

PubMed

Search

Display Settings: Abstract



J Neurosurg. 1988 Sep;69(3):381-5.

Enhanced specificity of prognosis in severe head injury.

Choi SC. Narayan RK. Anderson RL. Ward JD.

Department of Biostatistics, Medical College of Virginia, Virginia Commonwealth University, Richmond.

Abstract

Data from 523 patients admitted to the Medical College of Virginia with severe head injury and known 6-month outcomes were analyzed in order to determine the optimal combination of early-available prognostic factors. Twenty-one prognostic indicators noted in the emergency room at admission were used to predict outcomes into four categories: good, moderately disabled, severely disabled, or vegetative/dead. A combination of the patient's age (in years), the best motor response (graded in the usual six-point scale), and pupillary response (in both eyes) was found to be the most accurate indicator. The model correctly predicted outcome into one of the four outcome categories in 78% of cases ("specifically accurate predictions"). If predictions into an outcome category adjacent to the actual outcome were accepted, this model was accurate in 90% of cases ("grossly accurate predictions"). A set of three simple graphs based on this model can be used for rapid early estimation of probable outcome in a severely head-injured patient at admission.

PMID: 3404236 [PubMed - indexed for MEDLINE]

Publication Types, MeSH Terms, Grant Support

LinkOut - more resources