

# Adolescent Athletes With Positive Risk Factors Report a Greater Concussion History at Baseline

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## **BACKGROUND & PURPOSE**

- Concussion position statements have identified modifiers and risk factors for sustaining a concussion and duration of recovery.<sup>1,2</sup>
- Such risk factors include sex, age, previous concussion history, migraines, attention-deficit hyperactivity disorder, learning disabilities, and mental health disorders.<sup>1,2</sup>
- Recent data from the CARE Consortium has identified female sex. age, attention-deficit hyperactivity disorder, medical history of headaches in the past 3 months, and symptoms as risk factors for increased concussion risk in college-aged cadets.<sup>3</sup>
- With little known about these risk factors in an adolescent population, the purpose of this study was to examine the relationship between a history of concussion and baseline risk factors in adolescent athletes
  - *Risk Factors*: 1) Sex, 2) attention-deficit hyperactivity disorder, 3) history of headaches, 4) diagnosed migraines, 5) learning disability, and 6) speech therapy

#### **DESIGN & METHODS**

- 2014-2015 to 2018-2019 academic years.
- excluded from the analyses.



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Data were retrospectively analyzed from a sample of 1,239 high school athletes, between the ages of 13-18 ( $M\pm SD=15.3\pm 2.0$ ) years.

All participants underwent routine baseline testing, consisting of computerized neurocognitive testing, using the Immediate Post-Concussion Assessment and Cognitive Test (ImPACT), during the

Student-athletes self-reported medical history on ImPACT and were divided into two dichotomous groups based of sex or positive risk factor. Any athlete who reported multiple positive risk factors were

A series of Chi-Square ( $\chi^2$ ) tests and odd ratios (OR) with confidence intervals were conducted to determine the relationship between a self-reported history of concussion and baseline risk factors.

# **RESULTS**

- Male sex (χ<sup>2</sup>= 12.55, p<.001; OR 1.85, 95% CI=1.31-2.61), attentiondeficit hyperactivity disorder ( $\chi^2$ = 8.68, p=.005; OR 2.08, 95% CI=1.26-3.43), headaches (χ<sup>2</sup>= 31.20, p<.001; OR 3.81, 95% CI=2.31-6.29), and migraines ( $\chi^2$ = 9.71, p=.005; OR 2.52, 95%) CI=1.38-4.59) were associated with a self-reported history of concussion.
- No significant relationship existed between a history of concussion and learning disability ( $\chi^2$ = 1.96, p=.15) and speech therapy ( $\chi^2$ = 1.29, p=.26).

Male sex: 16.8% (117/693)	Female sex: 9.8% (54/546)
Diagnosed ADHD: 23.7% (23/97)	No ADHD: 12.9% (148/1142)
Diagnosed headaches: 35.0% (27/77)	No headaches: 9.8% (144/11
Diagnosed migraines: 27.5% (16/58)	No migraines: 13.1% (155/11

## **DISCUSSION & CONCLUSIONS**

- Male sex, attention-deficit hyperactivity disorder, history of headaches and diagnosed migraines were associated with a greater prevalence of prior concussion in high school/adolescent athletes.
- The frequency of a history of concussion in adolescent athletes was roughly 2x higher for males compared to females, and for positive risk factors of sex, attention-hyperactivity disorder, and migraine, compared to those without. Frequency of headaches was roughly 3x higher.
- These results further support and warrant special consideration in adolescent athletes who report a history of positive risk factors of concussion.
- Future research is needed to understand if the risk factors and prevalence exist prior to a sustained concussion or are exacerbated following a concussion.



