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Guest Opinion: Cheerleading squads must beware of concussion threat

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October 10, 2015



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Much of the conversation around concussions in youth sports focuses on collision sports such as football, hockey and lacrosse. Little attention is given to the athletes on the sideline, cheering their teams to victory.

And yet, cheerleading carries the highest rate of catastrophic injury in sports and accounts for two-thirds (65 percent) of all catastrophic injuries to female athletes.

The athleticism of modern cheerleading far surpasses the wool skirts, pompoms and chants of decades past. The American Association of Cheerleading Coaches and Administrators (AACCA) asserts, "Today, cheerleading involves skills which require the strength of football, the grace of dance, and the agility of gymnastics. Complex maneuvers are performed which challenge the limits of the body."

A 2012 study published in the American Journal of Sports Medicine concluded that 20 percent of all injuries occurring in high school cheer are concussions. Only boys' ice hockey and girls' lacrosse experience a higher percentage of concussions by sport.

Cheerleading is different from other high school sports in one troubling way: 84 percent of concussions in cheer occur during practice. This is in sharp contrast to all other sports, where most concussions occur during the heat of competition.

Why? In many schools, cheerleading is classified as an activity, not a sport. Lacking the designation of a sanctioned sport, cheerleading squads are often not afforded the same equipment and resources as regulated sports teams, including suitable practice space, athletic mats and certified coaches trained in concussion evaluation and management.

The American Academy of Pediatrics (AAP) and the American Medical Association (AMA) have adopted policies recommending that cheerleading be designated a contact sport due to the inherent risks. “These girls are flipping 10, 20 feet in the air,” said pediatrician Samantha Rosman during an AMA debate. “We need to stand up for what is right for our patients and demand they get the same protection as their football colleagues.”

Contemporary cheerleading involves highly technical routines. Cheerleaders are susceptible to concussion during a variety of stunts, involving “height, inversion and rotation of the body as well as physical interaction and contact with other team members,” according to the cheerleading safety organization, CheerSafe. Coaches, parents and cheerleaders must be alert to the warning signs of concussion.

A concussion is a type of brain injury that changes the way the brain functions, caused by a blow or jolt to the head or body. The vast majority of concussions occur without a loss of consciousness. Therefore it is critical to recognize symptoms that might present immediately or after a few days.

Any of the following may be symptoms of concussion: headache, nausea, dizziness, confusion, mental “fogginess,” sensitivity to light or noise, sadness and fatigue. Be alert for symptoms that worsen over time and seek urgent care if necessary.

It is important to remember that cheering with concussion symptoms is dangerous and can lead to a prolonged recovery. Trying to “tough it out” often makes symptoms worse. While the brain is still healing, a cheerleader is much more likely to experience another concussion. A repeat concussion during this time can result in permanent damage — or be fatal.

The cornerstone of concussion management is physical and cognitive rest. A cheerleader should not initiate any physical activity until they are no longer experiencing symptoms of concussion. Cognitive activities such as reading, texting and video games should also be limited. A health care provider trained in the management of concussion can assist the cheerleader in first returning to the classroom and later to physical activity utilizing a graduated, stepwise process.

For more information, visit: stlukesonline.org/concussion or cheersafe.org/concussions.