Enhancing patient care in the ICU – with NeuroMonitoring

NIHON KOHDEN
In the ICU, several patient vital signs are monitored continuously.

But what about the brain?

Hemodynamics  
Heart rate  
Non invasive blood pressure

See more, act fast

Take a closer look at your patient’s ‘black box’ – the brain.

In the intensive care unit physicians and nurses get real-time information about cardiopulmonary physiology. Shouldn’t there be similar monitoring for the brain, a vital organ, as well?

Typically patients with an unclear mental state or suspicion of brain issues will be examined hourly for level of arousal, motor function and presence of brainstem reflexes. But this only provides a snapshot in time of their neurologic status, and creates only a small subset of important brain functions. If the patient is sedated or even paralyzed, providing the right information can be even more difficult.

The importance of NeuroMonitoring

When it comes to detecting abnormalities, diagnosing seizures and making informed treatment decisions, continuous NeuroMonitoring is a highly valuable tool on the ICU. The benefits have been recognized by the European Society of Intensive Care Medicine (ESICM) and the European Resuscitation Council (ERC), which have both issued recommendations and guidelines on the subject:

**ESICM recommendations on the use of EEG monitoring in critically ill patients for:**

- Non-convulsive status epilepticus
- Comatose patients with unexplained and persistent altered consciousness
- Comatose patients after cardiac arrest

Consensus statement from the neurointensive care section of the ESICM; Intensive Care Med (2013)

**ERC recommendations for post-resuscitation care:**

- Continuous electroencephalography (EEG) is recommended to detect seizures after cardiac arrest
- Consider continuous EEG to monitor patients with a diagnosed status epilepticus and effects of treatment

Section 5 of the European Resuscitation Council Guidelines for Resuscitation 2015
An-end-to-end approach

NeuroMonitoring can help to improve patient care and outcome, shorten hospital stay and have a positive impact on finances. Nihon Kohden delivers a unique multi-modality approach, that combines continuous EEG monitoring (cEEG) – an important and easy-to-measure parameter for intensivists – and supports individualized, physiologically driven decision-making.

This helps you identify when the brain is at risk or when neuronal injury is occurring, and lets you intervene before there is irreversible damage.

Our NeuroMonitoring program is designed with the following aims in mind:
- Improve patient outcome
- Shorten patients’ stay in the ICU
- Lower the mortality rate
- Decrease costs
Early detection

Gain visibility into your patient’s pathway
Compared to a 30-minute routine examination using EEG, cEEG provides you with a dynamic assessment of reactivity, variability and sleep pattern integrity within the cortex. All of these parameters have a prognostic significance for coma patients. And analyzing them can help avoid misleading or wrong prognoses. NeuroMonitoring gives you a better indication of the state of the brain during coma, helping you better predict the outcome, and therefore directly influencing the management of patients.

Evolve your NeuroMonitoring program to the level you need
When patients have an impaired level of consciousness, it is especially difficult to detect ongoing neurological issues. However, it is crucial to quickly identify seizures in those patients to ensure the right treatment. Based on our extensive expertise and a history rooted in neurology, Nihon Kohden delivers connected continuous EEG monitoring (cEEG) that meets both your and your patients’ needs.

Are nonconvulsive seizures a significant problem in the intensive care unit? Yes!
- 35% of NeuroICU patients have been found to have seizures
- 22% of traumatic brain injured patients have seizures, half of which are nonconvulsive
- 28% of intracerebral hemorrhage patients have seizures, half of which are nonconvulsive
- 44% of pediatric ICU patients have seizures on cEEG; 39% are nonconvulsive

EEG module
Connect to Life Scope monitors
- Simple interface with Life Scope monitors
- Just plug and play to monitors
- cEEG with up to eight channels
- Status at a glance via trend graphs

Our standalone EEG devices can be used directly at the point of care, and offer a comprehensive range of NeuroMonitoring capabilities. Our Neurofax EEG devices are highly scalable, with hardware and software options that cover everything from routine EEG recording to high-level brain function research. Our Vital Signs Interface integrates a variety of vital signs from the bedside monitor into the EEG. It also features trending software to give physicians and nurses the big picture, with priority information in one location. This multi-modality approach assists in identifying abnormal autonomic responses in pre-ictal or post-ictal states, particularly in patients with refractive epilepsy who may have high risk of sudden unexpected death from epilepsy (SUDEP).

