The New CAT Definition: Brain Injury in Children

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What is a Child?







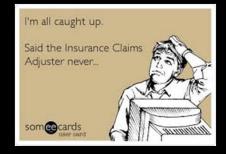
What Are Key Times?

- 1) Hospitalization
- 2) One Month
- 3) Six Months
- 4) Nine Months
- 5) Two Years

Who Will Ensure CAT Considered at Each Interval?









Criterion #1: Hospitalization and Imaging

Criterion No. 1: Hospitalization and Imaging

 "accepted for admission, on an in-patient basis, to a public hospital named in a Guideline with positive findings on CT, MRI or any other medically recognized brain diagnostic technology indicating intracranial pathology that is a result of the accident, including, but not limited to intracranial contusions or hemmorrhages, diffuse axonal injury, cerebral edema, midline shift or pneumocephaly."

Criterion No. 1: Hospitalization and Imaging

- Three essential elements:
 - 1) In-patient admission to public hospital;
 - 2) Positive findings of intracranial pathology;
 - 3) Findings must be from medically recognized brain diagnostic technique.

Criterion #2: Admission to Pediatric Rehabilitation Facility

 "accepted for admission, on an in-patient basis, to a program of neurological rehabilitation facility that is a member of the Ontario Association of Children's Rehabilitation Services."

• What is OACRS?





































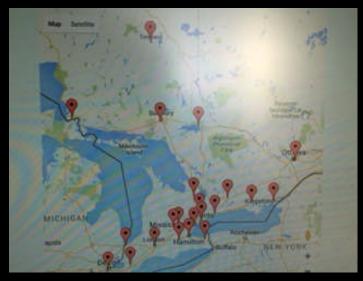






5 Concerns:

1.Discrimination re: remote areas



Cont. 5 Concerns:

- 2.Wait lists
- 3. Community-based rehab
- 4. In-patient admission requirements
- 5. "Program of neurological rehabilitation"

Criterion #3: Kings Outcome Scale (1 to 5 months)

- Kings Outcome Scale for Childhood Head Injury ("KOSCHI").
- Studies have found KOSCHI to be of limited use in predicting long-term outcome.
- No guidance on who will do assessments.

- KOSHCI rates impairment on following scale:
 - 1) Death
 - 2) Vegetative
 - 3) Severe Disability
 - 4) Moderate Disability
 - 5) Good Recovery

 A child with a brain injury will be catastrophically impaired if, one month or more after the accident "his or her level of neurological function does not exceed category 2 (vegetative) on the Kings Outcome Scale for Childhood Head Injury ("KOSCHI")."

- Vegetative:
- "The child is breathing spontaneously and may have sleep/wake cycles. He may have non-purposeful or reflex movements of limbs or eyes. There is no evidence of ability to communicate verbally or non-verbally or to respond to commands"

Severe disability:

"The child is at least intermittently able to move part of the body/eyes to command or make purposeful spontaneous movements, for example, confused child pulling at nasogastric tube, lashing out at carers, rolling over in bed. May be fully conscious and able to communicate but not yet able to carry out any self care activities such as feeding.

- Very, very few children will be vegetative
 1-5 month after injury.
- Study of 218 significant TBI's not one was found to be vegetative at time of discharge or follow up.

Criterion #4: Kings Outcome Scale (6 or more months)

• 6 months +

"level of neurological function does not exceed category 3 (Severe Disability) on the KOSCHI."

Severe disability (A & B) = CAT

• B:

Implies a continuing high level of dependence, but the child can assist in daily activities, for example, can feed self or walk with assistance or help to place items of clothing. Such a child is fully conscious but may still have a degree of post-traumatic amnesia.

Moderate Disability (A & B) not CAT

• A:

The child is mostly independent but needs a degree of supervision/actual help for physical or behavioural problems. Such a child has overt problems; for example, 12 year old with moderate hemiplegia and dyspraxia insecure on stairs on needs help with dressing.

- "High level of dependence" vs. "degree of supervision"
- Clinical judgement
- Pre-morbid problems
- Gaps in funding & ↓ limits
- Likelihood of meeting test

Criterion #5: Level of Function After 9 Months

Criterion No. 5: Post 9 Months

 "Nine months or more after the accident, the insured person's level of function remains seriously impaired such that the insured person is not age appropriately independent and requires in-person supervision or assistance for physical, cognitive or behavioural impairments for the majority of the insured person's waking day."

Criterion No. 5: Post 9 Months

- Government-made test
- Areas of ambiguity & debate:
 - What constitutes "age appropriately independent"? Who determines?
 - What constitutes "in-person supervision or assistance"
 - What constitutes the "waking day"?

Criterion No. 5: Post 9 Months

- Disagreements =
- 1) delays
- 2) gaps in funding
- 3) increased costs to all

Concluding Thoughts

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- Advocacy starts from day 1
- Team needs a "game plan" for point-in-time assessments
- WPI is still available [s. 3.1(6)]
- Multiple disputes over multiple times
- Ambiguities to be resolved in favour of child

Thank you

Questions?

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