Control Anchor Therapy: Targeted Psychotherapeutic Intervention for Post-Concussion Management

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PROGNOSIS = GOOD!

There was consistent and methodologically sound evidence that children's prognosis after mild traumatic brain injury is good, with quick resolution of symptoms and little evidence of residual cognitive, behavioral or academic deficits.

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Management

Sxs Presentation

Sxs Resolution

Concussion

Pre-Concussion Risk Factors

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Concussion Gateway

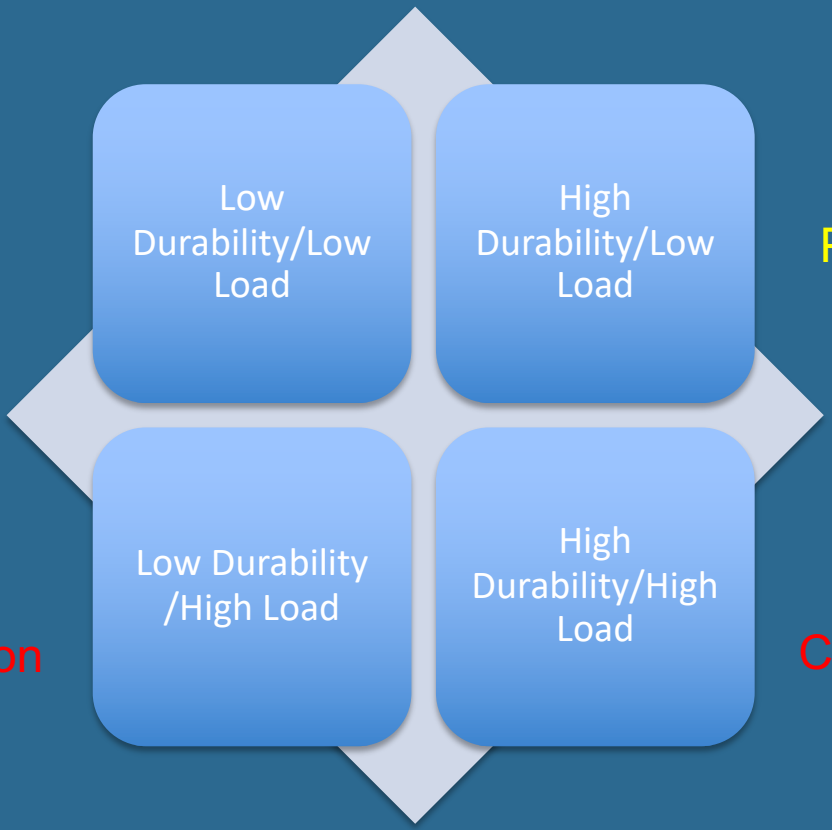
Academic stress
Athletic pressure
Family stressors
Social difficulties

Previous Concussion or Injury
Ongoing School Reluctance
Trauma History
Level of self competence & self esteem

Academic Expectations: Peak at 11th grade
- Personal Identity Pressure/Crisis
- AP Classwork
- Standardized Testing/College Apps.

Concussion Gateway Factors

Durability = coping skills, grit, internal locus of control; Load = Premorbid Risk Factors



Good Prognosis

Good Prognosis

Risk for Complication

Risk for Complication

TX = Increase Durability & Reduce Load

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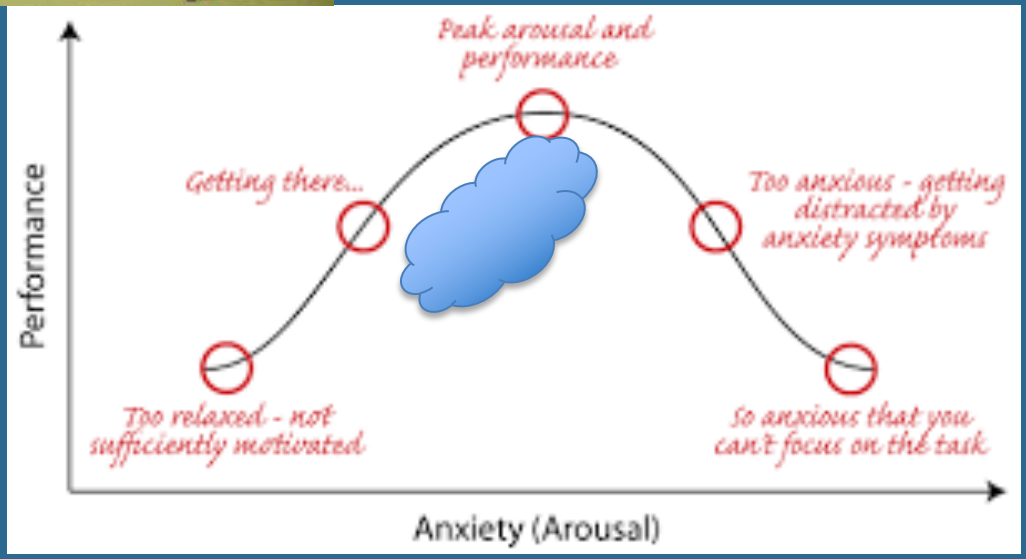
Anxiety: Across the Spectrum



- Adaptive and even performance-enhancing
- Can reach a "tipping point" that sabotages recovery
- Subclinical anxiety can lurk beneath and undermine recovery

Recovery Can Be Anxiety-Provoking

Concussion Management:

