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Prior brain injury linked to re-injury later in life

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Older adults with a history of traumatic brain injury with loss of consciousness have a 2.5- to almost four-fold higher risk of subsequent re-injury later in life, according to research published online Nov. 21 in the *Journal of Neurology, Neurosurgery & Psychiatry*.

(HealthDay)—Older adults with a history of traumatic brain injury (TBI) with loss of consciousness (LOC) have a 2.5- to almost four-fold higher risk of subsequent re-injury later in life, according to research published online Nov. 21 in the *Journal of Neurology, Neurosurgery & Psychiatry*.

Kristen Dams-O'Connor, Ph.D., of the Mount Sinai School of Medicine in New York City, and colleagues conducted a longitudinal, population-based, prospective cohort study enrolling 4,225 people aged 65 years and older who were dementia-free. The authors sought to determine whether there is a relationship between self-reported TBI with LOC and re-injury, dementia, and mortality later in life.

The researchers found that people who experienced a TBI with LOC before age 25 were 2.54-fold more likely to experience TBI with LOC during follow-up, while those injured after age 55 were 3.79-fold more likely. However, no association between TBI with LOC and dementia or Alzheimer's disease was noted. Although baseline history of TBI with LOC was not associated with mortality, people who experienced a recent TBI had a 2.12-fold higher risk of mortality.

"This suggests that the risk for negative long-term outcomes (e.g., dementia and premature mortality) may decrease with time since injury, such that individuals who survive to older adulthood and do not incur subsequent TBI may be at no greater risk for dementia or mortality than individuals who never sustained a TBI," the authors write. "Overall, the findings reported here underscore the need for effective strategies to prevent injury and re-injury in older adulthood."

One author is employed by the Group Health Research Institute, where the Adult Changes in Thought Study is being conducted.

More information: Abstract
Full Text (subscription or payment may be required)

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