

CARTA AO EDITOR

A comment on "Factors associated with long-term post-traumatic amnesia"

Viroj Wiwanitkit

Dear Editor,

I read the recent article entitled, "Factors associated with long-term post-traumatic amnesia" with great interest⁽¹⁾. Silvia & Sousa concluded that "The use of midazolam and phenytoin, and the severity of head injury, were identified as related factors for long-term amnesia⁽¹⁾." The findings are very interesting. However, some issues should be discussed. First, although this study consists of a statistically acceptable number of subjects, the heterogenicity of the subjects should be discussed. The subjects represent different age groups and socioeconomic backgrounds, which lead to differences in results. At a minimum, older patients are more likely to have neurological deficits in general. A recent report by Willemse-van Son, Ribbers, Verhagen & Stam (2007) concluded that "Older age, pre-injury unemployment, pre-injury substance abuse and more disability at rehabilitation discharge are important predictors of long-term disability⁽²⁾."

REFERÊNCIAS

- Silvia CF, Sousa RM. Fatores associados à amnésia pós-traumática de longa duração. Acta Paul Enferm. 2011; 24(2):232-8.
- 2. Willemse-van Son AH, Ribbers GM, Verhagen AP, Stam HJ. Prognostic factors of long-term functioning and productivity after traumatic brain injury: a systematic review of prospective cohort studies. Clin Rehabil. 2007;21(11):1024-37. Review.

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The authors respond to a comment on "Factors associated with longterm post-traumatic amnesia"

Silvia Cristina Fürbringer Silva¹, Regina Marcia Cardoso de Sousa²

Dear Editors,

We received the comments on our recently published article, "Factors associated with long-term post-traumatic amnesia", from Professor Viroj Wiwanitkit.

We appreciated your comments about our study and we think that they are important for research related to post-traumatic brain injury recovery. We would like to offer some explanations about the issues that were raised by Professor Wiwanitkit. The large number of independent variables in this study demanded an acceptable number of subjects with different characteristics to allow for association tests. The subjects greater than 60 years old were included in the sample to analyze the association between age and duration of post-traumatic amnesia. However, subjects with backgrounds of dementia and traumatic brain injury were excluded from this study to avoid the interference of pre-injury neurological deficits in the results. The core of our study was the duration of post-traumatic amnesia in the acute period following traumatic brain injury and the factors associated with this, rather than analyzing outcomes of traumatic brain injury. Therefore, our variables were different from those reported by Willemse-van Son, Ribbers, Verhagen & Stam (2007)⁽¹⁾.

We appreciate the opportunity to respond to the comments on our study.

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1. Willemse-van Son AH, Ribbers GM, Verhagen AP, Stam HJ. Prognostic factors a long-term funcioning and productivity after traumatic brain injury: a systematic riview perspectives cohart studies. Clin Rehabil. 2007; 21(11): 1024-37. Review

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