



Concussion/Mild Traumatic Brain Injury in the Elderly





Introduction:

A concussion is a mild Traumatic Brain Injury (mTBI) and the most frequently occurring type of brain injury regardless of age. Concussions account for 85% of all brain injuries, and the most common cause of mTBI, regardless of age, are falls.

There may or may not be a loss of consciousness (LOC); if it does occur, it's brief and lasts 30 minutes or less. There may be a period of time where the person is in a confused or disoriented state; that usually lasts for 24 hours or less.

Common Problems after Concussion:

Diagnosing a concussion is not a simple process. CT Scans and MRIs can show bleeding, but may not show brain changes after concussion. Even without loss of consciousness, a person can still have problems caused by mTBI¹:

 Thinking/Remembering	Difficulty thinking clearly	Feeling slowed down	Difficulty concentrating	Difficulty remembering new information
 Physical	Headache	Nausea or vomiting (early on)	Sensitivity to noise or light	Feeling tired, having no energy
	Fuzzy or blurry vision	Dizziness	Balance problems	
 Emotional/Mood	Irritability	Sadness	More emotional	Nervousness or anxiety
 Sleep	Sleeping more than usual	Sleep less than usual	Trouble falling asleep	

Special Considerations for the Older Patient:

Older patients who may have a concussion are more likely to be admitted to the hospital for observation, especially if other injuries are present. However, family members should maintain more frequent contact and observation for several weeks after an individual strikes their head, because some serious consequences can occur weeks afterward. The use of blood thinners can increase the likelihood of a slow bleed on the brain. Seek immediate medical attention if there is a significant/abrupt change in cognitive or physical abilities.

Someone does not have to strike their head in order to have a concussion. Whiplash in a car accident or falling can produce enough force to shake the brain and cause an injury².

Older patients are more likely to have other health issues, so it's important to provide medical staff with information about other conditions and current medications. Some symptoms of concussion such as dizziness, balance issues, memory problems, and anxiety can be mistaken as being part of their pre-injury "normal" when they are, in fact, due to the injury.



Depression can occur after TBI in patients of all ages. Families should be on the lookout for symptoms of depression (apathy, feeling worthless or hopeless, withdrawing from others, feeling sad or blue...). Depression is associated with poorer outcomes and decreased functioning however on the positive side, treatments for depression are available³.

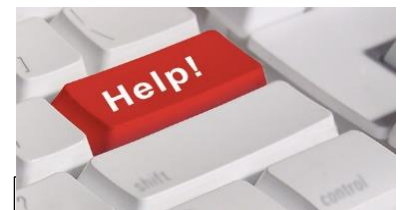
It is possible for an elderly patient to recover function after a brain injury, but they do so at a slower pace than younger people⁴. Follow up with a doctor familiar with concussion is recommended if problems continue; concussion clinics are also a good source of treatment. Therapies can address issues with balance, dizziness, vision changes, headaches and new/worsened cognitive issues.



Families can advocate for their loved ones by providing information about their pre-injury function, especially if they were active and well before the injury. This can dispel false assumptions which lower expectations and may decrease referrals for treatment. The goal of concussion treatment for an older adult is similar to that of a young athlete — to return the patient to the activity level they had prior to their injury.

To locate a professionals in your area you can visit www.biav.net and search "Find a Community Resource."

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Virginia

Phone: 1.800.444.6443

Live Chat: www.biav.net

¹ Centers for Disease Control

² <http://rethinkconcussions.upmc.com/2018/06/concussions-in-the-elderly/>

³ Papa, Linda et al. "Mild Traumatic Brain Injury among the Geriatric Population." *Current translational geriatrics and experimental gerontology reports* vol. 1,3 (2012): 135-142. doi:10.1007/s13670-012-0019-0

⁴ Levine, J., Flanagan, S.R. (2013) *Traumatic Brain Injury in the Elderly*. In N. D. Zalsler, D.L. Katz, R.D. Zafonte (Ed.) *Brain Injury Medicine: Principles and Practice* (pp.420-429). New York: Demos Medical Publishing.