

# Complicated versus Uncomplicated Mild Traumatic Brain Injury: A Scoping Review

Figure 3. Time between

Iniury & Last Follow-Up



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## BACKGROUND

Mild Traumatic Brain Injury (mTBI) is heterogenous in nature; many factors influence symptoms and recovery. The presence of brain-imaging abnormalities (complicated mTBI i.e. cmTBI) may affect outcome<sup>1</sup>. Research in this area yields conflicting results and has not been comprehensively reviewed<sup>2,3</sup>.

## OBJECTIVE

To identify trends and gaps in the literature examining the differences in outcome between patients suffering from complicated versus uncomplicated mTBI.

## METHODS

- Medline, PsycInfo, Embase, and Cochrane Central were searched using the keywords "complicated" "uncomplicated" "mTBI", and other synonyms.
- The articles identified were screened against the study inclusion and exclusion criteria
- Data was extracted from the included articles and summarized

#### Figure 1. PRISMA Flow Diagram



**EXCLUSION CRITERIA:** 

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 Any human participants with an mTBI/concussion clearly defined as complicated or uncomplicated based on imaging mTBI defined as one of: GCS 13-15, LOC -3omin, PTA -24 Studies that defined cmTBI as having trauma-induced lesions Studies that compared outcome following cmTBI vs u-cmTBI

# RESULTS





## Figure 4. Types of Outcome Measures (N = 28)



- 28 studies met our inclusion criteria, of which >80% were published in 2010 onwards
- 50% of the studies assessed outcome between 0 and 1 month, while only 17.9% assessed outcome at >6 months
- Neuropsychological Assessment was the most common type of outcome measure
- >50% of the studies were on populations from North America

## **RESULTS cont'd**

#### Table 1. Study Characteristics (N = 28)

#### Table 2. Study Results

	Significant Differences in Outcome Between Complicated and Uncomplicated			
Variable	Yes	No	Some	Total N
Length of Follow-Up				
0-1 months	2 (8.7%)	13 (56.5%)	8 (34.8%)	23
1-6 months	2 (13.3%)	5 (33.3%)	8 (53.3%)	15
>6 months	0 (0%)	8 (80%)	2 (20%)	10
Study Design				
Cross-sectional	3 (8.8%)	18 (52.9%)	13 (38.2%)	34
Longitudinal	1 (7.1%)	8 (57.1%)	5 (35.7%)	14
Outcome Measure				
Clinical Signs	0 (0%)	0 (0%)	2 (100%)	2
Functional	2 (20%)	5 (50%)	3 (30%)	10
Imaging	0 (0%)	2 (66.7%)	1 (33.3%)	3
Neuropsychological	0 (0%)	11 (55%)	9 (45%)	20
Symptoms	2 (15.4%)	8 (61.5%)	3 (23.1%)	13
TOTAL Outcomes	4 (8.3%)	26 (54.2%)	17 (35.4%)	48

Table 2. Differences in outcomes between complicated and uncomplicated mTBI groups. Of the 28 papers, many assessed more than one outcome measure, resulting in a total of 48 possible results.

## **DISCUSSION AND CONCLUSION**

- Our preliminary findings emphasize the mixed nature of the literature on outcome after cmTBI vs u-cmTBI
- We intend to further analyze the data with respect to trends in the study results
- The same process will be followed to potentially identify additional eligible studies through a backwards citation search

#### Studies with participants with a brain injury more severe than mTBI that hasn't been distinguished from the mTBI groups Studies with participants that have not undergone imaging Studies with mTBI participants that had imaging but were not classified as having either cmTBI or uscmTBI

#### REFERENCES

1. Williams DH et al. (1990). Mild head injury classification. Neurosurg, 27(3), 422-8.

2. Voormolen DC, et al. (2019). Post-Concussion Symptoms in Complicated vs. Uncomplicated Mild Traumatic Brain Injury Patients at Three and Six Months Post-Injury: Results from the CENTER-TBI Study. J Clin Med, 8(11), 1921.

3. Julien J, et al. (2017). Highlighting the differences in post-traumatic symptoms between patients with complicated and uncomplicated mild traumatic brain injury and injured controls. Brain Inj., 31(13-14):1846-1855.