

## The 5th Dr. Janez Faganel Memorial Lecture:

### THE WIDENING ROLE OF EVENT-RELATED POTENTIALS IN CLINICAL DIAGNOSIS

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Clinical neurophysiology is essentially an extension of the clinical examination. Its growth and its successes have depended on the development of new exploratory techniques and the equipment to carry them out, and the learning of the skills to use them effectively. Recent developments show that the search for new methods of clinical investigation is still being very actively pursued.

Despite the use of the flash evoked potential as an adjunct to clinical electroencephalography, it was not until the 1970s that the evoked potential technique was widely adopted in clinical diagnosis, largely as a result of the discovery of the more sensitive pattern evoked response and of the subcortical components of the auditory and somatosensory responses.

Since then, the use of the averaging technique has been extended to explore the diagnostic possibilities of the cognitive event-related potentials and the motor potentials. Back averaging has been used to study the Bereitschaftspotential (readiness potential) in the dyskinesias and, with jerk-locked averaging, to look for cortical potentials preceding involuntary movements, such as myoclonus and the tics. Transcutaneous stimulation has provided a new method of measuring central motor conduction time, which has also been indirectly explored in studies of the long loop reflexes.

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## I. Severe head injury:

### THE CLINICAL EVALUATION OF SEVERE HEAD INJURY

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A clear clinical evaluation and classification of patients suffering from severe brain injury are essential for an effective treatment and rehabilitation of these patients. The subdivision of the midbrain syndrome in four separated stages and two stages of bulbar brain syndrome is a valid method to describe a patient's level of cerebral dysfunction.

The diagnosis of midbrain syndrome I and II usually allows a favourable prognosis. In the stages III and IV also influences of other factors have to be considered in defining the patient's outcome. In these cases the Innsbruck Coma Scale can be a useful tool to establish a valid prognosis.

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