A report on the process for developing Clinical Practice guidelines for the physical management of people with a Disorder of Consciousness (DOC)

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Background
Advances in first response protocols have led to an increased survival following catastrophic brain injury and thus increased prevalence of those with a Disorder of Consciousness (DOC). The main role of physical rehabilitation management in this patient group is prevention of complications such as limb contracture and pressure ulcers. Currently, in the UK, there is no guidance available for the physical management and there is a need to support and standardise clinical practice.

Methods
A structured literature review was carried out on MEDLINE, CINAHL Plus and AMED databases in 2017. A multidisciplinary Guideline Development Group (GDG) of experts was convened and two consensus meetings with a nominal group process and final voting round organised to develop recommendations and a management and assessment algorithm.

Results
The literature review identified 10 papers and none of these were of a quality that could be used to inform practice. The multidisciplinary GDG (Rehabilitation Physician, Physiotherapists, Occupational Therapist, Nurse, Clinical Scientist, Biomedical Engineer) met twice with 24 and 33 experts to develop consensus guidelines. The final guideline consists of 19 recommendation statements and these were grouped into ‘acute management’, ‘rehabilitation input’ and ‘long-term care’ (3). Please refer to Poster ‘Mohammed Meeran et al (2019) A consensus process to agree best practice for managing physical wellbeing in people with a prolonged disorder of consciousness’ (6), ‘rehabilitation input’ (10) and ‘long-term care’ (3). Please refer to Poster ‘Mohammed Meeran et al (2019) A consensus process to agree best practice for managing physical wellbeing in people with a prolonged disorder of consciousness’ (6), ‘rehabilitation input’ (10) and ‘long-term care’ (3).

Changes implemented:
This guideline will provide a framework that physical management needs to be physically assessed and monitored and suggests treatments that can be provided as part of their physical management.

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References: