

Report: Better assessments needed to diagnose traumatic brain injury

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How well people recover after a TBI can be impacted by the way health workers label their injuries, according to a recent report.

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While traumatic brain injuries among athletes or celebrities often gain attention, most serious jolts to the head that occur each year do not make headlines. Whether people survive a TBI can be impacted by how health workers assess them, according to a February report.

According to the Centers for Disease Control and Prevention, more than 200,000 people experience TBIs annually in the U.S., leading to about 61,000 deaths. Clinicians often misunderstand the frequency and long-term effects of TBI, which can worsen health outcomes, a National Academies of Sciences, Engineering and Medicine committee said in February.

TBIs most commonly are associated with falls, firearms, motor vehicle crashes and assaults, according to CDC. In children, a TBI can impair brain development. Seniors and men are more likely to be hospitalized and die from TBIs.

“Traumatic brain injury has resulted in preventable deaths, societal costs and lost human potential,” Victor Dzau, MD, president of the National Academy of Medicine, said in a news release.

Instead of the current TBI severity labels of “mild, moderate and severe,” the report suggested that clinicians should shift to a score-based assessment. Brain imaging and blood tests would be incorporated into the score to make diagnoses less bias.

“Patients with mild TBI often receive no follow-up care based on the assumption that spontaneous full recovery will occur, despite the growing realization that a subset of these patients experience persistent symptoms and impairments,” the report said.

Corinne Peek-Asa, PhD, MPH, vice chancellor for research at the University of California-San Diego and member of the committee, told *The Nation’s Health* that TBI treatment and care lags behind other health issues with similar burdens because the U.S. has not invested enough in research. She said that a new approach to care that focuses on social determinants of health should be integrated.

“We all have to recognize that the way someone recovers from a TBI is impacted by their medical care but also by their family, workplace and access to care,” Peek-Asa said.

Peek-Asa noted that the U.S. does not have a single federal agency that focuses on TBI care. The committee recommended that the National Institutes of Health sponsor a TBI Classification Workgroup, and that the U.S. secretary of health and human services establish a TBI task force.

“We really need to have an interagency response that prioritizes TBI and brings many federal agencies together to help set the agenda for the future,” Peek-Asa said.

For more information on “Traumatic Brain Injury: A Roadmap for Accelerating Progress,” visit www.nationalacademies.org.

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