

Concussion, second impact syndrome and postconcussive syndrome

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Concussion is defined as the alteration of consciousness as a result of closed head injury but is generally used to describe consciousness at the time of injury is not a prerequisite. Key features include confusion and amnesia. The patient may be lethargic, easily distractible, forgetful, slow to interact or emotionally labile. Gait disturbance and incoordination may be seen. While symptomatic following a head injury, patients may exhibit disordered cerebral autoregulation, making them especially vulnerable to repeat impacts. Second impact syndrome following an apparently trivial repeat injury comprises malignant brain swelling that can quickly progress to coma and death. Although the existence of the syndrome is disputed, and it is certainly rare, it should be considered in advice to individuals engaged in sports or activities carrying a risk of further injury: symptomatic players should not return to play. Postconcussive syndrome is a loosely defined constellation of symptoms persisting for a prolonged period after injury. Patients may report somatic features such as headache, dizziness and disorders of hearing and vision. They may also suffer a variety of neurocognitive and neuropsychological disturbances, including difficulty with concentration and recall, insomnia, emotional lability, fatigue, depression and personality change. Some patients may exaggerate symptoms, seeking a secondary gain (compensation). - Summary box 28.2
Minor and mild head injury /uni25CF /uni25CF /uni25CF

Decisions on imaging and discharge are best made guided by published criteria In preverbal children and other vulnerable groups, non-accidental injury must be considered Amnesia, confusion, headaches and somnolence are typical features of concussion

Revision #1

Created 2025-12-31 15:12:16 UTC by Omar Ayman

Updated 2025-12-31 15:12:16 UTC by Omar Ayman