ACADÉMIE NATIONALE DE MÉDECINE

The prevention of cerebral concussions related to sports practices must be strengthened

Press release from the French National Academy of Medicine

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Cerebral concussions (CC) are a major consequence of head injuries in sports, particularly among young people. Long considered benign, they can lead to neurocognitive, emotional and behavioral disorders that are sometimes long-lasting, especially in the case of repeated injuries. Contact sports (rugby, football, hockey, etc.) and combat sports (boxing, other combat sports, etc.) are the most affected, but few sports are completely spared.

Progress, but still insufficient vigilance

Despite awareness campaigns and changes in regulations, early detection and management of concussions remain unequal depending on the sport and the level of practice.

• Many cases remain unreported, and therefore undiagnosed, due to a lack of knowledge or minimisation of the initial symptoms.

• Post-concussion medical follow-up is still too random and of variable quality, particularly among young athletes.

• The risks associated with premature return to sport are often underestimated.

In football, repeated heading of the ball by children and adolescents is prompting increasing vigilance (2, 3). Several foreign sports federations (United Kingdom, United States, Canada) have already banned or restricted heading in training for children under 12 years of age. In France, they remain authorised, but discussions are underway to restrict the practice to certain ages and under supervised conditions.

In order to strengthen concussion prevention and athlete safety, the French National Academy of Medicine:

• Emphasizes the importance of specific monitoring of young athletes, who are more vulnerable to the effects of repeated head trauma;

• Stresses that, in combat sports, the 10-second rule should be abolished and that a fall to the ground resulting from a blow to the head should be considered equivalent to a knockout and automatically result in the fight being stopped;

• Recalls that concussion related to sports practice is a functional emergency, requiring immediate clinical neurosensory and cognitive assessment with an appropriate period of rest;

• Emphasizes the need for medical follow-up after CC, including a baseline neurocognitive test and a very gradual recovery protocols before any return to competition;

• Stresses that the responsibility of all stakeholders, as prevention relies on the joint commitment of the Ministries of Health, Sport and Education, sports federations, coaches, medical professionals and athletes themselves;

• Recommends systematic training for coaches, referees and educators in recognizing the early signs of CC.

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