

(1) Music listening to decrease intensity of agitated behavior after severe acquired brain injury.

Agitated behavior involves varying levels of behavioral disturbance, characterized by inattention, disinhibition, emotional lability, impulsivity, motor restlessness and aggression and there is a need for development of interventions to facilitate rehabilitation. Studies suggest that music listening to *familiar predictable and stylistically simple* music can reduce agitation and enhance the participants' orientation. This case study describe the intensity in agitated behavior before during and after treatment with listening to preferred music categorized 'supportive music' in patients with severe cognitive disturbances following ABI at a sub-acute rehabilitation hospital.

External collaborators:

Slot K, Bonde LO, Hald SV.

(2) The effect of a modified treatment environment for agitated patients with traumatic brain injury (TBI): A controlled clinical multicentre study.

Agitation is a frequent condition in the recovery phase in patients with moderate or severe TBI impacting negatively on rehabilitation. Furthermore, hospitalization is extended and rehabilitation outcome is poorer. Therefore, this project aims to investigate whether a systematic intervention in the acute stage can improve sleep and thereby reduce the prevalence and intensity of agitated behaviour. The study is conducted at two neurointensive care units (NICUs) and two highly specialized rehabilitation hospitals. A quasi-experimental design with an intervention group (N=21) and a control group (N=21) is used. Inclusion criteria are patients' ≥ 18 with moderate or severe TBI, diagnosed by Glasgow Coma Scale Score ≤ 10 at the site of injury or within the first 48 hours of hospitalization. The intervention is a multimodal circadian rhythm concept including: dynamic lighting, systematic information, relaxation music, and individual shielding in multi-capacity rooms.

External collaborators:

Langhorn L, Egerod I, Poulsen I.

(3) Nutritional status among patients with acquired brain injury admitted for rehabilitation.

Most patients with severe brain injury experience weight loss, which may be associated with higher incidence of complications, decreased functional outcome, and prolonged length of hospitalization. This descriptive cohort study aims to describe the nutritional status from injury to admission and from admission to 4 weeks of stay at a rehabilitation hospital among patients with acquired moderate to severe brain damage and the influencing factors. Changes in nutritional status defined as differences from admission to four weeks stay. Primary: Weight / BMI development in relation to Bioelectrical Impedance Analysis estimated distribution between FM, FFM and BCM. Secondary: Biochemistry, muscle strength, distribution of body tissue between FM, FFM in relation to dietary intake.

External collaborators:

Rasmussen HH, Køhler M, Holst M.

(4) Rehabilitation following stroke in Denmark and Norway – a qualitative comparative study.

Rehabilitation after stroke basically follows the same guidelines but the organization of rehabilitation courses is more specialized in Denmark (DK) than in Norway (N) and distances as well as municipality sizes differ in the two countries. This study is part of a major study and aims to describe frameworks, competencies and opportunities in the municipalities in conducting rehabilitation following a stroke. The rehabilitation process to six persons with complex needs in DK and five in N was followed for approx. one year after the stroke using field observations of treatment situations, interviews with patients and with involved healthcare professionals. Interaction theory and content analysis has been used.

External collaborators:

Moe S, Arntsen C.

(5) Promoting psychosocial well-being following stroke. Experienced appropriateness and feasibility of the intervention in order to facilitate the individual process of recovery after stroke.

This study introduces a new intervention in primary health care to a group of patients, which needs that may otherwise be overlooked with severe consequences personally and societally in relation to family, network, job market. A psychosocial intervention offered (8 meetings) to stroke survivors after discharge from acute treatment has been developed and feasibility tested in a complex intervention study conducted by the Department of Nursing Science, Oslo University Norway. Details are elaborated in qualitative description of the appropriateness and feasibility of the intervention experienced by patients and professionals.

External collaborators:

Kitzmüller G, Mangset M, Evju AS, Angel S.

(5a) Promoting psychosocial well-being following stroke.

The present study explores a more cost effective intervention (4 meetings) during six months post discharge from acute stroke treatment in a Danish context in a randomised control trail. A qualitative description of the appropriateness and feasibility of the intervention experienced by patients and professionals are elaborated.

External collaborators:

Maribo T.