

Target Area: Anxiety, Depression, Stress & Adjustment / Fatigue & Low work tolerance // Cognitive Deficits

<p>Mittenberg, Triemont, Zielinski, Fichera & Rayls (1996). <i>Cognitive-Behavioural Prevention of Postconcussion Syndrome</i>. Archives of Clinical Neuropsychology 11(2): 139-145</p>	<p>PEDro score - 5/10</p>
<p>Method/Results</p> <p>Design: Y Studytype: RCT. Y Population: Patients who suffered a mild head injury, with no significant extracranial injuries. Y Groups: 1. CBT group (n=29, 72% male, M=43±7.5 years). 2. Control group (n=29, 66% male, M=49±21 years). Y Setting: Inpatient (just prior to discharge).</p> <p>Primary outcome measure/s: Y PCS symptom checklist.</p> <p>Secondary outcome measure/s: Y None.</p> <p>Result: Patients undergoing CBT reported significantly shorter symptom duration and fewer symptoms at 6 months. Significant remission of headaches, fatigue, memory difficulty, concentration impairments and visual disturbances were found in the CBT group, but not in the control group.</p>	<p>Rehabilitation Program</p> <p>Aim: To reduce post concussive symptoms, including anxiety, depression, fatigue, memory and attention/concentration problems following mild TBI.</p> <p>Materials: Printed 10 page manual.</p> <p>Treatment plan Y Duration: 1 session face-to-face (1hr duration). Y Procedure: 1 session. Y Content:</p> <ul style="list-style-type: none"> - <i>CBT group:</i> patients received a manual and met with a therapist to review expected symptoms, discuss current symptoms, the CBT model, go through techniques for reducing symptom, and instructions for the gradual resumption of pre-injury activities. The patient was encouraged to review the manual as necessary. A 10 item quiz was given as a means of structured rehearsal. - <i>Control group:</i> routine hospital treatment and written discharge instructions were provided. Patients met with their regular nurse for review an discussion, and were told to contact their doctor if they experienced symptoms, and to have a period of rest.