the contact information for the treating health care provider.