Neuroradiology 2017

2nd International Conference on

NEUROSCIENCE, NEUROIMAGING & INTERVENTIONAL RADIOLOGY

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Keynote Forum

Day 1

Raimund Firsching, OMICS J Radiol 2017, 6:6, (Suppl)
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Raimund Firsching

University Clinic for Neurosurgery, Germany

The cause of coma as identified with magnetic resonance imaging

Introduction: Diffuse axonal injuries have been considered the most severe form of brain injury, which causes coma. To the best of our knowledge there is no systematic study on magnetic resonance imaging (MRI) of the brain of patients in coma and acute signs of herniation.

Patients & Methods: A prospective series of 157 patients in posttraumatic coma for a minimum of 24 h was analyzed. Magnetic resonance imaging of brain lesions was obtained within 10 days – median 2 days – of the injury with a 1.5 tesla magnet. Statistical analysis including contingency tables, Fisher's exact test, cross tables and odd ratios to investigate the correlation of coma and eventually loss of pupil function and extension response with the locations of brain lesions on MRI and with outcome.

Results: 63% of all patients in coma exhibited a brain stem lesion. All patients emerging from coma later one week after the injury had a brain stem lesion. Duration of coma was highly statistically related with a brainstem lesion. Patients with either unilateral loss of pupil function or extension response were statistically significantly more likely to harbor MRI lesions of the brain stem when compared with patients in coma without further neurological deficits ($p=0.0004$ Fisher's test). The correlation of brainstem lesions with outcome according to the GOS after one year was highly significant ($p<0.0001$ Fisher's test).

Conclusion: Contrary to earlier concepts of diffuse axonal injury this is the first study giving evidence that brain stem lesions play a pivotal role after head injury. The predictive value of MRI is higher than that of any other investigation.

Biography

Raimund Firsching LRCP (LOND.) MRCS (ENGL.) was born Dec. 12th 1953 born in Bochum, West Germany. 1972 beginning studies at medical school of the University of Bonn, 1979, graduation from medical school Bonn, dissertation. 1980, conjoint exam in London, Queen Square, on the register of the General Medical Council, United Kingdom. 1981 beginning neurosurgical training at the University of Cologne, 1986 research fellow at the University of Texas, Health Science Center at San Antonio, Texas, USA, division of neurosurgery, chief: Dr. Story 1987 board certified neurosurgeon at the University of Cologne, Germany, 1988 habilitation for the field of neurosurgery, admitted to the Medical Faculty of the University of Cologne. 1992-1994 Vice chairman of the Department of Neurosurgery at the Ruhruniversitaet in Bochum. 1995 until now Neurosurgeon-in-Chief and Professor at the Universitaetsklinik fuer Neurochirurgie Magdeburg. 1997 until 2013 nominated honorary judge of the state professional court of Magdeburg, capital of the state of Saxony Anhalt, Germany. 2017 congress president of the Deutsche Gesellschaft fuer Neurochirurgie at the national convention of neurosurgery in Magdeburg Married to Dr. Ibsen-Firsching, a pediatrician, since 1981, 3 children.

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Laura Gaudet, OMICS J Radiol 2017, 6:6, (Suppl)
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Laura Gaudet

Chadron State College, USA

Undergraduate educational intervention on the understanding of persons with traumatic brain injury: Preliminary results 2017

This study looked at how students at Chadron State College self-reported their concerns on a variety of psychosocial instruments. The instruments specifically assessed their concerns and the concerns of others in the areas of temperament, personality traits, social perception, emotional intelligence, memory loss/difficulty, and intelligence. Students compared their self-perception of these traits to the concerns of persons with traumatic brain injury two times. This investigation asked students in an introductory psychology course, PSYC 131 – *Introduction to Psychology* (3 sections), as well as an advanced psychology class, PSYC 430-*Introduction to Behavioral Neuroscience* (2 sections) class to report the degree to which they have experienced concerns in each of the identified psychosocial areas (emotionality, personality/temperament, social perception/emotional intelligence, and memory/forgetting). Following the students' self-report and perceptions of others (TBI person), the students viewed a PowerPoint which described the psychosocial concerns of individuals who had sustained a Traumatic Brain Injury. After viewing the educational material, students again described their psychosocial concerns as well as the concerns of persons with brain injury for each of the six instruments. The study aided students in the identification of their own psychosocial concerns, as well as educated students about the problems faced by persons with Traumatic Brain Injury (TBI). Many college students will at some time, either sustain a brain injury or know someone who have been injured. Education on this important disability is essential for all students in psychology, as they come to know themselves and the world around them.

Biography

Laura Gaudet is a Professor of Counseling and Psychological Sciences at Chadron State College (CSC). She has been at CSC since 1998 and has served as the Chair of the Department of Counseling, Psychological Sciences and Social Work since 2003. She received her BS from the University of Texas-Austin (Regular Education K-6, Special Education K-12), MEd (School Counseling K-12) from Antioch University, post- MEd Certification (Mid-Management Administration and Principalship) from Texas State University, and her PhD (Educational Psychology) from the University of Northern Colorado.

