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SEVERITY OF BRAIN INJURY- INFLUENCE ON TREATMENT OUTCOME IN TRAUMA PATIENTS

Vesna Novak^{1,2}, Aleksandar Kostić^{1,2}, Luka Berilažić², Predrag Milošević²

University of Niš, Faculty of Medicine, Niš, Serbia¹ Clinic of Neurosurgery, Clinical Centre Niš, Serbia²

Contact: Novak Vesna

Clinic of Neurosurgery, Clinical Centre Niš, Serbia

Ul. Bul Zorana Đinđića 48, Niš, Serbia

Email: v.novak@yahoo.com

Traffic accidents are the most common causes of severe traumas. Severe craniocerebral injury, isolated or in polytrauma patients, requires serious treatment of the injured, the outcome of which is uncertain.

The aim of the paper was to examine how difficult severe head injuries affect the outcome and recovery of polytrauma patients.

A retrospective study covered a three-year period of treatment of patients with isolated severe head injury and severe head injury in polytrauma patients. The research was performed at the Department of Neurosurgery, Clinical Center Niš, in the period from the beginning of 2011 until the end of 2013.

For the assessment of the severity of head injury, Glasgow Coma Score (GCS) was used. Injuries with GCS lower than eight were treated as severe injuries.

In the observed three-year period, at the Clinic of Neurosurgery, an approximately the same number of the injured patients with isolated severe head injury as well as polytrauma patients was recorded. Traffic traumatism was the most common cause (42.74%) of these injuries. There was no statistically significant difference among the groups that fully recovered which included polytrauma patients with severe head injury and patients with isolated severe head injury.

Isolated severe head injuries as well as polytrauma injuries are usually the result of traffic accidents. The severity of head injury is an important factor for further prognosis and recovery of the injured, and it directly affects the occurrence of diseases, leading often to the lethal outcome in polytrauma patients. *Acta Medica Medianae* 2016;55(3):27-31.

Key words: severe head injury, polytrauma, Glasgow Coma Score