



## Augmentation of Conventional Medicine for Post-concussion Syndrome with Cognitive Behavioral Therapy Accelerates Symptomatic Relief in Affected Individuals

Post-concussion syndrome (PCS) is a clinical term used to point out the complicated combination of physical, emotional, cognitive and behavioral signs and symptoms associated with Mild Traumatic Brain Injury (mTBI). This study was conducted to assess the improvement or debilitating effect of behavioral therapy in addition to the conventional treatment and to document these results for increasing the efficiency of treatment provided to such patients. This

psychological and medicinal therapies for post-concussion symptoms (PCS). These are the relative paucity of symptom specificity, the apparent extent to which subjective cognitive difficulties predominate around the globe, and the role of psychological (especially cognitive-behavioral) processes in the development and stabilizing as well as resolution of presenting symptoms [3,4]. Former researches guiding cognitive behavioral therapy (CBT) for near or absolute similar symptoms in other clinical groups were considered in connection to PCS, as well as some of the practical considerations and approval in

Effect of CBT on patients during initial stay in hospital.

	<b>Control Group n</b>		<b>Total n (%)</b>	<b>Intervention Group n</b>		<b>Total n (%)</b>
	<b>Male</b>	<b>Female</b>		<b>Male</b>	<b>Female</b>	
<b>None</b>	26	6	32%	8	6	14%
<b>Mild</b>	42	3	45%	48	13	61%
	16	1	17%	10	9	19%
	6	0	6%	4	2	6%


obvious and clinically detectable for those completing CBT sessions over a brief period of time than taking a longer course, but were not related in any sense to medico legal status, injury severity or length of time that had passed since injury. [16] All the patients in both groups were ensured to have received usual therapeutic and symptomatic

medicines as routine with no breaks or planned or unplanned drops. During the initial stay in the hospital that amounted to hours and a few sessions, majority of the patients (61%) experienced mild improvement in the symptoms of PCS with some of them (25%) even progressing into the significant scale. After the completion of sessions that

culminated in the assessment of effects at the end of follow-up of two weeks, significant improvement was noted as compared to the patients not given psychological solutions as well as the conventional medicine. A total of 85% of the patients in interventional group had significant reduction in the symptoms of PCS and substantial improvement in the quality of life. The results are supported by similar outcomes in the study that was conducted on military veterans who experienced distress and anxiety [17]. Early diagnosis and treatment of PCS and anxiety may significantly increase the levels of functioning of patients with TBI. Bornstein et al. Supported the positive relationship between neuropsychological distress and emotional disorders with CBT in patients with closed head injury. Further, Williams, Rapport reported that prognosis was positively related to social integration and negatively correlated with emotional disorders. Additional studies are required to elucidate and integrate these associations.

Before reaching the conclusion, we have to take into light, the limitations of this study to effectively assess the degree of impact it is going to have in the domains of mental health and treatment. Although there are documented disparities in provisioning access, continuation and quality of treatment as bias, it is somewhat tempting to infer solely from the presence of or absence of these disparities. To avoid overlooking the problem and any futile attempts at finding solutions, we must consider explanations along with bias in investigation. Socioeconomic status affects the amount of stress a patient has and his passage to healthcare facilities and effectiveness of the treatment being received. It appears that even after economic and financial barriers have been removed, there is still a considerable amount of limitation in the form of lack of adequate familiarity with mental illness concepts, likelihood for interpreting mental health problems in superstitious or other culturally defined terms, social stigma, and tolerant habits that emphasize self-reliance and family reliance instead of seeking professional psychiatric solutions.

## Conclusion

The current study concludes that CBT can improve quality of life as overall for adults with persistent PCS and potentially accelerate symptomatic relief for affected individuals when added with conventional medicine resulting in desirable treatment objective.

**Disclaimer:** None to declare.

**Conflict of Interest:** None to declare.

**Funding Disclosure:** None to declare.

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