# The SECONDs Index Score to assess consciousness fluctuations in acute patients with severe brain injury

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### Introduction

The *Simplified Evaluation of CONsciousness Disorders* (SECONDs) is a new **fast** and **easy-to-use** tool dedicated to the diagnosis of disorders of consciousness (DoC), which was previously validated based on its **total score** in chronic patients with severe brain injury (1,2).

We here aim to validate the SECONDs **index score**, a score out of 100 computed by summing the weighted scores associated to the 8 SECONDs items, to better **track fluctuations** of consciousness levels in **acute** patients with severe brain injury.

### Methods

A total of 25 DoC patients will be included in the intensive care units and assessed for 5 consecutive weeks. Weekly, Coma Recovery Scale-Revised (CRS-R) and SECONDs evaluations were performed on the same day. Another SECONDs assessment was performed after any healthcare-related intercurrent event (e.g., tracheotomy removal or infection) potentially impacting consciousness levels.

**Hypotheses testing** and **standardized response means** analyses comparing the differences in SECONDs index scores, SECONDs total scores and CRS-R total scores were used as complementary approaches to examine the index score's **sensitivity to change**.

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### Results

 Preliminary data: n = 15

 Patients
 Demographic information

 ID
 Age
 Gender Gender
 Etiology Etiology Since Since Onset

 P01
 64
 M
 Stroke
 9

 P03
 54
 M
 Stroke
 9

 P04
 72
 F
 Stroke
 9

 P05
 63
 M
 TBI
 12

 P06
 75
 M
 Anoxia
 24

 P07
 70
 M
 Anoxia
 25

 P08
 71
 F
 Stroke
 6

 P11
 49
 M
 Anoxia
 9

 P12
 67
 F
 Stroke
 15

 P13
 18
 F
 TBI
 25

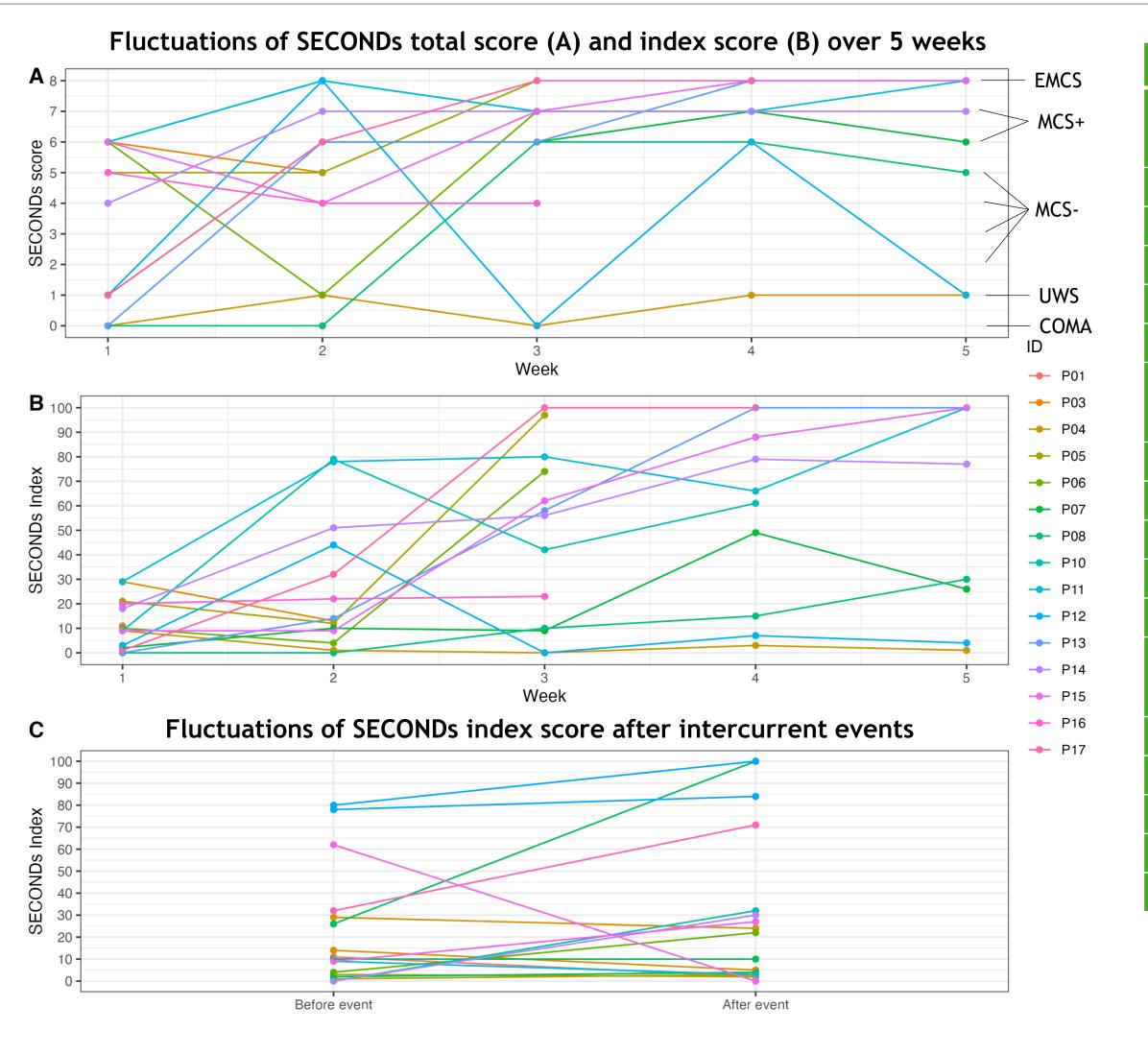
 P14
 56
 M
 Stroke
 16

 P15
 48
 F
 Stroke
 13

 P16
 48
 F
 Stroke
 11







Hypotheses testing						
<b>Hypothesis 1</b> : Moderate to very strong positive correlations between Δ						
