
News Release

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MULTIMEDIA ALERT: A video interview with Dr. Brown is available for journalists to download on the [Mayo Clinic News Network](#).

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For Immediate Release

Mayo Clinic and Collaborators to Study Use of Electronic Media to Improve Care of Traumatic Brain Injury

ROCHESTER, Minn. — For people who are hospitalized for traumatic brain injury, recovery may involve physical and cognitive problems that linger for years. The road back to health can be even more arduous for those who live in remote rural areas and don't have access to brain rehabilitation specialists. [Mayo Clinic](#) and collaborators, including the Departments of Health in [Minnesota](#) and [Iowa](#), [Regional Health](#) in South Dakota and [Sanford Health](#) in North Dakota, have received a \$2.2 million federal grant to test new ways to provide specialized TBI care, with a focus on reaching rural areas and underserved urban populations.

“We know early intervention and longitudinal care give people the best chance to minimize or prevent lasting effects of TBI, but that's not always easy or feasible,” says Mayo Clinic psychiatrist [Allen Brown, M.D.](#), Director of [Brain Rehabilitation Research](#) and principal investigator of the five-year study. “Our goal is to test a model of care that delivers specialized brain rehabilitation resources to patients and providers in underserved locations. We believe this is the first study of this scope — four states, three health systems and two state departments of health — using electronic technology to improve care with no face-to-face contact.”

The randomized clinical trial, led by [Mayo Clinic's Traumatic Brain Injury Model System Center](#), will test the effectiveness of using modern technologies to create health care networks, using phone consults, eHealth, telehealth, and virtual communication systems. With advanced technologies, specialists may reduce the occurrence of complex medical and psychosocial problems by providing support and education to underserved areas and to community clinicians who see patients there.

“In the upper Midwest,” says Brown, “rural dwellers, the elderly and Native Americans have a high risk for TBI and are more likely to become isolated after acute care because of their impairment, distance from services, and financial concerns. The trial will test whether outcomes over three years are better in the group receiving this model of care compared to a group that receives usual care in their communities.”

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The study builds on more than 15 years of continuously funded Mayo Clinic research studying TBI and establishing a community-based network that's unique among brain rehabilitation centers. Researchers will include specialists from Mayo Clinic's Brain Rehabilitation Clinic. The study will also involve Mayo Clinic's Center for the Science of Health Care Delivery, Mayo Clinic Center for Innovation and the Mayo Clinic Center for Social Media. Funding for the clinical trial, known as CONNECT, comes from the U.S. Department of Education, Office of Special Education and Rehabilitation Services, through the National Institution on Disability and Rehabilitation Research.

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