

BRAIN Death:

:- Irreversible loss of
Cerebral functioning:

3 types: - cortical or cerebral death with intact brain stem
- Brain stem death with intact cerebrum.
- Whole brain death.

① Cortical / cerebral Death:

:- cortex dead but,
Brain stem functioning

Causes: - cerebral hypoxia.
- wide spread cortical damage
- toxic condition.

Clinical Feature

:- deep coma.
- loss of power of perception but,
- Spontaneous respiration and circulation

This is called - vegetative life / persistent vegetative state

m/c Cause 1 - Traumatic diffuse axonal injury

- Brain shows: - gliosis.
- tissue resorption
- dystrophic axons
- endothelial hypertrophy.

Complication: - Aspiration pneumonia
- bed sores.

Sepsis.

UTI.

muscle atrophy

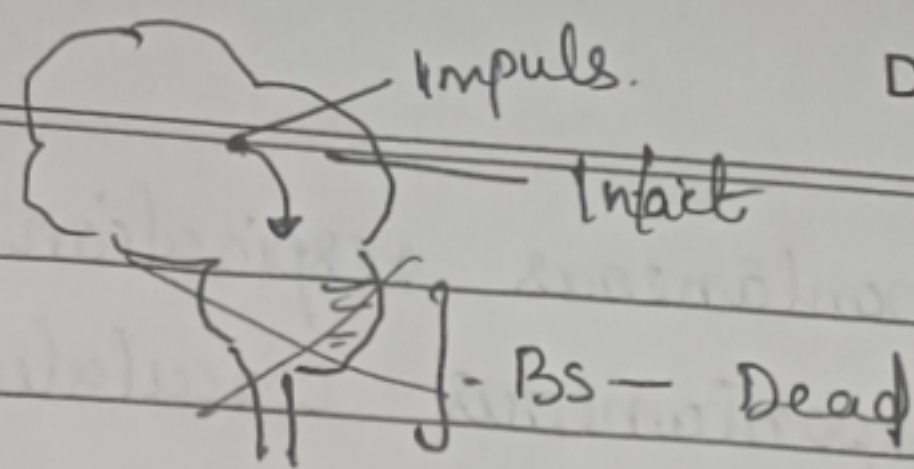
DVT, pulmonary thromboembolism

② Brain stem death:

BS - dead:

cerebrum intact

impulse from it are cut off by the brain stem



Brain stem: - vital centre for respiration :- Spontaneous stop of resp circulation cannot be maintained.

patient - unconscious: $\rightarrow$ $\because$ ascending reticular activating system located at the ^{floor} base of aqueduct is damaged.

Causes: - BS injury
cerebral edema.

$\uparrow$ ed intracranial pressure.

③ Whole brain stem death.

• both: - cortex & BS - function stop irreversibly.

• there will be axitic necrosis & softening of brain.

3-5 days: - widespread brain destruction d/t lack of perfusion.
Pan neurosis.

respirator brain: $\rightarrow$ brain will be softened.

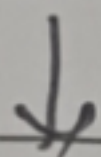
$\rightarrow$ it looks - grey, dusky, soft, Near liquid

to Differentiate b/w: - brain in persistent vegetative state $\rightarrow$ it has perfusion maintain

HARVARD'S CRITERIA: (1968)

Ad-Hoc committee of Harvard Medical Sch.

The ventilator is switched off for 10 min



look for following response:

①: Spontaneous respiration (Apnoea test).

② Spontaneous circulation.

③ pupillary reflex

④ corneal reflex.

⑤ Ocular reflex:

— oculoccephalic reflex:- doll's eye phenomenon
eye is fixed do not move when position of head is changed.

— oculovestibular reflex:- few drops of cold H₂O
(caloric test). add on ear, eye movement

⑥: Brimace reflex:- response to deep pressure on nail bed.
supra orbital ridges/ mandibular joint

⑦ Gag reflex:- stimulation of the posterior pharynx & tongue blade.

⑧: flat EEC.

response absent

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again on ventilator.

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after 6 hrs procedure is repeated (4 time) in 24 hr.

Apnoea test :- before looking for resp.

— 100% O₂ → given via ventilator for 10 min

— 5% CO₂ in O₂ for 5 min — prevent hypoxic brain damage

①:- hypothermia
metabolic disorder.

Coma due to drugs.

Alcohol intoxication

Relaxant

Hypovolemic Shock

— before doing Apnoea test
Coma due to following should be excluded.

Organ transplantation Act: -2012

Death certifying team should consist of: →

1. Doctor in charge of hospital
2. Doctor tx the patient
3. Neurologist
4. Independent RMP

Time :-

Liver & lung c in 15 min

Kidney → 45 min

Heart → 1 hr.

Cornea → 2 hr

Skin & blood vessel → 2-4 hr

Bone - 6 hr.