Alternatively, simply connect our compact EEG module to our Life Scope monitors to examine up to eight channels in real time. Both solutions enable quick data review, with various trends including Density Spectral Array (DSA), Compressed Spectral Array (CSA) and amplitude-integrated EEG (aEEG).
Immediate action

**Gain timely insight into changes**
Neurological damage often does not occur at the moment of impact or in an event such as a stroke. Rather, it develops over hours and days. Delayed response to these significant changes can lead to secondary injury. Continuous EEG helps you identify impending secondary brain injury in time to control or reverse it.7

**Neurofax EEG trending software**
*Online seizure detection*

- Visualize trends, such as FFT total power, DSA with spectral edge, Power Asymmetry, aEEG
- Electrode status indicator
- Vital sign integration

**Get more than snapshots**
Neuroimaging provides information about the status quo and is the best way to identify new or enlarging mass lesions. However, it requires timely transport of patients out of the ICU and cannot reveal functional changes. cEEG detects new or increasing lesions, helping you make the right decision on moving a patient for cerebral imaging.

**Master your data quickly and efficiently**
Continuous EEG monitoring in the ICU is highly time consuming for clinicians. In response to this challenge, Nihon Kohden has developed EEG trending that simplifies review of large data volumes. This system helps you highlight and predict trends and changes over time.

**Does cEEG provide an accurate diagnosis of nonconvulsive seizures? Yes!**
- Focal and generalized nonconvulsive seizures are accurately diagnosed by cEEG
- The timing, duration and frequency of seizures are reliably seen
Diagnostic confidence

**Improved outcome**
With numerous mechanical sources of potential artifacts in the ICU such as vibrating beds and ventilators, as well as events that mimic seizures during EEG monitoring, our video and audio recording help to correctly interpret otherwise questionable patterns. They are precisely synchronized with the EEG with full motion video and audio at multiple, user selectable recording rates.

**Live View Panel**
Intuitive real-time management monitoring system

- View and monitor patients from: Multiple locations within the facility or Multiple locations from wherever you choose
- Get all key information in one place

**The power of NeuroMonitoring trends**

- aEEG with burst suppression trend (67 year old patient after head injury)
- Patient with seizures clearly shown in the trend, as well as in the raw EEG
- Easy pattern recognition of compressed data and seizure detection
Efficient use of resources
Though cost effectiveness of hospital equipment is often difficult to calculate, a recent study over a four-year period discovered a reduction of 44% in costs when using the NeuroMonitoring program, and equally a 44% decrease in hospital stays. There was also an increase of 50% in the relative improvement of patients’ outcomes. Early detection also helps reduce the number of secondary brain injuries and avoid subsequent treatment.

Your challenge – our mission
There is a clear need for a comprehensive NeuroMonitoring program in the modern ICU. Nihon Kohden provides a broad range of software and hardware solutions for EEG recording and data analysis that can help you meet this need and master some of today’s healthcare challenges.

Whatever the challenge within your hospital, our NeuroMonitoring solutions allow for better evaluation of cerebral functions, faster ability to treat your patient and better prognostic information. Consult our experts to tap into our vast resources and experience on this critical issue.

For more information, visit www.nihonkohden.com and get in touch.

Does cEEG avoid risky testing to rule out other diagnoses? Yes!

- cEEG is noninvasive
- If seizures are detected, then other invasive testing is not required (provided that noninvasive testing (i.e. imaging) is completed)

Since foundation in 1951, Nihon Kohden’s mission has been to improve the quality of life with advanced technology.

We provide solutions for diagnosis, critical care, clinical information, and in vitro diagnostics – and we are dedicated to collaborating with you to confront the challenges of healthcare today and tomorrow.
Improving Healthcare with Advanced Technology

1 Increased incidence and impact of nonconvulsive and convulsive seizures after traumatic brain injury as detected by continuous electroencephalographic monitoring. (Vespa et al 1999)

2 Neurophysiologic monitoring in the neuroscience intensive care unit (Jordan 1992)

3 Acute seizures after intracerebral hemorrhage: a factor in progressive midline shift and outcome (Vespa et al 2003)

4 Nonconvulsive status epilepticus in children: clinical and EEG characteristics (Hirsch et al 2006)

5 Continuous EEG Monitoring in the Intensive Care Unit (Marc L. Schuer, 2002)


8 Continuous EEG Monitoring in the intensive care unit (Vespa et al 2009)