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Number 1
September 2001

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ABSTRACTS**Unintentional traumatic brain injury in children: The lived experience**

By Judy Chisholm and Beth Bruce

Brain injury is a major cause of injury death and long-term neurological impairment in children often requiring long-term support. Despite the significance and frequency of such injuries, very little is known about the circumstances of these injuries, the long-term outcomes and family support needs. In this pilot study of 10 families of children with traumatic brain injury, participants described a variety of factors which contributed to their child's injury (inattentiveness, unfamiliarity, developmental level, lack of protective gear, invulnerability, peer pressure, environmental hazards and lack of supervision). As a result of their child's injury, family members described fundamental shifts in how they view life and that the roles and responsibilities of family members changed drastically. Study families experienced sustained uncertainty and described the impact on family relationships. While social support was clearly a mediating factor, families described the need for ongoing support and services to help them adapt to new roles, cope with new challenges, and manage sequelae such as post-traumatic headaches, epilepsy, learning difficulties and behavioural problems. The study findings represent an initial attempt to develop knowledge upon which focussed injury prevention interventions can be developed. Furthermore, this information will assist in the determination of appropriate health, rehabilitative, and educational support services for children with brain injuries. Involving families in this way will enhance the implementation of practical and useful support services for families of children with brain injuries.

Review article: Altered states of consciousness, theories of recovery, and assessment following a severe traumatic brain injury

By Diane Duff

The causes and consequences of severe traumatic brain injury are reviewed, including mechanical injury and neurochemical changes following focal and diffuse injuries. A discussion of terminology seeks to clarify current nomenclature and descriptions of behaviours during emergence from coma. Theories of recovery following severe brain injury are reviewed including diaschisis, plasticity and compensation, redundancy, environmental regulation, and excess disability. Several assessment tools that have been recommended for use with this population of individuals in an altered state of consciousness following coma are discussed and critiqued. They include the Glasgow Coma Scale, Ranchos Los Amigos Levels of Cognitive Functioning Assessment Scale, Western Neuro Sensory Stimulation Profile, Coma Near Coma Scale, Freeman Questionnaire, and the Sensory Modality Assessment Rehabilitation Technique.