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"The Primary Treatment of Head Injuries resulting from Sport"

by

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There are certain special features in persons who sustain a head injury as a result of an accident at sport, which influence the pathology, the management and the prognosis. Thus the patient is usually young, and an extradural haematoma is more likely to occur in such a person, especially after the commonest injury, a simple concussion. In boxers, an acute subdural haematoma is commoner. The early clinical features of these were described.

In sport's accidents alcohol is not a complicating factor. The accident is usually witnessed and vital information can be given to the doctor. Transportation and supervision of the injured is readily available. The term "a good sport" is used, but a sportsman should not try to "work off" even a minor head injury; too often dazed amnesic players are seen wandering about the field.

All who have been concussed should be seen by a doctor and referred to hospital, where they will be retained for close observation for about 24 hours to ensure that complications are not arising, in particular an intracranial haematoma. Scalp wounds bleed freely and shock may occur; stop the bleeding by a firm pressure bandage. A free airway is quite essential; this is achieved by placing the patient semi-prone. The danger of vomiting and aspiration of vomitus was stressed; treat by placing prone, head down and clearing out the mouth. All persons with a head injury should also be suspected of having a cervical spine injury, and should be handled accordingly.

In general, the prognosis is better in young than in older persons. Help regarding prognosis, and thus regarding permission to return to the sport, is obtained by studying the post-traumatic amnesia. If this is more than one hour, the brain damage is severe, and the patient may take several days to recover fully.