



Your Child after a Head Injury

Parent/Caregiver Information—Paediatric Occupational Therapy



Your child and head injury

Your child has come to hospital because of an injury to the head. They may have been 'knocked out' or just felt dizzy, had a headache and/or vomited.

Just as every child is different – so is every head injury. Your child's symptoms and recovery will depend on the area of the brain injured and the seriousness of the damage.

It should be noted that the appearance of concussive symptoms may be delayed several hours or days.

As a parent or caregiver of your child you are the expert!

You will notice the symptoms your child experiences. You may see changes when watching your child at play, interacting with others or during other general daily activities.

Discussed in the following pages is information regarding some of the possible symptoms your child may experience and information about recovery from head injury.

Physical symptoms

What to look for

- **Headaches**
- **Tiredness** – tiredness is common for a few days after a head injury. Children may want to sit or lie down more often. Alternatively they may be more restless and move around a lot, 'flitting' from one thing to the other.
- **Vomiting/nausea/dizziness**
- **Sensitivity** – to light, sound and movement.
- **Change in sleeping patterns** – sometimes children are difficult to settle, wake up at irregular times or may sleep very heavily.
- **Change in eating patterns**

- **Change in speech** – you may notice your child muddle words up or speak less clearly than usual.
- **Clumsiness** – your child may be unsteady or less coordinated when moving.
- **Double/blurred vision**
- **Blank looks** – you may notice your child staring into space.
- **Seizures** – these are rare but can occur following a head injury.

Emotional symptoms

- **Mood swings**
- **Outbursts of anger** – verbal or physical
- **Frustration**
- **Change in activity level** – increased physical activity or alternatively very subdued and quiet.
- **Changes in social interaction** – difficulty getting on with siblings or friends.
- **Lack of initiative**
- **Changes in personality**
- **Extra tearful/clingy**

Cognitive (thinking) symptoms

- Your child may have difficulty remembering things that happened during the day or things they are told.
- **Concentration** – it may be your child concentrates for shorter periods of time than normal. They might also be distracted by noise, movements, sights and may 'flit' from one activity to another
- **Difficulty learning**
- **Confusion or disorientation**

Recovery

Recovery will take time. Most children will experience some of these symptoms after an injury to the head. Research shows that most children will recover from head injury within 2-3 weeks. See your doctor for advice if your

child's symptoms are severe or last longer than 3 weeks. Following are some ways to help your child recover.

The most important aspect of recovery is RAPID physical and cognitive (thinking), and REST.

Babies 0-18 months

- Your child needs extra sleep.
- They may tire more quickly during feeding so may need more frequent feeds of smaller quantities.
- Babies often become grizzly following a head injury and harder to settle. This can become stressful – ask family and friends for help.
- If unsteady when on their feet, try to keep them away from stairs or climbing objects.

18 months—5 years

- Your child may need extra rest time.
- Try to organise quiet activities for them to do.
- Try to observe and intervene if your child becomes tired or over-excited. Use simple calming down activities.
- Be aware that unusual behaviour may be related to the head injury.
- If it is possible, try to keep your child from very busy environments (including day care) until well. If it is not possible for your child to stay home, then let the day care know your child has had a head injury so they can consider this during the daily programme.

School age children

- Your child may feel better in the morning but need a rest in the afternoon despite starting the day so well.

- While symptomatic, children need to limit over exertion of daily living activities physical and cognitive (thinking) stressors, eg. school, text messaging, computer and play-station games and long periods of reading as your child may find these types of activities over-stimulating.
- Some children experience severe headaches. If paracetamol does not help or it lasts more than 48 hours and is associated with vomiting or seizures, you may need to return with your child to Hospital, or contact your general practitioner immediately.

Returning to school

Keep your child home from school for several days with quiet activity. It has been noted that children who have time to recover seem to have less problems long term. If this is not possible inform your child's school so they can make allowances.

Please give your child's school teacher the 'Back to School' pamphlet.

Your child's attention and concentration may decrease as they tire. They are also likely to tire more easily.

It is often best to start back to school for mornings only and make a plan for returning home (or find a place to rest) if they become tired or experience an increase in any symptoms.

It is important to avoid another head injury, so avoid contact sports or other very active activities for at least **6 weeks**.

Children should not return to active practice or play sport until clinically completely symptom free.



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- hospital and specialist services, go to www.cdhb.health.nz

