

Anderson – Franklin List of MTBI / PCD Symptoms

Based on “*Postconcussional Disorder: Common Result of Head Injury*” by Stephen D. Anderson, MD, FRCPC (Canadian Journal of Diagnosis, 1995) and *Auto Accident Survivor’s Guide for British Columbia* by Jill Franklin (Stone Mountain Books, 2005). With permission from the authors.

Physical symptoms:

Headaches & dizziness - most common symptoms; may continue for awhile; vertigo hard to treat
Vomiting, nausea, drowsiness – common early on; usually short-lived
Blurred or double vision - typical day after injury; usually short-lived
Tinnitus – may affect sleep
Reduced sense of smell or taste - danger: may not detect smoke or recognize spoiled food
Insomnia, fatigue; lack of energy or stamina
Muscle weakness; tingling in limbs
Light-headedness
Sensitivity to light and sound
Seizures – no increase in likelihood when injury is mild

Cognitive symptoms: (Other people should be questioned about their observations)

Difficulty organizing and processing information
Short-term memory deficits - verbal and nonverbal
Difficulty concentrating, easily distracted, short attention span
Forgetting words, names, appointments, where things are, where one is going, what one reads or is told
Diminished ability to shift attention or scan material - gets lost in conversations or when reading
Difficulty initiating and planning goal-oriented activities
Impairment of abstract reasoning - may interpret things literally, missing true meanings
Uninhibited, impulsive or perseverative behaviour (remaining fixated on a thought or action)
Difficulty ordering or sequencing information and retrieving information from memory
Difficulty learning from experiences or integrating new information
Difficulty following directions or knowing when, where and how to ask for help
Slow processing information, resulting in slow reaction times and problems in psychomotor activities: talking, writing, performing mechanical tasks.
Confusion when presented with multiple pieces of information
Difficulty multi-tasking, confused by multiple demands on one’s attention

Behavioural issues:

Poor judgment and perception - may misinterpret others’ actions
Socially inappropriate behaviour and verbal communication
Unrealistic appraisal of oneself and one’s strengths and weaknesses
Communication issues: excessive talking, disordered thoughts and speech, word-finding problems
Over-sensitive to fatigue, lack of sleep, stress, drugs, alcohol - cognitive abilities overly affected
Unreliability or loss of automatic pilot (brain function handling over-learned tasks: driving, safety issues)

Emotional sequelae:

Personality changes: irritability, anger, impulsivity, inflexibility, mood swings, emotional outbursts
Emotional detachment, apathy; lack of awareness of impact on others, insensitivity to others
Low tolerance for frustration, increased dependency on others, more demanding of attention
Inability to put aside one’s desires for immediate gratification
Lack of foresight and insight
Depression, anxiety
Exaggeration of pre-injury psychological and behavioural problems

Dr Anderson’s article can be accessed on www.braininjurylaw.ca under Resources – Articles – Medical Articles. *Auto Accident Survivor’s Guide for British Columbia: Navigating the medical-legal-insurance system* is available in bookstores and online at www.autoaccidentsurvivorsguide.com.