Introduction.– Non-pharmacological approach is a major component of the treatment of behavioral disorders of brain injury but the scientific data remain low.

Method.– Review of the literature since 1980 supplied by the HAS and books of reference. Classification according to psychotherapeutic currents and not psychopharmacological approaches; allocation of a level of proof and writing guidelines of French experts according to the methodology of the HAS.

Results.– Four hundred and forty-one articles were listed, 81 selected and classified according to 5 types of care: behavioral cognitive (26), holistic (19), systemic (14), psychoanalytic (10), physical mediation (6). Finally, 12 studies are of level 2, 46 are of level 4 and 9 were review of literature. Thirty-four guidelines were redacted indicating the importance of a non-pharmacological approach in first intention through 4 approaches systematically: psychotherapeutic, environmental (families, teams), rehabilitation (motorc, cognitive...), activities (professional, non-professional).

Discussion/conclusion.– These precise, directly guidelines applicable by every professional or any body in charge of traumatized cranial have to diffused and implemented waiting for an evaluation according to field experiences and advances of the literature.

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TR01-004-e French guideline for the management of behavioral disorders in traumatic brain injury: Medications


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Further reading


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TR01-005-e French guidelines for neurobehavioral disorders in traumatic brain injury: Treatment strategies and follow-up

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Keywords: Traumatic brain injury; Neurobehavioral disorders; Recommendation for good practice; Guidelines; Follow-up; Therapeutic strategies

Following the guidelines elaborated by SOFMER for traumatic brain injured patients with behavioral disorders, specific recommendations have been proposed in order to define strategic therapeutic options and follow-up.

Methods.– Systematic and critical review of the literature and expert opinion.

Results.– Management strategies concerned agitation in the awakening phase, crisis in medico-social facilities or at home, behaviors with medico-legal consequences.

Conclusion.– Prevention of behavioral disorders should involve the treatment of pain, the therapeutic alliance as well as a personalized follow-up. Information of the patient, his/her family and his/her caregivers regarding the local organization and facilities involved in the management of traumatic brain injury is of great importance.

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Posters

P001-e Prevalence of history of traumatic brain injury in prison population: A Review

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Keywords: Traumatic brain injury; Prison; Prisoner

Introduction.– In Europe, there is a lack of data on the prevalence of traumatic brain injury (TBI). Some consequences of TBI are cognitive and social impairments and the relation between criminality and history of TBI is discussed quite often.

Objective.– The objective of this review is to present an updated of possible relations between criminality and history of TBI.