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Yacov Rofé, OMICS J Radiol 2017, 6:6, (Suppl)
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Yacov Rofé

Bar-Ilan University in Ramat Gan, Israel

Psycho-bizarreness: The intuitive rational-choice theory of madness

The book, *The Intuitive Rational-Choice Theory: Schizophrenia, Criminal Inanity & Neuroses,* presents a new theory which explains the development and treatment of schizophrenia and criminal insanity as rational coping mechanisms. Based on the strong relationships between schizophrenia and neurological impairments, medical models took for granted that all cases of schizophrenia result from neurological impairments, even when there was no evidence, as in the case the Unabomber and John Nash. The new theory, termed also Psych-Bizarreness Theory, demonstrates that it can explain all cases of schizophrenia, regardless whether they suffer from neurological damages or not, as well as criminal insanity and neurotic disorders, by conscious-rational terms. According to the new theory, when individuals are confronted with extreme levels of stress, irrespective of whether the source of the stress is neurological or environmental, their behavioral options become limited: They can commit suicide, develop a drug abuse, use aggression to eliminate the stressor, or intuitively choose certain mad/bizarre behaviors diagnosed by five empirical criteria (Rofé, 2000, 2016), that suite their coping demands. Madness is seen primarily as a repressive coping mechanism, which individuals intuitively choose when confronted with unbearable levels of stress. Thus, contrary to psychoanalysis, madness causes repression rather than visa versa. The choice of a specific mad behavior is determined by the same three principles which guide the consumer's decision-making process when purchasing a certain product. The major principal is the need controllability: The specific mad behavior must increase the patient's ability to exercise control over the stressor and\or provide certain desired privileges. The second guiding principle is availability: The choice of the specific symptom is affected by various channels of information, such as the media, personal experiences, genetic predispositions, family and peers that increase the saliency of certain suitable behaviors. The third principle is cost-benefit analysis: The mad behavior is chosen only if the individual intuitively feels that it will reduce the level of his or her emotional distress. Although the decision to implement the intuitive/unconscious choice is conscious, patients become unaware of the Knowledge of Self-Involvement (KSI) through a variety of cognitive processes that disrupt the encoding of this knowledge and a number of memory inhibiting mechanisms that cause its forgetfulness. Subsequently, utilizing their socially internalized beliefs regarding the causes of psychological disorders, patients develop a self-deceptive belief which attributes the cause of their symptoms to factors beyond their conscious control. The new theory proved its ability to integrate all therapeutic methods pertaining to neurosis into one theoretical framework, explaining all data relevant to the development and treatment of conversion disorder, including neurological findings, which seemingly support the medical explanation of this disorder, and resolves the theoretical confusion regarding the explanation of phobia by distinguishing between bizarre (e.g., agoraphobia and chocolate phobia) and non-bizarre phobia, such as dog phobia. Robert Aumann, the Nobel Prize-winning economist, noted in a letter of recommendation to publishers of the present book (2017), Rofé's theory is as "revolutionary as it sounds, fits well into the frameworks of economics, game theory, and evolution".

Biography

Yacov Rofé is a Professor of Psychology and former Chair of the Interdisciplinary Department of Social Sciences at Bar-Ilan University in Ramat Gan, Israel. He taught for the Department of Psychology at Washington University in St. Louis, Missouri, and was a visiting Professor at Rutgers Medical School in New Jersey. He has published many articles in leading academic journals of Psychology, including a theory entitled “Stress and Affiliation: a Utility Theory”, published by Psychological Review in 1984. An additional influential article, published in Review of General Psychology, 2008, is a review that refutes the existence of repression and the Freudian Unconscious.

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Rafael Martins Ferreira, OMICS J Radiol 2017, 6:6, (Suppl)
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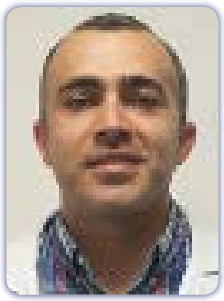

Rafael Martins Ferreira

Federal University of Santa Catarina, Brazil

The role of advanced MRI techniques in the diagnosis of brain infections

In addition to conventional MR imaging techniques, a variety of advanced techniques have found their place in clinical practice or are the subject of intense research. These advanced techniques offer more than the anatomic information provided by the conventional MR imaging sequences. They generate physiologic data and information on chemical composition. This talking provides an overview of the current state of neuroimaging in infectious brain diseases and discusses 4 types of physiology-based MR imaging methods, namely, diffusion-weighted imaging (DWI), proton MR spectroscopy, 3D-CISS and perfusion-weighted imaging in the setting of infections disorders. In summary, neurotuberculosis, neurocysticercosis, Chagas disease, Toxoplasmosis, atypical pyogenic infection, viral infections, fungal abscess and inflammatory conditions in the setting of HIV infection are discussed. The role of functional imaging in inflammatory lesions mimicking neoplastic lesions is also demonstrated. Nonconventional Magnetic resonance techniques may provide useful data in challenging cases of infectious disease. However, there may be MRI overlapping findings in some infectious disorders on DWI.

Biography

Rafael Martins Ferreira is currently a Professor at Universidade Federal de Santa Catarina in Florianopolis, Brazil. His neuroradiology training was done at Hospital Beneficencia Portuguesa (Sao Paulo, Brazil) and Massachusetts General Hospital (Boston, USA). He works at Diagnostico das Americas (DASA-Florianopolis unit) and is the Director of MF imagens in Biguacu, Brazil. He has 10 years of experience doing functional MRI in neuroradiology, publishing papers in reputed journals and serving as Editorial Board Member of repute.

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