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“Multi-Disciplinary Concussion Clinic Helps Decrease Socioeconomic Barriers for Behavioral and Psychological Diagnosis after Sports-Related Concussions”

The lasting neurocognitive effects following concussions have been well documented in the pediatric population, with evidence demonstrating significant impacts on both the social and academic lives of patients. However, the risk factors associated with developing long term sequelae such as learning deficits or psychiatric symptoms have yet to be investigated. Our study aimed to evaluate the relationship between patients' insurance status and the development of ADHD or psychiatric diagnoses following sports-related concussions (SRC).

We performed a retrospective review to assess patients <18 years old who sustained SRC between January 2007 to April 2023. Information regarding insurance status, age, gender, and race was collected.

225 patients were included in the analysis for having either pre-existing diagnoses of ADHD/psychiatric illnesses or having developed new diagnoses post-concussion. Medicaid patients were more likely to be younger (13.36 ± 2.59 vs 14.47 ± 2.03 years, $p=0.003$), male ($p=0.0123$), and non-white ($p=0.0001$). Despite having Medicaid/no insurance, patients did not have a difference in post-concussion diagnoses, number of clinic appointments ($p=0.42$) or loss to follow up ($p=0.3756$) (Table). Average time to diagnosis was 12.16 ± 12.55 vs 14.32 ± 11.71 months ($p=0.226$).

A multidisciplinary approach to concussion care decreases disparities in post-concussion behavioral and psychiatric care by providing access to behavioral and learning disability testing and follow up. However, the average length of time until diagnoses was over a year. Therefore, it is imperative that clinicians and parents remain cognizant of patients' behavioral and emotional changes following SRC to make earlier diagnoses and help patients seek earlier treatment.