U.S. Center for Disease Control, there are at least 2.5 million TBIs each year that result in emergency room visits or hospitalizations, with many more that are treated elsewhere. More than 4 percent of enlisted soldiers have been diagnosed with a TBI, and approximately 4 to 5 million Americans are living with longterm residual effects.

TBIs range in severity. Symptoms from a concussion, like my injury, may come on immediately or be delayed by several days. They include dizziness, nausea and headaches as well as sensory or motor changes – spots in your vision, ringing in your ears or weak

visible. Moreover, the brain is not a good judge of its own health. It often fails to realize how impaired it is. This is critical, because the brain is especially vulnerable while it recovers from an injury. A second trauma, even a relatively mild one, can sometimes result in catastrophic swelling and damage, a phenomenon called "second-impact syndrome." Proper diagnosis and rest are critical to avoid this additional damage, even if the patient feels able to return to normal activity.

Thankfully, many athletes and sports teams are starting to realize the importance of preventing brain injuries. We're seeing rule changes come forward in the NFL and elsewhere. Helmet technology is consistently under development. Concussion-prevention equipment is catching on in additional sports, such as soccer. Importantly, social norms are also shifting. We're questioning what level of risk is acceptable. Helmets are becoming standard for winter sports such as skiing and ice-skating. "Shaking off" or playing through an injury is no longer encouraged or celebrated. In addition, both athletes and training staff are realizing the importance of recognizing potential brain injury quickly and allowing the athletes time to recover.

Several groups are helping lead local effects combating brain injury. The DANA Alliance for Brain Initiatives has three members in Maine, and all of us have agreed to engage the public on these critical issues. Furthermore, I am on the board of directors of the Michael T. Goulet Traumatic Brain Injury and Epilepsy Foundation in Saco. The foun-

dation serves to raise awareness about brain and helmet safety and the effects of traumatic brain injury through a variety of programs. At many public events across southern Maine, the foundation gives away properly fitted "love your brain" helmets.

The University of New England, where I work, is also actively engaged with brain safety in our community. The Center for Excellence in the Neurosciences has a host of cuttingedge laboratories, tackling issues from the effects of stress on the developing brain to the development of novel treatments for chronic pain. Our innovative K-12 outreach program has reached tens of thousands of local students, helping them understand how their brains work and why they should keep them safe.

We are opening these activities up to the community on March 18 - 19 at the Maine Science Festival in Bangor and on April 8, for our third annual Brain and Health Fair on our Biddeford Campus.

Probably the hardest question I face

Traumatic brain injuries are surprisingly common. According to the