Traumatic brain injury – medical expertise

Lectures

CO14-001-e
Lying in neuropsychology: The malingering concept
X. Seron
Université de Louvain, Bruxelles, Belgium

Keywords: Forensic assessment; Medico-legal
In forensic medicine, neuropsychological examinations are conducted to determine whether the patient presents a significant decrease of his/her cognitive abilities. The results of the examination will then be used to establish the extent of the financial, social or medical assistance to which the patient may be entitled. Neuropsychological assessment thus led to economic decisions and therefore donors insurances require that examination result in a credible appraisal of the cognitive deficits and of their consequences in the patient’s life. Neuropsychologists also have to exclude deficits due to some pre-existing conditions (dementia, learning disabilities, or psychiatric condition unrelated to the accident) and they have also to identify exaggeration or even invention of deficits (malingering). We will briefly present the different methods the neuropsychologist use to attain these objectives and we will underline that they have indeed developed powerful tools to identify patients presenting an exaggeration of their cognitive disorders. However, the question of intentionality included in the definition of malingering does not seem fully resolved especially as concern patients with associated psychiatric disorders. The difficulty to discriminate malingering from some particular somatoform or dissociative disorders will be underlined and discussed.

http://dx.doi.org/10.1016/j.rehab.2014.03.289

CO14-002-e
Medico-legal compensation: Differences across Europe
E. Guillermou
UNAFTC, Toulon, France

Keywords: Medico-legal compensation
According to the convention of the European Union, persons with disability have the right to live in the society with the same liberty of choice as healthy citizens. The European council stated, on March 14, 1975, that the objective of the compensation system is to replace the injured individual in a situation as close as possible to the situation that would exist if the accident did not occur. This presentation will focus on a comparison of the different medico-legal compensation systems across Europe.

http://dx.doi.org/10.1016/j.rehab.2014.03.290

Posters

P139-e
Attribution to abusive head trauma (AHT): Proposal of a checklist for use in medico-legal procedures
A. Laurent-vanniera a, C. Adamsbaum b, C. Rey-Salmon c
a Hôpitaux de Saint-Maurice, Saint-Maurice, France
b CHU de Bicêtre, Paris, France
c Unité médico judicaire, Hôtel Dieu, Paris, France

Keywords: Shaken Baby syndrome; Abused head trauma; Attribution; Diagnostic; Timing; Compensation

Introduction.– Because of its consequences in terms of mortality and disability, the attribution is a crucial medico-legal issue. The main questions are: “has this baby been shaken?”; “when?”; “was it a unique episode?”, “what will be the consequences?”

Objective.– To propose “step by step” guidelines in order to help professionals.

Method.– This checklist was derived from:
– our experience and an observational retrospective study conducted by two of us, as legal experts;
– the diagnostic criteria of shaking set by the HAS (French health authority) issued from an experts conference organised by the SOFMER

Results.– The checklist includes the crucial information which must be exhaustively listed, as the child’s status from birth; the occurrence of changes in behaviour; the compatibility of the history with both intracranial lesions and child’s age; the delay in seeking medical assistance. A radiological expert’s analysis is needed. The discussion must take into account the diagnostic criteria set by the HAS. The timing of the lesions must be discussed according to both clinical and radiological data.

Discussion/conclusion.– This checklist should actually help to standardize procedures and attributions to AHT. The second step will be to assess the application of such guidelines.

http://dx.doi.org/10.1016/j.rehab.2014.03.291