

RESULTS OF TREATMENT OF CHILDREN WITH LONG-TERM VIOLATION OF CONSCIOUSNESS.

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Introduction. Currently, the number of papers devoted to the results of the treatment of patients in a vegetative state (VS) and a state of minimal consciousness (SMC) of childhood (under 18 years) is small. Long-term results of VS outcome in patients aged 0 to 25 years have been published in several large studies. Outcomes are mainly considered in the period from 2-5 years from the moment of brain damage, only in two studies — in a period of more than 5 years. The most representative samples of patients in VS and SMC aged 0 to 25 years are presented in the proceedings groups of rehabilitologist's working in a large rehabilitation center for patients with long-term impairment of consciousness. The authors analyzed the results of work with patients who were admitted to the rehabilitation center in the period from 2020 to 2023.

Keywords: impaired consciousness, rehabilitation, childhood, hypoxia, traumatic brain injury.

РЕЗУЛЬТАТЫ ЛЕЧЕНИЯ ДЕТЕЙ С ДЛИТЕЛЬНОМ НАРУШЕНИЕМ СОЗНАНИЯ.

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Введение. В настоящее время количество работ, посвященных результатам лечения пациентов в вегетативном состоянии (ВС) и состоянии минимального сознания (СМС) детского возраста (до 18 лет) немного. Отдаленные результаты исхода ВС у пациентов от 0 до 25 лет опубликованы в нескольких крупных исследованиях. Преимущественно рассматриваются исходы в период от 2–5 лет от момента повреждения мозга, только в двух исследованиях в период более 5 лет. Наиболее показательные выборки пациентов в ВС и СМС в возрасте от 0 до 25 лет представлены в трудах группы реабилитологов, работающих в крупном реабилитационном центре для больных с длительным нарушением сознания. Авторы проанализировали результаты работы с пациентами, которые поступали в реабилитационный центр в период с 2020 по 2023 гг.

Ключевые слова: нарушение сознания, реабилитация, детский возраст, гипоксия, черепно-мозговая травма.

Materials and methods. In the intensive care unit from 2010 to 2020, 33 patients aged from 1 g to 18 years with long-term impairment of consciousness were treated. Upon admission to the institute, 31 patients were in the SUN, two patients in SMS. The average age of 99 NEUROREHABILITATION - 2022 was 8.5 years. The etiology of long—term impaired consciousness in these patients was as follows: 12 patients with a consequence of TBI, 14 patients suffered various variants of hypoxic brain damage, 3 - cerebrosubarachnoid hemorrhage, 3 — meningoencephalitis, 1

patient — ischemic stroke. The outcome of treatment and rehabilitation is estimated after 12 months and is presented in the table. The neurological status was assessed at least 5 times during hospitalization using the "Coma Recovery Scale (CRS)" (Coma Recovery Scale).

Evaluation of the outcomes of VS in pediatric patients 12 months after various variants of brain damage

Patients (n=33)	SMC minus	SMC plus	The level of consciousness exceeds SMC	Chronicles some VS
TBI (n=12)	2 (6%)	2 (6%)	4 (12%)	6 (18%)
Hypoxia (n=14)	2 (6%)	2 (6%)	0	10 (30%)
Another option is nontraumatic etiology (n=7)	0	2 (6%)	0	5 (15%)

Conclusion. Outcomes in patients with long—term impairment of consciousness in the age group up to 18 years are comparable with the results of older patients - in our group of patients, we did not find better outcome indicators compared to the older age group. For a more detailed assessment of the neurological status and the detection of early signs of consciousness, it is recommended to evaluate the neurological status of the patient in VS and SMC using the "Coma Recovery Scale (CRS)" scale (Coma Recovery Scale). The conducted studies have shown that this scale, in comparison with with other scales, it allows you to identify signs of consciousness as accurately as possible and make a differential diagnosis between VS and SMC. According to the results of our work, the CRS assessment should be carried out at least 5 times

during the period of hospitalization of the patient, which will provide more reliable results in assessing the neurological status.

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