Executive Summary of the Athletics Committee Report on Concussions

Background

In light of all the recent media attention on football-related concussions and possible long-term damage to the brain, several members of the faculty have raised questions about whether Tufts students should be playing football. Over the past two academic years, the Athletics Committee has been studying the issue.

One subcommittee looked at what Tufts, NESCAC, other NESCAC schools and the NCAA were doing to reduce the frequency and severity of concussion injuries. Another subcommittee looked selectively at the scientific literature on concussions.

The presidents of the schools in the NESCAC Conference have been taking this issue very seriously. In football and a number of other sports, changes in the nature and frequency of practices have reduced the number of concussions, and attention is also being paid to rule changes that reduce the risk. The overall approach of the NESCAC Conference and Tufts University, given the relative paucity of information at this time, is risk mitigation rather than getting rid of particular sports.

Tufts, in conformity with the practices of both NESCAC and the NCAA, has implemented (and keeps improving) its concussion protocol. Coaches are trained about concussions, all athletes receive information and training opportunities regarding concussion injuries, new athletes receive baseline testing, trainers are present at practices and matches, and the trainer has absolute authority to remove an injured player and implement the concussion protocol in both practices and games. And, while there is very little information available about the long-range risks of sub-concussive impacts, the efforts being made to reduce concussions should have an effect on these as well.

Findings

We have found that the problem of concussions is not solely an issue in football. Concussions occur in many other sports, in some cases impacting a larger percentage of athletes than in football.

The committee feels that, in fact, the largest area of concern is club sports. In general, club sports' coaches do not receive the same level of training as varsity coaches, and trainers are not present at practices or matches. The exception is rugby, which has a high incidence of concussions. Because of this, NESCAC adopted guidelines for rugby that require an athletic trainer to be present at all matches and be available/nearby/on call during all practices. Based on conversations with members of the Administration and the Athletics Department, the committee is concerned about the level of oversight and resources provided to club sports.
The subcommittee that looked at the research on athletic concussions felt that a combination of inherent limitations and critical research design problems makes the validity and generalizability of many of the studies questionable. Nevertheless, they concluded that: (1) athletes with a history of concussions are more likely to experience deficits later in life; (2) singling out football makes no sense since concussions occur in many sports; (3) since the strongest evidence of long-term effects is for those athletes who have experienced a concussion, the focus should be on detecting concussions and on making sure that athletes do not return to play until the concussion has resolved.

**Recommendations**

1. The University should reassess its club sports model to provide more oversight for concussion prevention training, diagnosis, and treatment.

2. The University should identify specific club sports that present statistically higher risks of concussion (e.g., rugby) and work with those teams to develop enhanced interventions that mimic the current concussion protocol for varsity sports and to develop guidelines for practices and competition that reduce the possibility of concussions.

3. The University should identify peer comparators (NESCAC, other Division III schools) that can be used to collect information on:
   a. Concussion exposure by sport (varsity and club)
   b. Models for club sports oversight (coaches, trainers, funding levels, etc.)
   c. Models for tracking concussion data (by school, conference)
   d. Best practices for concussion mitigation

4. The Athletics Committee should be charged with annually monitoring the prevalence of concussions in athletics and the current status of risk mitigation practices. Where necessary, the committee should recommend changes in practices to account for new developments in equipment, research, and mitigation strategies.