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Predictors of Outcome in Patients with Severe Traumatic Brain Injury

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Abstract:

Severe traumatic brain injury (TBI) is related to a high mortality and morbidity rate and is one amongst the leading causes of death within the medical care units. The aim of this study was to look at predictors of hospital outcome in adult patients admitted to ICU attributable to severe TBI. Methods: A retrospective study was carried on patients (n=621) with severe head injury, outlined as port Coma Scale (GCS) \leq eight World Health Organization were admitted to the final ICU over a 15-year amount (1999-2013). most significant variables that might be correlate with outcome (demographics, explanation for injury, GCS, clinical variables and computed tomography-CT scan) were analysed. Results: Total death rate was twenty seven.38%. Patients older than seventy five years had a death rate of fifty seven.14%. 70.05% of the patients were male and sixty one.99% of cases were thanks to traffic accidents. coexistent injuries, found in fifty two.98% of the patients aggravated the prognosis. Shock developed in seventeen.23% of the patients and drive in twenty seven.38% were particularly exacerbating factors. Outcome is extremely correlate with GCS' values. CT scan findings unconcealed that patients with acute epidural hematomas recorded a death rate of V-day whereas those with meninges hematomas forty three.75%. The six-month overall smart outcome, supported port Outcome Scale (GOS) was thirty seven.03%. Conclusions: Severe TBI encompasses a high mortality and morbidity in Greek society because it encompasses a high negative impact on adolescents, particularly men. The age of the patient, GCS at admission and also the CT scanning square measure important predictors of outcome (p \leq zero.05). a big proportion of patients were still dependent for care at six-month post-injury assessment.

Severe TBI may be a common explanation for medical specialty incapacity and death. About 1.5 million individuals die worldwide thanks to TBI. It additionally Transportation-related accidents were the leading explanation for TBI principally within the younger ages, followed by injurious falls (23.99%), a lot of pronounced within the older population, that painted twenty four.8% of all patients of our study. Positive alcoholemy was found in eight.05% of the patients ensuing in the main in injurious falls. shows the distribution of injuries by gender, age and cause yet because the death rate within the completely different classes.remains a number one explanation for death and incapacity worldwide, which might have an effect on the standard of living activities and presents high risk of admission to hospital and/or ensuant death.studies are distributed therefore on investigate variables, that might predict outcome in TBI (demographics, explanation for injury, GCS, clinical variables and CT findings) Presence of extracranial injuries is shown.

Most patients conferred injuries within the extremities and also the girdle gridle (34.30%), followed by injuries within the chest space (21.74%), head and face (20.93%). Only 6.76% of the patients recorded abdominal injuries. The GCS score was delineate in 1974 by poet and Jennett and was introduced to assess the degree of cognitive state in patients with traumatic brain injury . proof shows that GCS may be a sturdy predictor of outcome. it's going to but be littered with sedation, dysfunction or intoxication with alcohol and littered with presence of facial swelling. In our study, classification of head injuries in keeping with admission GCS score and pupil reaction

Keywords: Traumatic brain injury; port Coma Scale; Clinical predictors; CT scan; ICU

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