There are still many misconceptions surrounding concussions. UPMC is committed to changing the conversation by providing factual information on concussions.

**FACT**

- A direct blow to the head, face, neck, or elsewhere can cause a concussion if the force of the hit is transmitted to the head.
- Concussions can occur even if consciousness is not lost. About 90% of concussions happen without loss of consciousness.
- A person is at risk for a concussion based on numerous factors, like medical history, age, and gender.
- An athlete displaying any of the many signs and symptoms of a concussion should not be allowed to return to the practice or game, even if symptoms clear quickly.
- No two people will have an identical concussion.
- There are existing evidence-based active treatments, like vision therapy, vestibular therapy, exertion therapy, and medications.
- The best way to prevent a concussion is proper clinical management. Recovering from one concussion should not increase risk of another. Some inherent conditions, such as migraine, may put the athlete at higher risk.
- Long-term effects from concussion are typically due to poorly managed injuries. No definitive conclusions can be made because studies on long-term effects of concussion are ongoing.
- Helmets have been shown to protect against skull fracture and severe traumatic brain injury, but there is little evidence that helmets and mouth guards reduce the incidence of concussion.

**MYTH**

- The only thing that can cause a concussion is a direct blow to the head.
- An athlete only gets a concussion when they lose consciousness.
- The risk of concussion is the same for everyone.
- An athlete can safely return to playing after suffering concussion-related symptoms.
- All concussions, treatments, and recoveries are the same for everyone.
- You have to be put in a dark room to recover from a concussion.
- Once you have one concussion, you are at higher risk for future concussions.
- You can prevent a concussion with helmets and mouth guards.