

 **YOUTH SPORTS NEW YORK**
THE SUNY YOUTH SPORTS INSTITUTE

Instructing Non-School
Youth Coaches About Brain Injuries

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Who we are

- SUNY System wide program
- Changing the culture of organized youth sports
- 30 SUNY Instructors (college coaches)
- Through the SUNY and CUNY colleges
- Academic advisory board at SUNY Cortland, 12 PhD's
- Seven (7) Modules, Exam following, No Online Training
- Evidence-based curriculum
- Since March 2008 we have trained for certification nearly 10,000 youth coaches impacting the lives of roughly 300,000-350,000 young people in 750 towns cities and villages in NYS

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Instructing Youth Coaches

- We train non-professional coaches
- Unskilled volunteers, perhaps 100,000
- Are expected to have knowledge
- **But remember this is PLAYTIME**
- It is an emotional setting
- They have limited time, and pressured lives
- Instruction must be relevant and contextual
- Increase success of training through consent

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Upon Certification



- Photo Sideline Credential
- A two year coaching certification
- Free online video drills
- Liability insurance for training we provide
- Extensive website to provide ongoing information on health, safety conduct and practice
- Access to Level II Course – Teaching Mastery
- Sport specific information provided by SUNY coaches

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Module 2- Health & Safety Overview

- Screening: Know health concerns of your players
- Growth and development affects safety
- Sports Injuries: caused by a variety of factors & accidental
- Health: conditioning, progression, activity vs. training
- Hydration: Critical to performance in sports and studies
- Obesity: Creating a culture of activity through play
- Concussions: When in Doubt, Leave them Out
- Environmental conditions and safety
- Inspect and maintain equipment & playing areas
- Prevention and management of common injuries
- Know your Emergency Action Plan

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Pre-Participation Screening

- Know health status of all participants
- Do not get surprised by a prior-condition
- Discuss health issues in Parents Meeting.
 - Understand: special dietary needs/allergies, prior head injuries, medications (asthma, bee-sting kits, etc.), physical & mobility issues, limitations, etc.

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Growth and Development

Children	Adults
<ul style="list-style-type: none">• Growing skeleton• Immature motor patterns• Higher percentage of plate injuries• High percentage of playground injuries• Inefficient CV System• Many variations of size and strength	<ul style="list-style-type: none">• Mature skeleton• Mature motor patterns• No plate injuries• Efficient CV system

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Sport Injuries Vary By...

Age: growth and development

Gender: especially post-pubescent

Sport:

- equipment type and amount
- flooring vs. ice vs. grass
- collision vs. non-collision
- contact vs. non-contact,
- projectile vs. non-projectile
- high-risk vs. low-risk

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Reducing the Risk and Occurrence of Three Types of Injuries

- Acute injuries:
 - (TBI) Traumatic Brain Injury, breaks, sprains, etc..
- Overuse injuries
 - Repetitive stress injuries where pain and swelling continue beyond one day...e.g. tendonitis
- Illness
 - Asthmatic, environmental illness, etc...

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Injury Trends in Football

- highest risk potential
- head and neck due to head-to-head, head-to-ground and head-to-knee impact
- potentially serious
- lower extremity most prevalent



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Injury Trends in Soccer & Basketball

- potential to head and spine due to body-to-body, head-to-head and body-to-ground
- lower extremity injury most common
- **acute** injuries include sprains, strains, and concussion



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Injury Trends in Lacrosse

- lower extremity injuries most common (ankle and knee, shoulder),
- potential concussions and spinal injury due to **excessive body to body**, head-to-head, head to ground contact
- acute injuries also include sprains and strains of muscles and joints in upper extremities

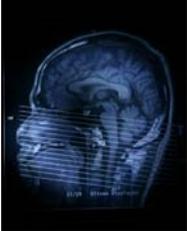


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Concussion & Traumatic Brain Injury

What is a concussion?

Concussion is a mild traumatic brain injury (TBI) that occurs when a blow or jolt to the head disrupts the normal functioning of the brain.



SUNY Upstate Medical University
University Hospital
MEDICINE AT THE HEART

Concussion Management Program
& CNY Sports Concussion Center
www.upstate.edu/concussion

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Adolescent Sport TBI's

Lee & Piro 2008

Male Sport Concussions	Female Sport Concussions
<ul style="list-style-type: none">• football• lacrosse• Soccer• basketball• winter sports• wrestling• Rugby• Baseball• biking	<ul style="list-style-type: none">• soccer• Cheerleading• Basketball• Ice hockey• Winter sports• Lacrosse• softball• Field hockey• gymnastics

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Myths About Concussion

- If you weren't unconscious, then no concussion
- Everyone gets better in two weeks
- Once the headache goes away, everything will be fine
- Concussion is a short-term with no long-term effects
- If there's no visible injury, everything's okay
- Play through the pain – everyone else does!

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Facts About Concussion

- Over 1 million Americans sustain concussion annually
- Most concussions do NOT result in KO
- Symptoms can last hours, days, or indefinitely
- **A second blow to the head (w/in 2 weeks) can cause PPCS (persistent postconcussion syndrome)**
- Concussion can cause disability affecting school, work, and social life
- Returning to contact or collision sports before you have completely recovered from a concussion increases your chances of long-term problems

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**Many Adolescents DO NOT
Take themselves out of games**
-So Youth Coaches Must-

In Lee & Fine study, 326 out of 863 adolescents with sport concussions continued to play in the same game after sustaining the injury

Of that, 109 received an additional blow to head and 35 developed PPCS

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What are the symptoms of a concussion?

Concussion can cause a number of different

- physical,
- cognitive,
- and emotional symptoms.

Some symptoms show up right away, but others may not appear or be noticed for days or weeks after injury. The number and severity of symptoms will be different for each person.

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Physical Symptoms

- headache , neck pain
- nausea
- lack of energy
- feeling physically and mentally tired
- dizzy, light-headedness, and a loss of balance
- blurred, double vision,
- increased sensitivity to light and sounds
- ringing in the ears
- loss of sense of taste and smell
- change in sleep patterns especially waking up a lot at night

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Cognitive Symptoms

- difficulty concentrating and “paying attention”
- trouble with learning and memory
- problems with word-finding and putting thoughts into words
- easily confused and losing track of time and place
- slower in thinking, acting, reading, and speaking
- easily distracted
- trouble doing more than one thing at a time
- lack of organization in everyday tasks

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Varied Social and Emotional Symptoms

- mood changes including irritability, anxiousness, and tearfulness
- decreased motivation
- easily overwhelmed
- more impulsive and uninhibited
- withdrawn and wanting to avoid social situations
- especially if there are a lot of people

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How long does it take to get better?

A child or adolescent must get cleared by a doctor before you let them play again.

Most people recover completely from a concussion, usually in several days or weeks.

Recovery can take up to a year or longer. Also, in some cases the symptoms will improve but will not go away completely. A child or adolescent must

Recovery may be slower in those who have already had one or more concussions.

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**You, the Coach, is in Charge in an Emergency
-Know Your Emergency Action Plan-**

Ask your program administrator for a plan that lays out:

- Emergency Procedures
- Phone numbers for Emergency Response Team
 - Police, Fire, Ambulance
- Policies for thunder and lightning, extreme heat or cold conditions
- Emergency Medical Procedures
