



PEDIATRIC BRAIN INJURY: WHAT YOU NEED TO KNOW



Common problems after brain injury:

Emotional/Behavioral: impulsivity, emotional instability, irritability, decreased frustration tolerance, impaired judgment, tension/anxiety, depression, aggressive behaviors, disinhibition, changed personality

Physical: loss of smell, hearing loss, visual difficulties, balance difficulties, speech issues, motor control and coordination, fatigue, seizures, decreased tolerance from drugs and alcohol, headaches, sleep disturbances, nausea and vomiting (early on)

Cognitive: problems with short term memory, attention, concentration, distractibility, decreased verbal fluency/comprehension, information processing, arousal, problem solving, intellectual functioning, abstraction and conceptualization, slowed reaction times

Executive Functioning: goal setting, self-monitoring, planning, initiation, modifying, bringing to completion

Psychosocial: educational/vocational problems, interpersonal difficulties (maintaining healthy relationships, ie. intimacy, boundaries, etc.), intrapersonal difficulties (loss of sense of self and identity; depression/frustration), family issues (roles, dynamics)

How does brain injury differ in children vs. adults?

The human brain continues to develop until around age 25. A brain injury may alter the development and function of a child's developing brain.

Young children may be impacted more as a result of a brain injury due to having acquired fewer skills and knowledge prior to sustaining an injury. As a result, important building blocks that create a foundation for future learning have not been established.

Injury to a child's brain may not become evident until the child is expected to perform higher level skills which call on parts of the brain that have been affected.

What is a brain injury?

Acquired Brain Injury: Injury to the brain which is not hereditary, congenital, or degenerative, and may include brain damage resulting from events such as stroke, aneurism, anoxia from near drowning, toxic substances, or traumatic brain injury.

Traumatic Brain Injury: A specific type of damage to the brain that results when the head:

- Hits a stationary object (ie. windshield in a car crash)
- Is hit (ie., mugging, assault)
- Is penetrated (ie., gunshot wound)
- Is violently shaken by an external force (ie., Shaken Baby Syndrome, whiplash)

Concussion: A type of mild traumatic brain injury where there may be a brief loss of consciousness of up to one hour or none at all. Medical providers describe a concussion as a "mild" brain injury because concussions are usually not life-threatening. Even so, the effects of a concussion can be serious. Concussion symptoms can last days, weeks, or even longer.

Frequency of Child Brain Injuries:



Over 500,000 children, under 19 years old, visit the Emergency Department for a brain injury.



In children under 14 years old TBIs result in an estimated:

- 2,685 deaths
- 37,000 hospitalizations
- 435,000 Emergency Department visits



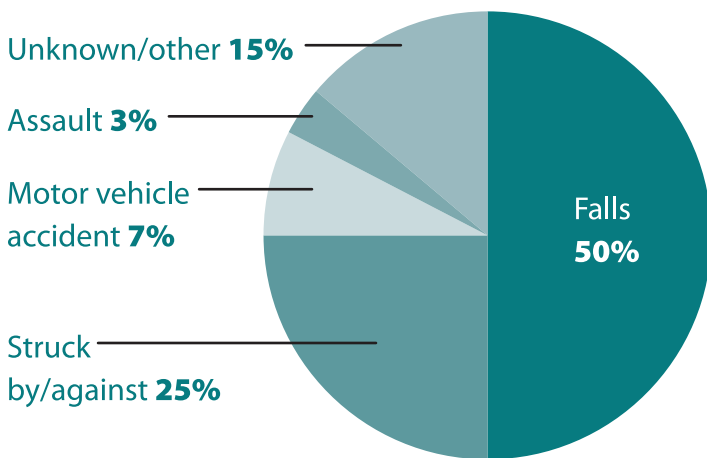
Over 145,000 children living in the United States are living with the lasting effects of a brain injury. These children could fill 5,370 public school classrooms.

Why is it hard to identify or diagnose brain injury in children?

Sometimes due to the lapse of time between a brain injury and the child's emerging issues, brain injuries are frequently missed, leading to mislabeling or misdiagnosing the child's issues. Many times, these problems are identified as learning disabilities or emotional issues, and as a result are addressed inappropriately.

Special Education law in Virginia maintains a category for traumatic brain injury but does not recognize acquired brain injury (ie., near-drowning, severe bleeding, meningitis, lack of oxygen, poisoning, tumor, etc). Children who have a non-traumatic brain injury may be mislabeled and identified incorrectly by their Special Education team. This may prove to be challenging for both the adults and the child in trying to help the child receive appropriate and beneficial services. This misperception by adults leads to implementing ineffective strategies, leaving the adult frustrated and the child disheartened by his or her perceived inadequacies. The misdiagnosed child can quickly become discouraged and unmotivated, feeling helpless that his or her situation can change or improve.

Common Causes of TBI in Children:



What is brain injury like for those impacted by it?

- "I study twice as long as I used to, but I'm doing much worse."*
- "I go to every class, but nothing sinks in."*
- "My peers look at me differently. I feel lonely and frustrated."*
- "I get angry and explode; I can't back down from a fight."*
- "I have headaches constantly and I'm tired all the time."*
- "My dreams are over. I don't know what I'm going to do now."*
- "Since my daughter's brain injury, I feel like I'm walking on eggshells whenever I'm around her."*

Contact a case manager at Brain Injury Connections of the Shenandoah Valley for more information:

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