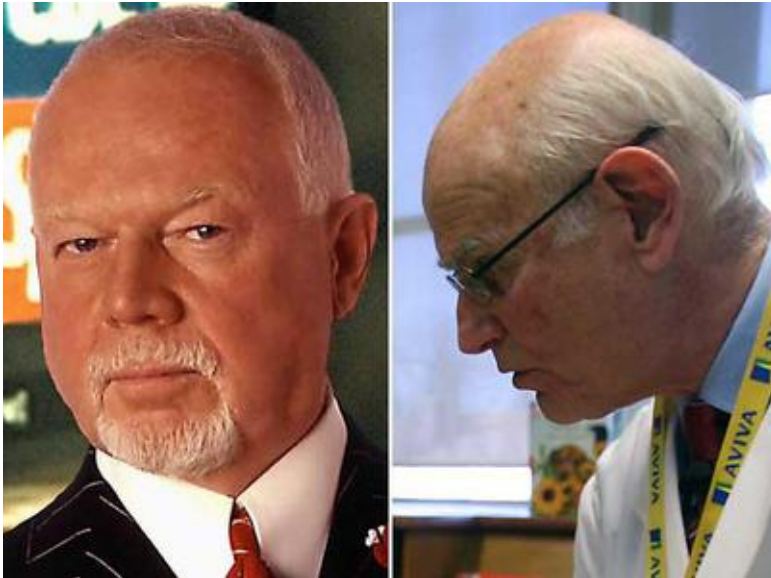


Let's put our heads together to stop concussions

Charles H. Tator Founder, ThinkFirst Canada

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- **Photos (1)**



Don Cherry, left, suggests Dr. Charles Tator, right, may just have been seeking headlines.

SUPPLIED FILE PICTURE (left), RENÉ JOHNSTON/TORONTO STAR FILE PHOTO

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As a brain surgeon, I have had considerable experience in treating athletes with brain and spinal cord injuries and I know we can only do so much because we cannot regenerate the brain and spinal cord. Thus the emphasis has to be on prevention and that is why I and others in the medical community across the country founded ThinkFirst Canada in 1992, a national injury prevention charity.

We know that prevention is effective. This has been proved by the decline in spinal injuries in hockey following the prevention measures that ThinkFirst – working with Hockey Canada and others in the hockey community – instituted, including

education of players about checking and pushing from behind, sewing STOP patches on sweaters, and rules against checking and pushing from behind.

Major head injuries have also been reduced in hockey and deaths are infrequent mainly because of prevention efforts, especially the use of helmets that protect against blood clots and other major brain injuries. However, concussions in the sport are another matter and prevention has been much more difficult for a number of reasons.

There is no helmet proven to reduce concussions, which are caused in many ways, including elbows to the head, shoulders to the head, hits from behind, fighting and other mechanisms. Also, it is harder to detect concussions because there are no obvious physical signs and symptoms. Most occur without loss of consciousness and produce more subtle symptoms such as dizziness, headaches and memory loss. In addition, concussions are often under-reported because players want to avoid missing shifts or games.

Concussions are important because we now know that repeated episodes may cause permanent deficits such as dementia, seizures, movement disorders and depression. Concussions appear to be on the increase, although further research is necessary to determine the exact numbers. Most observations have shown sharp rises in the number of concussions in both amateur and professional hockey – as high as 20 per cent of a hockey team each year. I have seen an increasing number of concussed hockey players in my own practice, especially in the 14-19 age group.

Increased player size and speed and increased aggression and violence are factors that add to the rate of concussions. Although almost everyone recovers from one concussion, many do not recover from repeat episodes. There is no proven treatment although there are ways to enhance the likelihood of recovery by accurate detection and expert management.

To counteract these terrible statistics, ThinkFirst has spent an enormous amount of time educating players, parents, coaches, leagues and physicians about the diagnosis and management of concussion.

Since 2002, we have distributed about 50,000 copies of "Smart Hockey," containing advice about prevention from stars such as former Maple Leaf captain Mats Sundin. In 2004, we formed the Concussion Education and Awareness Committee and this group of experts has developed guides for concussion management for players, parents, coaches and others, all on our website www.thinkfirst.ca. We helped organize education workshops mostly in conjunction with other organizations,

especially the Dr. Tom Pashby Sports Safety Fund and Hockey Canada. These workshops, held in communities across the country, provided expert advice on concussion diagnosis and treatment.

Recently, at the Regina workshop, I indicated that the "rock 'em, sock 'em" type of hockey espoused by commentators such as Don Cherry can no longer be the culture that dictates our game. We need to depart from the "win at all costs" mentality and return to the game when players had respect for their own bodies and respect for their opponents.

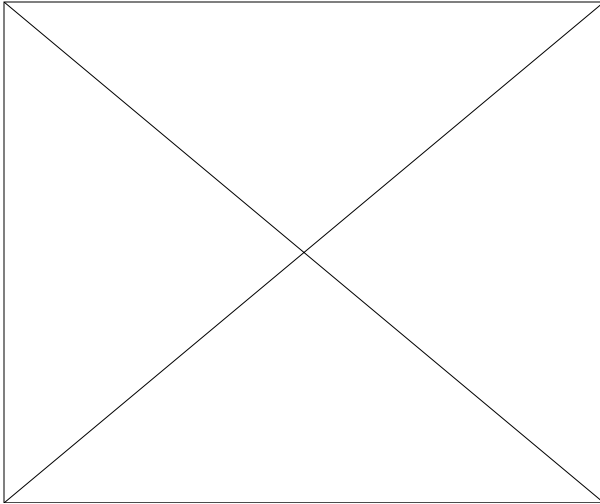
This message has been given by many others, such as the McMurtry report on amateur hockey violence in Ontario in 1974. In my book on sports and recreational injuries published last year, the cost of all sports and recreational injuries in Ontario was estimated at about \$3 billion.

However, the costs in terms of grieving families and suffering athletes is much more important and of even greater magnitude than we had imagined, as demonstrated by the work from Boston University reported recently in the *Star*. This report included the case of former NHL player Reggie Fleming whose brain had major damage after repeated concussions.

Two weeks ago, our group announced the formation of the Krembil Neuroscience Centre Sports Concussion Project at Toronto Western Hospital to examine the brains of concussed athletes willed to science. We will attempt to discover the exact mechanisms of the damage, and hopefully ways to treat this terrible disorder that has so many similarities to Alzheimer's disease.

We are at a watershed as a result of all these events. Previously, fans of the game came together to reduce spinal injuries. We improved the safety of the game for the players then, and we can do it again now. All hockey people should join the prevention team to reduce hits to the head in hockey. We must not be deterred by sideshows from those advocating the status quo on violence.

Charles H. Tator is a neurosurgeon at Toronto Western Hospital.



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