SECONDs total score and $\Delta$ CRS-R total score						
Weeks	r	p				
2-1	0,867 (very strong)	<0,001*				
3-1	0,464 (moderate)	0,110				
4-1	0,557 (moderate)	0,094				
5-1	0,410 (moderate)	0,313				
<b>Hypothesis 2</b> : Moderate to very strong positive correlations between Δ						
SECONDs index score and $\Delta$ CRS-R total score						
Weeks	r	p				
2-1	0,216 (weak)	0,458				
3-1	0,330 (weak)	0,295				
4-1	<b>0,662 (strong)</b>	0,074				
5-1	<b>0,597 (strong)</b>	0,157				
Hypothesis 3: Moderate to very strong positive correlations between Δ						
SECONDs total score and $\Delta$ SECONDs index score						
Weeks	r	p				
2-1	0,561 (moderate)	0,037				
3-1	0,833 (very strong)	<0,001*				
4-1	0,042 (weak)	0,922				
5-1	0,094 (weak)	0,841				

→ Confirmation of 66% of hypotheses (75% have to be confirmed)

Standardized Response Means					
Weeks	2-1	3-1	4-1	5-1	
CRS-R total score	0,770	1,204	2,405	1,752	
SECONDs total score	0,463	0,893	1,477	1,248	
SECONDS index score	0,231	<u>1,368</u>	2,044	<u>1,387</u>	

→ Index score SRMs > total score SRMs for 3 of the 4 differences
 → Index score SRMs > CRS-R total score SRMs for 1 of the 4 differences

Despite the lack of statistical power related to the small sample size, we here highlight promising preliminary data on 15 patients.

The index score tends to show good sensitivity to patients' fluctuations of consciousness and responsiveness to the intercurrent events with either positive or negative impact.

## Conclusion

The SECONDs index score provides a refined measure of consciousness fluctuations in acute DoC patients. This study has important clinical implications as these patients are prone to rapid changes based on both spontaneous recovery and intercurrent events.



## **Conflicts of interest**

The authors have no potential conflict of interest to declare. This study is supported by the University and University Hospital of Liège, the Belgian National Funds for Scientific Research (FRS-FNRS) and the Fondation Léon Frédéricq.

#### References

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