# **Emotion in Disorders of Consciousness**



Please ensure that the patient has adequate arousal (eye opening) and attention prior to providing intervention or assessing level of consciousness. Utilize *Arousal Facilitation Protocol* (see handout) if the patient has sustained eye closure or has a change in behavioral responsiveness.

## **COMA**

When a patient is in a comatose state, he/she does not have the capacity to feel.

# **VEGETATIVE STATE/UNRESPONSIVE WAKEFULNESS**

When a patient is in a vegetative state, he/she may demonstrate reflexive tearing or oral movements similar to smiling. This means you may see facial expressions without presence of external stimuli.

#### MINIMALLY CONSCIOUS STATE

When a patient is in a minimally conscious state, he/she may inconsistently demonstrate appropriate facial expressions/emotions which are contingent upon stimuli presented. It is important to know that presentation of affective responses may also be due to internal stimuli.



#### **Possible Contingent Responses:**

- Smiling when told a joke, being reminded of a happy memory, etc.
- Crying when told a sad story, being reminded of a sad memory, etc.
- Furrowing brow in response to dislikes



#### **Suggested Activities for Eliciting Response:**

- Talk to your patient about happy, funny, sad, and unhappy memories, current events, etc.
- Play music your patient both likes and dislikes
- Familiar prayer

### **CONSCIOUS STATE**

When a patient is fully conscious, he/she may also demonstrates contingent emotional responses.

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Giacino, J. T., Fins, J. J., Laureys, S., & Schiff, N. D. (2014). Disorders of consciousness after acquired brain injury: the state of the science. *Nature Reviews Neurology,* 10(2), 99-114. doi:10.1038/nrneurol.2013.279

Giacino, J & Kalmar, K. (2006). Coma Recovery Scale - Revised. *The Center for Outcome Measurement in Brain Injury.* http://www.tbims.org/combi/crs

