





... supporting people with an acquired brain injury



This leaflet has been produced in partnership with Adult Social Care Services - Luton Borough Council

Registered Charity No. 1080775

Brain Injury - Causes & Consequences What is an Acquired Brain Injury?

Headway Luton simply defines an acquired brain injury (ABI) as any damage to the brain, which is non-degenerative, that has happened since birth, and is due to internal or external causes

How many people have an ABI?

Each year in the UK 1.4 million people attend hospital with a head injury of some kind. Of these approximately 100,000 will be diagnosed as having an ABI, of which up to 90% will range from mild to moderate injuries. This means at least 10,000 people per year suffer a severe ABI causing possible life changing difficulties

Who could it affect?

It can happen, without warning, to anyone at any time regardless of the persons' age, gender, race, religion, culture or social-economic background

Can it be prevented?

Many of the internal causes cannot be prevented but many ABI that are caused by external forces are accidental and may have been avoided. Headway Luton aims to raise awareness of ABI throughout the community and help reduce these incidents

Can the brain recover by itself?

This depends on the severity and location of the injury, and the individual. A mild ABI may take just months to recover whereas moderate or severe ABI may cause life long physical and/or cognitive disabilities

Headway Luton are here to help!

A.B.I. - Internal Causes

Internal causes are medical conditions or surgical incidents that can lead to an ABI. This list is not exhaustive but the most common are as follows:

Alcohol abuse – excessive drinking over a short or prolonged period

Anaesthetic accident – misuse of anaesthesia during surgery

Anoxia – loss of oxygen supply to brain cells

Aneurysm – weakened brain artery wall possibly leading to a haemorrhage

Embolism – blockage of an artery e.g. a clot

Encephalitis – Inflammation of brain due to infection

Epilepsy – abnormal electrical activity in brain

Drug abuse – overdose or combination of prescribed or non-prescribed drugs

Haematoma – blood clot in the brain possibly leading to a stroke

Haemorrhage – bleeding in the brain

Hydrocephalus – build up of fluid in the brain

Hypoxia - reduced oxygen supply to brain cells

Meningitis – infection affecting the brain protective outer membrane, the meninges

Poisoning – inhaled or ingested toxic substances eg. carbon monoxide, solvents, lead

Stroke – severe interruption of blood flow

Surgery – damage caused by any neurosurgery

Tumour – abnormal growth causing pressure on the brain

ABI – External Causes

External causes are traumatic injuries to the brain caused by violent movement of the head, direct impact or penetration of the head. The most common incidents are as follows:

Road traffic accidents

Street and domestic violence

Military conflict

Accidents at work or at home, including falls

Sport and leisure pursuits



Traumatic injuries are often followed, some time after, by secondary ABI caused by internal bleeding, swelling or bruising of the brain

Different areas of the brain have separate main functions and any localised ABI will probably have some effect on its functions, such as:

Cerebellum - balance, muscle co-ordination

Occipital Lobe – vision

Parietal Lobe - sensations, spatial awareness

Temporal Lobe - memory, hearing, taste/smell

Frontal Lobe – behaviour, emotion, personality Also executive functions e.g. problem solving, planning, multi tasking, organising, initiating

Consequences of A.B.I.

Many people with a mild ABI will hopefully recover over a few months, whereas those with a moderate to severe ABI may well have long term neurological conditions causing physical and/or cognitive difficulties. These could often be for life and have life changing consequences

Due to the complexity of the brain and the nature of the injury each individual will demonstrate a unique set of problems, possibly including any one or more of the following:

Physical Consequences:

Physical disabilities including mobility problems; loss of sight, hearing, taste, smell, touch; balance problems, fatigue, partial paralysis, epilepsy, incontinence problems

Cognitive Consequences:

Poor memory, attention, concentration, judgement, perception; lack of insight, speech and language difficulties, information processing, spatial awareness problems

Emotional/Behavioural Consequences:

Poor communication/social skills, personality changes, inappropriate behaviour, emotional issues, mood swings, anxiety, depression, anger, lack of motivation, apathy, concrete thinking, impulsiveness, compulsiveness

These problems often cause decreased self-value and ambition, unemployment, personal crisis, breakdown of relationships and loss of friends leading to increased social exclusion, financial problems and a high dependency on care and other support services

For further information/contact:

Headway Luton Ltd

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