

# CONCUSSION MYTHS

and what to do about it

It is common for people recovering from concussion to encounter a wide range of myths and inaccurate information. Some people encounter these when at school or work, talking with friends and family, looking up advice on the internet, or even from healthcare professionals. Recommendations for how to manage concussions have changed rapidly over the last few years. Not all of these recommendations have made it to everyone who needs it though, which can be confusing. Below, we cover some common concussion **myths** that you may encounter, the current **recommendations** based on the most up-to-date science, and a few **suggestions** for how you can handle misinformation.

References for the latest science on concussion, recovery, and college are included at the bottom of this handout.

## THE MYTH and misinformation

## what science REALLY SAYS




*all you need is rest, rest, rest after concussion*

This can include “cocooning” in a dark room, sleeping, not doing any physical activity, or not doing anything if any symptoms are present.



*active recovery PROMOTES recovery*

Current best practice recommendations are for **active recovery beginning after a very brief rest period of no more than a few days.**<sup>1,2</sup> After a 24-48 hour period of intense rest, you should return to moderate levels of activity. You should also be guided by your symptoms – experiencing some is okay, but not so much that you can’t continue the activity comfortably. You can read more about active recovery on the Concussion Brain Basics handout 




*concussion is a minor injury*

Everyone should recover within days and have the same symptoms.

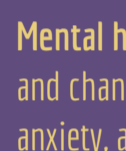


*timelines vary...*

Some people do recover quickly, but for **many people, needing a few weeks to recover is a more typical experience.** In fact, students often need up to a month for typical recoveries<sup>2,3</sup> and 20% to 30% of people have longer recoveries.<sup>4</sup> Talking with others about their recovery can be helpful, but remember that your experience may not be the same, and that’s okay. 



*mental health is not related to concussion or shouldn’t be considered a part of recovery*

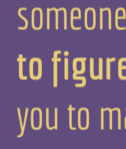


*mental health effects are common after concussion*


**Mental health is often impacted by concussion** and changes in mood, such as depression and anxiety, are common symptoms<sup>5</sup> but aren’t always recognized as being related to concussion.<sup>6</sup> Additionally, depression from life changes, anxiety about symptoms and recovery, irritability and frustration from not feeling well, along with heightened feelings of stress and worry are very common after concussion. Being less socially active and having less daily activity can worsen these feelings. **Using tools to support mental health can help support recovery from concussion.** 



*certain foods, drinks, supplements, vitamins, or diets are “quick fixes” for concussion symptoms*



*rely on trusted sources*


There are a variety of treatment options available to help manage common concussion symptoms. What works best for one person might not work well for someone else. **Talk with your medical providers to figure out what might be good options** for you to manage **YOUR** symptoms and help **YOUR** recovery. If something isn’t working, keep talking with them to find a solution. Don’t let late night internet searches replace the expertise of high-quality healthcare providers and your own experience.<sup>7-9</sup> 



*concussions only happen in football*

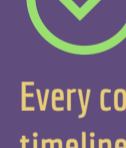


*concussions can happen to anyone*


The Centers for Disease Control (CDC) defines Concussion as “a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move rapidly back and forth”. This means that **people can sustain concussions in all kinds of ways** like from falls, car accidents, being struck by an object, and not just from sports-related injuries. In fact, 2 out of 3 concussions in college students are non-sports related. You can find more information about concussion statistics at [cdc.gov](http://cdc.gov). 



*concussions won’t affect school for more than a few days*








*academic impacts are common*

Every concussion is different and recovery timelines vary from student to student. Research as well as common sense tells us that a disruption to the way your brain is functioning can make school more challenging. **Several common concussion symptoms can affect school and academics.**<sup>1,11-13</sup> Symptoms like having a headache or light sensitivity can make it hard to concentrate or stay in class. Or, getting tired more easily makes studying for long periods of time difficult. Most students recover and go on to be successful students – using your network of support and the tools found in the SUCCESS handouts ([Success in School](#), [Returning to School](#)) can help you get there. 



## Tools for Managing Myths

Several of the SUCCESS handouts may be helpful in dealing with myths and misinformation. For example, the [Self-Advocacy](#) handout explains how you can use I-Statements to frame your needs and experiences. [Success in School 1](#) will give you some tips about how to manage myths about your learning and school. Below are a few ideas about how to handle concussion myths and misinformation:

-  If your medical provider is not giving you what you need, talk to them about it, and consider scheduling an appointment with someone who specializes in concussion.
-  If family is confused about what your medical team is telling you, consider bringing them to one of your appointments with you. You can also ask your doctor what they would advise telling your family and friends.
-  Speak up about your mental health needs. Your medical team can connect you with a professional, and your friends and family can better support you if they understand this part of your concussion experience.
-  Share with them the [“What I Want You to know about Concussion”](#) handout to tell them your experience and how they can best support you now.
-  Be ok with saying “no.” Don’t feel that you need to explain your situation or recovery process with everyone. Using the strategies in the [“Self-Advocacy”](#) handout can help you do this in a respectful and effective way.

## References

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