**LIMBIC-CENC Clinical Care Monographs:**

**TBI and Co-occurring Conditions**

**Key Finding:** LIMBIC-CENC researchers found associations between traumatic brain injury (TBI) diagnoses and epilepsy, hearing loss and tinnitus, and other sensory disorders (e.g., visual, balance/dizziness). In all cases, the association was strongest for Moderate to Severe TBI, but still present for Mild TBI.

**Perspective:** The associations found between TBI and these other diagnoses are worrisome, especially for the common mild TBI; however, they should be considered tentative pending evidence from more rigorous, prospective, longitudinal studies.

**Clinical Pearls:**

- Regardless of epilepsy risk level, routine prophylaxis with antiepileptic medication is not warranted after TBI of any severity, with the possible exception of penetrating TBI.
- The care of Servicemembers and Veterans with TBI, even mild TBI, should include assessment for sensory problems, as identification is integral to facilitating positive long-term outcomes.

**References:**


n.b.: The ‘Perspectives’ and ‘Clinical Pearls’ expressed are based on interpretation of findings from the described Long-term Impact of Military-related Brain Injury Consortium/Chronic Effects of Neurotrauma Consortium (LIMBIC-CENC) research studies and their assimilation with the extant literature. These views are endorsed by LIMBIC-CENC leadership but may vary across individual researchers. All findings involve Service Members (SMs), Veterans (Vs) or both.

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