

Report to the ACA Sports Council – Congressional Hearing on Traumatic Brain Injury

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- Chairman Pitts and Vice Chair Burgess provided opening statements; Statements also by Pallone (NJ)
- Data reported 1.7 m TBI annually
- Dr. Bonnie Strickland – Director of the Division of Services for Children with Special Health Care Needs in the Maternal and Child Health Bureau at the Health Resources and Services Administration (HRSA), Department of Health and Human Services. (report enclosed)
 - Discussed HHS CDC and NIH roles in treatment, prevention and research
 - Creating centralized online resources for TBI
 - Discussed leveraging of state and federal resources are critical to ongoing success
- Mr. William Ditto - Director of the Division of Disability Services at the New Jersey Department of Human Services, and is the past President of the National Association of State Head Injury Administrators.
 - Many variances at the state level in how TBI is managed currently
 - TBI is leading cause of disability and can go from cradle to grave
 - State systems need to be coordinated for care
 - Evaluating for a formula approach for predictable level of funding
 - Service coordination and multidisciplinary approach is critical through a case manager
 - Number one requested service in NJ is case mgmt.
 - Many TBI sufferers end up in jail or psychiatric hospitals
- Dr. Flora Winston - She is a professor of pediatrics at the University of Pennsylvania in Philadelphia and serves as the Scientific Director of the Center for Injury Research and Prevention at The Children’s Hospital of Philadelphia, Director of a National Science Foundation Industry/University Cooperative Research Center (the Center for Child Injury Prevention Studies), and Director of a National Science Foundation Research Experience for Undergraduates site.
 - Primary success metric is reduction in annual pediatric TBI
 - Changing airbag design greatly reduced TBI in children
 - Child age affects prognosis

- Keys to better outcomes
 - Timely acute care
 - Asking for more Federal funding
 - Industry should be a partner in this work
 - \$40,000 is average cost for child hospitalized for TBI
 - Mild TBI has a golden window of 48 hours
 - Improving diagnosis
 - What works and what doesn't
 - Need to get state do the art to the field Need to do more research
 - Need national action steps for child injury prevention
 - Concussions at Children's has grown 400+% over the last several years

- Dr. Mark Ashley - Chairman of the Board of Directors of the Brain Injury Association of America and California Brain Injury Association
 - TBI affects more folks than a new diagnosis of cancer
 - Post TBI treatment, when implemented correctly, is cost effective and very efficacious
 - The average stay for a TBI is now
 - 19 days in the hospital
 - 26 days in acute care center
 - Both are well below the needed treatment intervention
 - 36 months after TBI significant disability remained in adolescent population