

Neurologie

Minor traumatic brain injury

You have sustained minor traumatic brain injury for which you received treatment at one of the departments of Amsterdam UMC. This leaflet informs you about the possible consequences of this brain injury and offers you some advice.

What is minor traumatic brain injury?

Minor traumatic brain injury is caused by a blow or impact to the head, a sudden movement of the head or an accident. The brains are moved around for a short time causing temporary loss of consciousness and/or memory loss and/or dizziness.

You may not remember anything about the accident and a period of time before it. You may also not remember anything about a particular period of time after the accident.

Because the brain does not store any information during this time, this loss of memory is usually permanent. There is therefore no benefit in searching for these memories.

Complications

Minor traumatic brain injury is a relatively harmless condition. However, in exceptional cases complications may occur in the first 24 hours. Doctors are able to make a good assessment which patients may experience these complications. The doctor may decide to admit you to Amsterdam UMC for at least the next 24 hours.

If, after a careful examination, the attending doctor makes the assessment that the risk of complications is very low, you will be able to go home.

Minor traumatic brain injury usually passes without any residual symptoms. In the first few days or weeks you may suffer from:

- Headaches
- Dizziness
- Fatigue and drowsiness
- Memory and concentration disturbances
- Forgetfulness
- Blurred vision
- Increased irritability
- · Ringing in the ears and loss of hearing
- Increased sensitivity to light and sound
- Nausea

Complications may vary for each patient.

Recommendations

- Resting often provides relief. However, you do not need to lie in bed all day. Ensure that you gradually reduce it so that you are up and about after a few days.
 You may then start working again. Working part-time temporarily or taking extra breaks may help. If necessary, try to create a gradually increasing work schedule with your employer or company medical officer.
- The same applies to school. It is recommended to ease into the work. In the case of
 concentration problems, sensitivity to sound, or problems with remembering details it should
 be noted that these symptoms are of a temporary nature. The same advice applies in this
 case, which is to take regular breaks, take more time to finish work, make extra notes and, if
 necessary, postpone tests and exams.
- Watching television and computer use is best kept to a minimum.
- Alcohol consumption is not recommended: the brains respond differently to alcohol than before; alcohol use slows down your recovery. If alcohol was the reason for the accident, you may want to consider your alcohol use and, if necessary, discuss it with the general practitioner.
- Sport can be resumed as soon as you are able to. Only sports with a risk of traumatic brain injury (for example, football, hockey, boxing) are not recommended. Sport clubs may have guidelines for this. When riding a bike it is sensible to wear a helmet, especially for children and elderly, and those using oral coagulation
- There are no legal restrictions for taking part in traffic. Driving a car or riding a motorbike is not recommended until the time that you are certain you can concentrate properly, respond properly to unexpected situations and estimate distances properly.
- You may use paracetamol for headaches, maximum dosage 6 x 500 mg per 24 hours. By sufficiently suppressing pain it is easier to function normally during the day and sleep well at night. You would be well- advised to limit long-term use of paracetamol, as this may cause headaches.

Follow-up care

In case of persistent or serious increase of symptoms you are advised to consult your general practitioner. Your general practioner will then consider whether you would benefit from a referral to a neurologist for further examination into the nature of the complaints.

Contact		
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