

Persistent symptoms following concussion may be posttraumatic stress disorder

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Concussion accounts for more than 90 percent of all TBIs, although little is known about prognosis for the injury. The symptoms cited as potentially being part of PCS fall into three areas: cognitive, somatic and emotional. But the interpretation of symptoms after MTBI should also take into account that injuries are often sustained during psychologically distressing events which can lead to PTSD.

The authors conducted a study of injured patients at an emergency department in a hospital in France to examine whether persistent symptoms three months after a head injury were specific to concussion or may be better described as part of PTSD. The study included 534 patients with head injury and 827 control patients with nonhead injuries.

Three months after the injury, 21.2 percent of head-injured and 16.3 percent of nonhead-injured patients met the diagnosis of PCS; 8.8 percent of head-injured patients met the criteria for PTSD compared with 2.2 percent of control patients.

"This prospective study of the three-month PCS and PTSD symptoms of mild head- and nonhead-injured patients recruited at the ED [[emergency department](#)] showed that the rationale to define a PCS that is specific to head-trauma patients is weak. ... Further use of PCS in [head](#)-injury patients has important consequences, in terms of treatment, insurance resource allocation and advice provided to patients and their families. Available evidence does not support further use of PCS. Our results also stressed the importance of considering PTSD risk and treatment for

patients with MTBI."

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