The neural legacy of a single concussion

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HIGHLIGHTS
• Concussion history shapes neural function.
• History is evident despite no symptoms.
• Detectable through neural responses to speech.

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ABSTRACT

It has been hypothesized that concussions impart lasting brain damage, even after a patient has ostensibly recovered. This hypothesis is based largely upon neuropathological studies in deceased athletes, however, leaving open the question of whether it can be detected in vivo. We measured neural responses to speech in collegiate student-athletes with a history of a single concussion from which they had recovered. These student-athletes had weaker responses to speech than age- and position-matched peers. This group difference suggests that concussions engender small, but detectable, changes in brain function prior to the emergence of frank behavioral indications.

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1. Introduction

Lasting neurological damage is attributed to repeated head traumas, such as concussive or subconcussive injuries [1], even in young athletes. This raises the possibility that neural damage persists even after an athlete appears to have recovered from a concussion [2]. This idea has been supported by electrophysiological [3] and neuromaging [4] studies that suggest blows to the head impart neural damage in the absence of behavioral signs. The extent of this neural legacy remains undetermined, however.

We previously showed that the frequency-following response (FFR) is disrupted in children diagnosed with a concussion [5]. The FFR depends on synchronous neural firing and reflects auditory pathway health with microsecond precision. The FFR is a sensitive measure of the integrity of auditory processing, especially when elicited by speech [6]. Auditory processing is contingent upon the fast integration of multiple neural systems and is easily disrupted by disease [6,7], including brain trauma [8]; it stands to reason, then, that tests of auditory function could serve as proxies to detect subtle neural damage.

This idea is supported by evidence that children with a concussion have smaller FFRs to the fundamental frequency (F0); in contrast, responses to higher-frequency harmonics remain robust. The F0 is a chief cue for identifying sounds and therefore supports listening in the complex environments that challenge individuals with a previous head injury [8].
2. Methods

We used the FFR to test the hypothesis that concussions impart lasting neurological damage. Twenty-five male student-athletes with a history of one concussion (11–82 months before participation; mean = 36.1, SD = 20.0) were recruited from a college football team. All were healthy and active at the time of testing. Controls were twenty-five age- and position-matched teammates who reported no previous concussions. Sports medicine staff reviewed subjects’ medical records to corroborate reported concussion histories. Subjects were paid $20 and provided written consent. Procedures were approved by the Northwestern Institutional Review Board.

3. Results

Student-athletes with and without a previous concussion responded distinctly to the F0 and harmonics (Fig. 1; group × frequency interaction: $F(1,48) = 6.012, p = .018, \eta^2 = .111$).

Student-athletes with one previous concussion had smaller F0 responses than those without ($t(48) = 2.251, p = .029$, Cohen’s $d = .918$; Concussion mean (SD) = .0467 $\mu$V (.0014), 95% CI = [.0407, .0527]; No Concussion mean (SD) = .0557 $\mu$V (.0138), 95% CI = [.0500, .0613]). These groups had similar responses to harmonics ($t(48) = .066, p = .947$, Cohen’s $d = .021$; Concussion mean (SD) = .0155 $\mu$V (.0060), 95% CI = [.013, .018]; No concussion mean (SD) = .0154 $\mu$V (.0031), 95% CI = [.013, .017]).

As a whole, the student-athletes had F0 responses below the 50th percentile for this age group [9] (Fig. 1; one-sample t-test: $t(49) = 4.507, p < .001$, mean percentile = 28.4, 95% CI = [20.6, 37.8]). On average, the group without a previous concussion had F0s at the 38.5th percentile ($t(24) = 1.837, p = .079, 95\%$ CI = [25.6, 51.4]) whereas the group with a previous concussion had F0s at the 19.8th percentile ($t(24) = 4.628, p < .001, 95\%$ CI = [11.0, 31.9]).

4. Discussion

Student-athletes with a prior concussion had smaller responses to the F0 of speech than their teammates who never experienced a concussion. The putative legacy of this injury was evident despite indications that student-athletes had recovered. This neural hallmark of a previous concussion manifests similarly—albeit more mildly—as that observed in younger, symptomatic concussed student-athletes [5].

We cannot rule out that these group differences are due to pre-existing group differences. Additional limitations include that only males participated in this study and we relied on reported medical history. A longitudinal study in male and female athletes is warranted to address these issues and determine if deviations from neural baselines following a concussion impart lasting damage.

This report nevertheless suggests that a single concussion imparts a small, but reliable, lasting mark on neural function, consistent with emerging ideas in the field [1,3]. Subtle damage from the repetitive, subconcussive hits incurred in football may account for the student-athlete cohort’s F0s falling below the 50th percentile—including those without a previous concussion. This idea can be tested more thoroughly in a longitudinal study that follows student-athletes through their collegiate careers. Together, these results support the hypothesis that mild head injuries impart lasting neural damage prior to the emergence of frank behavioral sequelae.

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Author contributions

Study design: NK, TL, DC, JK, ECT, TW-S; Data collection: JK, SO-M, ECT, TW-S; Analysis: NK, TL, DC, JK, SO-M, ECT, TW-S; Manuscript preparation: NK, TL, DC, JK, SO-M, ECT, TW-S. All authors have approved the final manuscript.

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References


