

Traumatic Brain Injury guidelines

see [Severe Traumatic Brain Injury guidelines](#)

see [Pediatric traumatic brain injury guidelines](#).

Strong [evidence](#) in support of [guidelines](#) for [traumatic brain injury](#) (TBI) is lacking. Large-scale [observational](#) studies may offer a complementary source of evidence to [clinical trials](#) to improve the [care](#) and [outcome](#) for patients with [traumatic brain injury](#). They are, however, challenging to execute. In a [review](#), Maas et al. aimed to characterize opportunities and challenges of large-scale collaborative research in [neurotrauma](#). They use the setup and conduct of Collaborative European Neurotrauma Effectiveness Research in TBI ([CENTER-TBI](#)) as an illustrative example. They highlight the importance of building a [team](#) and of developing a network for younger researchers, thus investing toward the future. They involved [investigators](#) early in the design phase and recognized their efforts in a group contributor list on all [publications](#). They found, however, that translation to academic [credits](#) often failed, and suggest that the current system of academic credits be critically appraised. They found substantial variability in consent procedures for participant enrollment within and between countries. Overall, obtaining approvals typically required 4-6 months, with outliers up to 18 months. Research costs varied considerably across Europe and should be defined by the center. They substantially underestimated costs of data curation, and suggest that 15-20% of the budget be reserved for this purpose. Streamlining analyses and accommodating external research proposals demanded a structured approach. We implemented a systematic inventory of study plans and found this effective in maintaining oversight and in promoting collaboration between research groups. Ensuring good use of the data was a prominent feature in the review of external proposals. Multiple interactions occurred with industrial partners, mainly related to biomarkers and neuroimaging, and resulted in various formal collaborations, substantially extending the scope of CENTER-TBI. Overall, CENTER-TBI has been productive, with over 250 international peer-reviewed publications. We have ensured mechanisms to maintain the infrastructure and continued analyses. They see the potential for individual patient data meta-analyses in connection to other large-scale projects. Our collaboration with Transforming Research and Clinical Knowledge in TBI (TRACK-TBI) has taught us that although standardized data collection and coding according to common data elements can facilitate such meta-analyses, further [data harmonization](#) is required for meaningful results. Both CENTER-TBI and TRACK-TBI have demonstrated the complexity of the conduct of large-scale collaborative studies that produce high-quality science and new insights ¹⁾.

¹⁾

Maas AIR, Ercole A, De Keyser V, Menon DK, Steyerberg EW. Opportunities and Challenges in High-Quality Contemporary Data Collection in Traumatic Brain Injury: The CENTER-TBI Experience. *Neurocrit Care*. 2022 Mar 18. doi: 10.1007/s12028-022-01471-w. Epub ahead of print. PMID: 35303262.

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