- Frustrating Inactivity
- Fears about brain injury
- Under/Over-appreciation of the impact
- Fear of “falling behind” and “being left out.”
- Isolation & Loss of Control

Cognitive Distortions:

- Permanent Brain Injury
- I’ll never get better
- I’m not getting better
- People think I’m faking
- I’ll never make up all the work
- I’m going to flunk (or get a B)
- College plans are derailed

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COMPLEX CONCUSSION:
Sub-acute Complicating Factors

Focus on
make-up work
OVER
FULL RECOVERY

Benched athletically and socially; life moves on…

School
Reluctance &
Social Withdrawal

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RECOVERY UNDER ATTACK

Acute Concussion Management & Injury related Stress

Pre-injury Risk Factors & Coping Skills

Subacute Risk Factors (entrenchment) & Erosion of Resilience

Concussion Management & Recovery

WORLD

Becomes Anchored

To INJURY

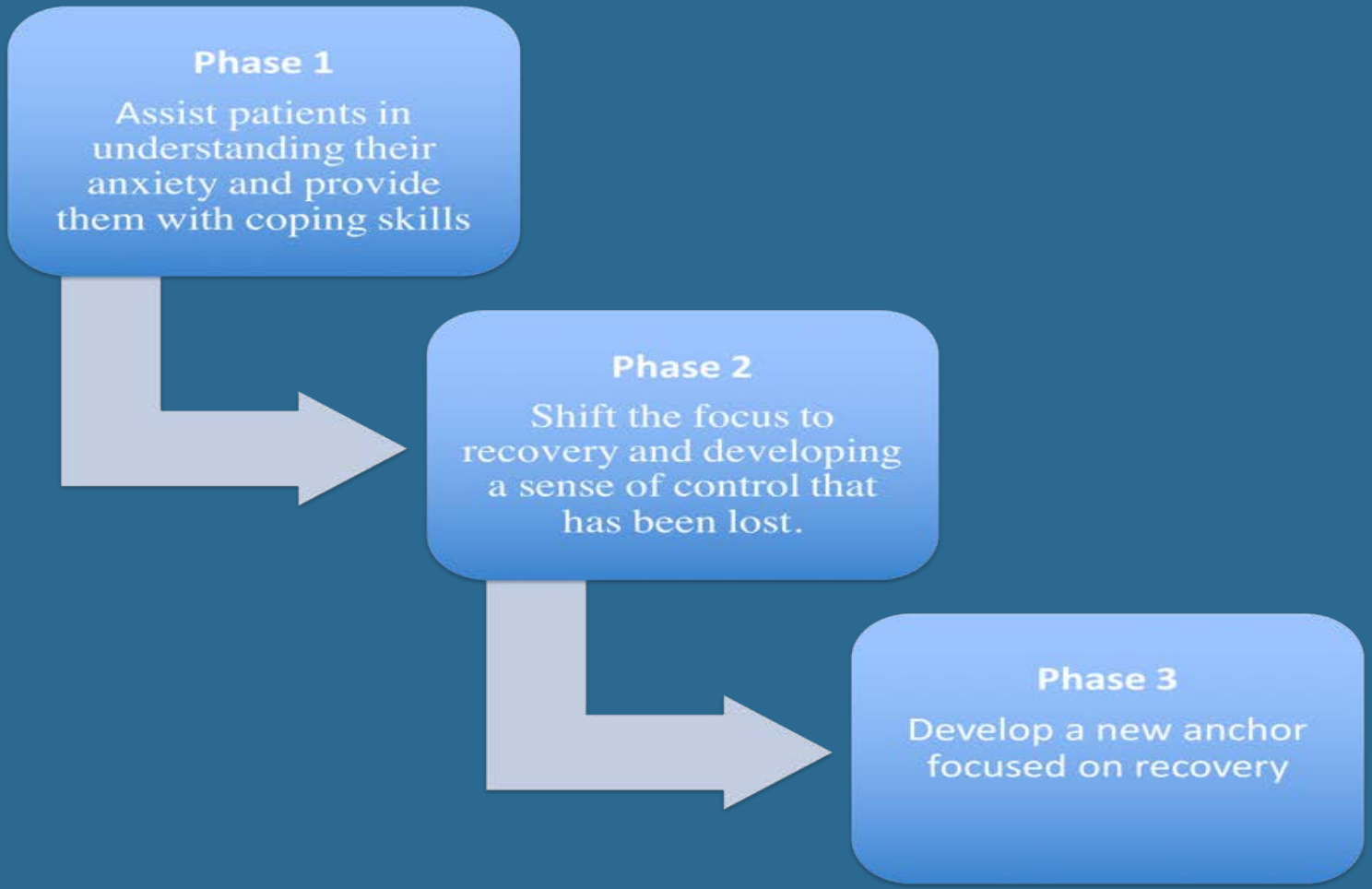
Control Anchors

PROBLEM: Cognitive Distortions become “anchored” and obstruct recovery progression

SOLUTION:

- Dislodge the anchors from distortions through cognitive behavioral intervention
  - Increase self-monitoring
  - Identify cognitive distortions
  - Restructuring “reality-testing”
  - Re-enforce coping skills

CONTROL ANCHOR INTERVENTION



In Conclusion

- Pre-injury stressors and anxiety (or the Concussion Gateway) can impact recovery outcome and erode recovery resilience.
- “Anchored” negative and automatic thoughts can obstruct recovery.
- Empathetic, patient-centered, reality testing and re-framing can be used to enhance coping skills then shift cognitive “anchors” away from injury and on recovery.