

Minimally Conscious State Treatment

Currently, there is no treatment that has been proven to speed up or improve recovery from the vegetative or minimally conscious state. However, there is general agreement that the primary focus of medical care is to prevent or treat any factors that might hinder recovery (such as [hydrocephalus](#), a build-up of fluid on the brain, or the use of sedating drugs for other conditions), and to preserve bodily health (such as treating [infections](#) or stiffness of joints). Medical facilities and clinicians vary in the extent to which they try various treatments such as medications or sensory stimulation to promote recovery of consciousness. Because the amount of recovery from disorders of consciousness varies so greatly, it is difficult to judge the value of these and other treatments outside of research studies.

Initially, the person with severely impaired consciousness is most likely to be treated in an acute care hospital where the focus is primarily on saving his/her life and stabilizing him/her medically. Once that is achieved, the next focus is on recovery of function to whatever level is possible. Sometimes this happens in an acute [rehabilitation](#) hospital, which provides a high intensity program of rehabilitation services, including [physical therapy](#), occupational therapy, speech and language therapy, recreational therapy, neuropsychological services and medical services.

Some patients do not transition from the acute care hospital to an acute rehabilitation program. These people may go directly to a skilled nursing facility, a sub-acute rehabilitation program, a nursing home, or even home with family. Persons discharged from an acute rehabilitation program usually go to one of these places as well. Skilled nursing facilities, sub-acute rehabilitation programs, and nursing homes vary widely in the quantity and quality of medical management, nursing care, and rehabilitation therapy services they provide.

Many factors influence decisions about where a person with severe impairment of consciousness or other severe impairments may go after discharge from the acute care hospital or discharge from the acute rehabilitation program. Some of these factors are the person's medical condition, health insurance coverage and other benefits, the person's ability to tolerate rehabilitation therapies, the doctor's philosophy about where people should go to continue to recover after severe injuries, the family's ability to care for the person at home, the family's wishes, and practical matters such as that the distance the family has to travel to visit the person at the facility.

Preventive measures for problems due to immobilization.

Good [nutrition](#)

Possibly certain drugs

Long-term care

Like people in a [coma](#), people in a minimally conscious state require comprehensive care.

Providing good nutrition (nutritional support) is important. People are fed through a tube inserted

through the nose and into the stomach. Sometimes they are fed through a tube (called a percutaneous endoscopic gastrostomy tube, or PEG tube) inserted directly into the stomach through an incision in the abdomen. Drugs may also be given through this tube.

Many problems result from being unable to move, and measures to prevent them are essential (see Problems Due to Bed Rest). For example, the following can happen:

Pressures sores: Lying in one position can cut off the blood supply to some areas of the body, causing skin to break down and pressure sores to form. Caregivers must turn people very frequently.

Contractures: Lack of movement can also lead to permanent stiffening of muscles (contractures) causing joints to become permanently bent.

Blood clots: Lack of movement makes blood clots more likely to form in leg veins.

To prevent these problems, physical therapists gently move the person's joints in all directions (passive range-of-motion exercises). Therapists may splint joints in certain positions to help prevent contractures. People are also given drugs to prevent blood clots from developing.

If people are incontinent, care should be taken to keep the skin clean and dry. If the bladder is not functioning and urine is being retained, a tube (catheter) may be placed in the bladder to drain urine.

Very few people have improved after treatments such as zolpidem (a sleep aid) or [amantadine](#) (a drug used to treat viral infections). However, no treatment has been proven effective.

Cervical spinal cord stimulation

[Cervical spinal cord stimulation for Minimally Conscious State Treatment.](#)

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