



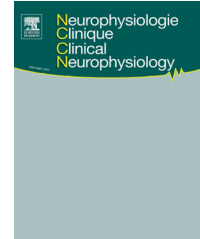
ELSEVIER

Disponible en ligne sur

ScienceDirect
www.sciencedirect.com

Elsevier Masson France

EM|consulte
www.em-consulte.com/en



COMPREHENSIVE REVIEW

Recommendations for the use of electroencephalography and evoked potentials in comatose patients

Nathalie André-Obadia^{a,b,*}, Julie Zyss^c, Martine Gavaret^{d,e},
Jean-Pascal Lefaucheur^{f,g}, Eric Azabou^{h,i},
Sébastien Boulogne^a, Jean-Michel Guérit^j, Aileen McGonigal^{k,l},
Philippe Merle^m, Véronique Mutschlerⁿ, Lionel Naccache^{c,o},
Cécile Sabourdy^{p,q}, Agnès Trébuchon^{k,l}, Louise Tyvaert^{r,s},
Laurent Vercueil^{p,q}, Benjamin Rohaut^{c,t}, Arnaud Delval^{u,v,**}

^a Service de neurophysiologie et d'épileptologie, hôpital Neurologique P.-Wertheimer, hospices civils de Lyon (HCL), 59, boulevard Pinel, 69677 Bron cedex, France

^b Inserm U 1028, NeuroPain team, centre de recherche en neurosciences de Lyon (CRNL), université Lyon 1, 69677 Bron cedex, France

^c Service de neurophysiologie clinique, groupe hospitalier Pitié-Salpêtrière, Assistance publique–Hôpitaux de Paris (AP–HP), 47–83, boulevard de l'hôpital, 75013 Paris, France

^d Service de neurophysiologie clinique, centre hospitalier Sainte-Anne, 1, rue Cabanis, 75014 Paris, France

^e Inserm UMR 894, université Paris Descartes, 75014 Paris, France

^f Service de physiologie, explorations fonctionnelles, unité de neurophysiologie clinique, hôpital Henri Mondor, Assistance publique–Hôpitaux de Paris (AP–HP), 51, avenue du Maréchal-de-Latre-de-Tassigny, 94010 Créteil cedex, France

^g EA 4391, ENT team, faculté de médecine de Créteil, université Paris-Est Créteil, 94010 Créteil cedex, France

^h Services de physiologie, explorations fonctionnelles et réanimation médicale adulte, hôpital Raymond Poincaré, Assistance publique–Hôpitaux de Paris, 104, boulevard Raymond Poincaré, 92380 Garches, France

Received 15 March 2018; accepted 7 May 2018

* Co-corresponding author at: Service de neurophysiologie et d'épileptologie, hôpital Neurologique P.-Wertheimer, hospices civils de Lyon (HCL), 59, boulevard Pinel, 69677 Bron cedex, France.

** Corresponding author at: Service de neurophysiologie clinique, CHRU de Lille, rue Emile-Laine, 59037 Lille cedex, France.
E-mail addresses: nathalie.obadia-andre@chu-lyon.fr (N. André-Obadia), arnaud.delval@chru-lille.fr (A. Delval).

<https://doi.org/10.1016/j.neucli.2018.05.038>

0987-7053/© 2018 Elsevier Masson SAS. All rights reserved.

Please cite this article in press as: André-Obadia N, et al. Recommendations for the use of electroencephalography and evoked potentials in comatose patients. Neurophysiologie Clinique/Clinical Neurophysiology (2018), <https://doi.org/10.1016/j.neucli.2018.05.038>

ⁱ Inserm U 1173, Universités Paris-Saclay et Versailles Saint-Quentin, 92380 Garches, France

^j CHIREC, clinique Edith-Cavell, rue Edith-Cavell, 321180 Bruxelles, Belgium

^k Service de neurophysiologie clinique, hôpital de la Timone, Assistance publique–Hôpitaux de Marseille (AP–HM), 264, rue Saint-Pierre, 13005 Marseille cedex 05, France

^l Inserm UMR 1106, institut des neurosciences des systèmes (INS), Aix-Marseille université, 13005 Marseille cedex 05, France

^m Service d'explorations fonctionnelles du système nerveux, CHU Amiens Picardie, site sud, 80054 Amiens cedex 1, France

ⁿ Service de neurophysiologie du système nerveux central, hôpital Civil, Hôpitaux Universitaires de Strasbourg, 1, place de l'hôpital, BP 426, 67091 Strasbourg cedex, France

^o Inserm U 1127, PICNIC Lab, institut du cerveau et de la moelle épinière (ICM), Sorbonne université, 75013 Paris, France

^p Service d'explorations fonctionnelles du système nerveux, hôpital Michallon, site Nord, centre hospitalier universitaire Grenoble Alpes, 38700 La Tronche, France

^q Inserm U 1216, Grenoble institut des neurosciences (GIN), université Grenoble Alpes, 38700 La Tronche, France

^r Service de neurologie, hôpital central, centre hospitalier universitaire de Nancy, 29, avenue de Lattre de Tassigny, 54000 Nancy, France

^s Inserm UMR 7039, centre de recherche en automatique de Nancy (CRAN), université de Lorraine, 54000 Nancy, France

^t Neurocritical Care Unit, Department of Neurology, The Neurological Institute of New York, Columbia University, 710 West 168th Street, New York, 10032-3784 NY, USA

^u Service de neurophysiologie clinique, CHRU de Lille, 59037 Lille cedex, France

^v Université de Lille, Inserm U 1171, Troubles cognitifs dégénératifs et vasculaires, centre d'excellence des maladies neurodégénératives de Lille (LiCEND), 59000 Lille cedex, France

KEYWORDS

Brainstem auditory evoked potentials;
Cardiac arrest;
Coma prognosis;
Disorder of consciousness;
Event-related evoked potentials;
Intensive care unit;
Middle latency auditory evoked potentials;
Mismatch negativity;
Somatosensory evoked potentials;
Visual evoked potentials

Summary Predicting the outcome of a comatose or poorly responsive patient is a major issue for intensive care unit teams, in order to give the most accurate information to the family and to choose the best therapeutic option. However, determining the level of cortical activity in patients with disorders of consciousness is a real challenge. Reliable criteria are required to help clinicians in the decision-making process, especially in the acute phase of coma. In this paper, we propose recommendations for recording and interpreting electroencephalography and evoked potentials in comatose patients based on the literature and the clinical experience of a group of neurophysiologists trained in the management of comatose patients. We propose methodological guidelines and discuss prognostic value of each test as well as the limitations concerning recording and interpretation. Recommendations for the strategy and timing of neurophysiological assessments are also proposed according to various clinical situations.

© 2018 Elsevier Masson SAS. All rights reserved.

Introduction

Predicting the outcome of a comatose or poorly responsive patient is a major issue for intensive care unit (ICU) teams, in order to be able to provide families with accurate information and to help with choosing the best therapeutic option. Reliable criteria are required to help clinicians

in the decision-making process, especially in the acute phase of coma. French law (the Léonetti Act N° 2005-370 of April 22, 2005, concerning patients' rights and end of life care), states that "the acts of prevention, investigation or treatment must not be continued with unreasonable obstinacy, when they seem useless, disproportionate or to have no other effect than solely the artificial preservation

Download English Version:

<https://daneshyari.com/en/article/8690171>

Download Persian Version:

<https://daneshyari.com/article/8690171>

[Daneshyari.com](https://daneshyari.com)