

## Symptom Cluster Treatment Recommendations

<b><i>Symptom Cluster</i></b>	<b><i>Presenting Symptoms or Complaints</i></b>	<b><i>Comments and Considerations</i></b>	<b><i>Treatments by Symptom Cluster (NOTE: Treat headache, and sleep first followed by memory. A majority of patients improve on memory with treatment of headache, irritability, and sleep alone).</i></b>
Headache	Headache, sensitivity to bright light or loud noise, nausea, tinnitus, vision problems	<b>Consideration:</b> Headache that builds throughout the course of the day may be related to increased cognitive effort. Consider trial of limited duty (no complex mental tasks - i.e. heavy reading, computer work).	<b>Symptomatic Treatment</b> Naprosyn (prn at HA onset, up to 3 days/week): Motrin can be used for up to 7-10 days, but longer risks rebound headache. <b>Avoid:</b> Narcotics, Tylenol, Excedrin, Fioricet in patients with daily headache due to the risk of rebound headache. <i>*should have trial of treatment of 4-6 weeks before considered ineffective.</i> <b>REFER</b> treatment failures to neurology.
Balance	Balance, dizziness, coordination problems, ringing in the ears	<b>Examine:</b> nystagmus, positional / postural balance, cerebellar/ coordination (e.g., finger to nose, rapid alternating movements), ENT – otoscopic exam, bedside hearing test, review audiogram if available.	<b>REFER</b> to Physical Therapist for vestibular rehabilitation exercises.
Sleep	Fatigue (physical and/or mental), sleeplessness, sleep disturbances, nightmares, sleep walking	<b>History / Symptom questions:</b> difficulty falling asleep, difficulty staying asleep, acting out in sleep (sleep walking), nightmares, falling out of bed, confusion, frightened arousal, non-restorative sleep, alcohol or other substance abuse.	<b>First Choice</b> – without other associated symptoms: 7-14 day trial of Trazodone (Desyrel) 25 - 100 mg qHS (response should be seen within 1-14 days) <b>LIMIT</b> therapy to 2 weeks. <b>REFER</b> to psychiatry if medication trials are ineffective.
Memory	Memory loss or lapses, decreased concentration, forgetting.	<b>Gather:</b> Info from other sources (collateral information) – including family members and supervisor feedback. Review ImPACT scores.	<b>Normalize:</b> Sleep and Diet/Nutrition <b>REFER</b> to Occupational Therapy and Speech/Language Therapy (if available) for cognitive therapy <b>REFER</b> to Neuropsychology if there are no other symptoms or after initial treatment of symptom clusters above.

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