

February 27, 2014

Committee on Children Public Hearing Testimony

Arleigha Cook – Trinity College Student and Brain Injury Survivor

Good Afternoon Representative Urban, Senator Bartolomeo, Representative Betts and Senator Linares and the distinguished members of the Children's Committee. For the record, my name is Arleigha Cook, and I'm a student at Trinity College. I am here to testify in support of HB 5113, AN ACT CONCERNING YOUTH ATHLETICS AND CONCUSSIONS. As a brain injury survivor, I believe it is of the utmost importance to educate for the prevention of concussions. If laws had mandated education for athletes, trainers, referees, and coaches as Bill 5113 will, there is a chance I may not have Post-Concussion Syndrome today. Training and vigilance is necessary at all levels of play. As my experiences have shown, players are at risk at the youth level, at the high school level, and at the collegiate level.

I received all of my concussions playing soccer. My first one was in eighth grade, at the youth soccer level. The ball hit me directly in the face and I lost part of my vision for a few minutes. I was told by an athletic trainer that I had a mild concussion, and that I should stop playing for the day. My second concussion, at the high school level, resulted in two days' absence from school, as dictated by my high school's trainer. My third concussion, again in high school, happened the same way, from getting hit in the face with the ball. I continued to play in the game and did not take any time off from school. My fourth, the last one my brain could handle, occurred my freshman year of college and resulted in Post-Concussion Syndrome and my permanent withdrawal from the game I love. I played my last game, as a central midfielder for Trinity College, on Saturday October 13, 2012.

That day in October, after being hit directly in the forehead, I exited the field before the end of the first half with the help of a referee who was trained to look for signs of concussion. Immediately my vision was blurred, I was confused, and I had a deep headache. I was evaluated by a trainer from Trinity who said that I should sit out for the time being to see if the symptoms persisted or faded. They persisted, so I sat and watched the game, and then went to see Trinity's team physician, who diagnosed me with a concussion. After the diagnosis, my family took me home and I spent two weeks sleeping around fifteen hours per day in a dark, silent room, only getting up to eat. Initially, my recovery period was relatively normal, and I had passed the physical and mental tests in Trinity's standard return-to-play procedure. Soccer season was over, so I turned to my other priority: indoor track. I began to slowly train and build up my strength again, but after a week into my training I began to get nauseous when I sprinted or lifted. That would turn into dizziness, and eventually I wouldn't be able to stand anymore. Because these symptoms were so overwhelming, I had to stop training every time that happened. I also started experiencing a strange phenomenon where I would lose control of my eyes. It was then that I saw my doctor again and was diagnosed with Post-Concussion Syndrome.

My fourth and last concussion was the only one that was handled well and with adequate instruction and support, because the trainers and referee were all highly knowledgeable about concussions. However, because I had already had the buildup of three previous concussions, I wasn't lucky enough to heal completely. On the other hand, I was lucky enough to be able to miss only two weeks of first semester of my freshman year and just barely finish on time with the help of my amazing professors.

My concussions changed my life. I now know loss of identity, loss of friends, and loss of part of my life that I will never get back. On top of that, I had to deal with different forms of

treatment – I went to vestibular therapy for my eyes, balance problems, and general recovery. I also was on medication that is used to treat Parkinson's, and now I am on medication for Attention Deficit Hyperactivity Disorder, or ADHD, so that I can focus more easily in class. I am also on an antidepressant and was recently evaluated by a neuropsychologist to identify cognitive deficits. I needed none of these treatments before my concussions.

This is why education about concussions is so important. Had my teammates, coaches, and referees known what warning signs to look for when I had any of my first three concussions, I may not have a persistent mild Traumatic Brain Injury today. It is because of my experiences that I unreservedly support Bill 5113 and its goal to educate and spread awareness of the effects of concussions. Players and families need this support at the youth level, at the high school level, and at the collegiate level.

