## **Physician Legal Consulting Services LLC**

Physicians Helping Attorneys Helping People www.drlcs.com 314-390-9410

# Newsletter

June 2023

#### This Month's Question:

Is there such a thing as "late-onset" Mild Traumatic Brain Injury (MTBI)?

#### **Physician Legal Consulting Services Answer:**

We just completed a head injury case that hinged on the fact that for the first 12 months after the accident the client had no reports of MTBI symptoms in the voluminous medical records.

Defense doctors & attorneys opined that since there were no notes regarding MTBI until 12 months after the injury, the MTBI symptoms observed by doctors and reported by the client were not injury related.

We opined the client sustained an immediate MTBI in the accident and we further opined there were at least two medically reasonable explanations to justify the lack of notes during the first 12 months of medical evaluation and treatment.

It must be understood the client was a very high functioning person. The client was a Ph.D. chemist in a very responsible job. He was engaged to be married. He had several close relationships. He was doing well financially, owned his own home and enjoyed outdoor activities & some hobbies.

Recent medical literature reports it is not uncommon for a patient to under report cognitive loss in the days, weeks or even months after a traumatic brain injury. In fact, patients can be so confused by MTBI symptoms that they do not report them to their health care professionals. There is excellent evidence in the medical literature that both patients and doctors may misconstrue MTBI symptoms and patients often underreport symptoms as the symptoms are alien to them. It was our opinion that the client was unable to articulate his symptoms immediately after the accident and for some months thereafter. As noted, these kinds of symptoms can be confusing to the patient and misinterpreted by patients and doctors alike.

The plaintiff attorney got eyewitness accounts from the client's (now former) fiancé and close friends reporting the client's obvious impaired behavior, drastic personality change, history of poor work performance (including getting fired from a job he had for years) and *behavioral* symptoms that started immediately after the accident. To a trained clinician these reports could only be interpreted as evidence of MTBI starting immediately after the accident.

Late-onset MTBI symptoms also account for the 12-month absence of brain injury notes. There is, in fact, medical literature to support late-onset symptoms. Symptoms such as noise sensitivity, problems with concentration and memory, irritability, <u>depression</u>, <u>anxiety</u>, <u>fatigue</u> and poor judgment may be called late symptoms because they generally do not occur immediately after the injury, but rather days or weeks and in some cases months after the accident. Medical literature discusses the role of past medical history, injury-related, environmental and personality factors that contribute to late-onset symptoms.

In summary, it was our opinion the client was unable to elucidate his MTBI symptoms for the first year after his head injury. The client's MTBI symptoms, however, were evident in his behavior, mood disorder and low level of functioning immediately after the accident. He could not carry on with his "normal" life which was supported by his intelligence, social skills, level of education and high level of executive functioning. In addition, the client presented with lateonset symptoms as part of his head injury. The combination of these two factors made it appear as if the client had no immediate symptoms after the accident and a progressive course of central nervous system symptoms starting 12 months after the accident. The only thing that was "progressive" was his doctors understanding that the client had sustained an immediate head injury in the accident.

It is critical to note, the *report of symptoms* in the medical record was "late", however the onset of the client's symptoms was immediate.

Unfortunately, this kind of presentation is seen all too often traumatic brain injured patients.

### Let Us Know How We Can Help You

- Medical Summary Reports for Settlement Letters
- IME Observation & IME Rebuttal Reports
- Reports Answering Specific Medical Questions
- Standard of Care Reviews
- Liaison with Treating Doctors
- Help with Strategies to Promote Medical Theories
- Interpretation of Meaning, or lack thereof, of Medical Reports & Records
- Independent Record Reviews
- Assessment of Case Validity Regarding Medical Issues
- Referral to Expert Medical Witnesses
- Medical Research
- Facilitation of Communication with Clients, Families, Professionals and Service & Governmental Agencies
- Case Coordination
- Deposition & Trial Question Preparation

• Table-side Deposition & Trial Assistance

As you know, we have purposefully kept our fees exceptionally low allowing you the opportunity to have us review your cases early in your representation while controlling your expenses.

CONTACT US for information or fee schedule.

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