



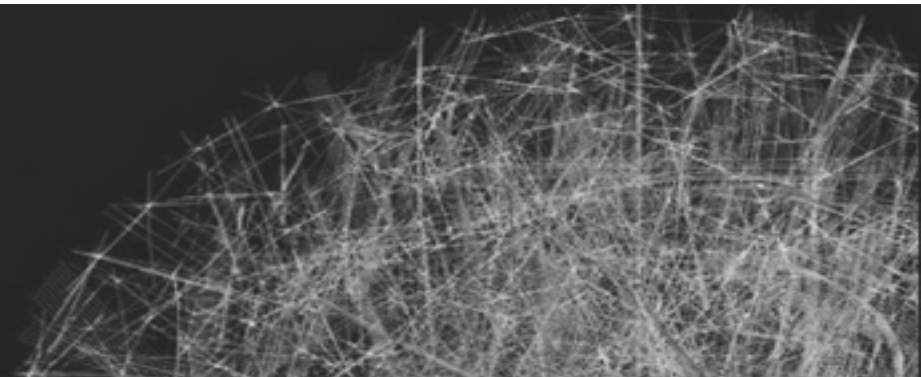
Núcleo de Pesquisa em
Neurociência e Reabilitação



Digital Database: Experience from the Institute of Neurology Deolindo Couto at UFRJ

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UFRJ / USP

NeuroMat

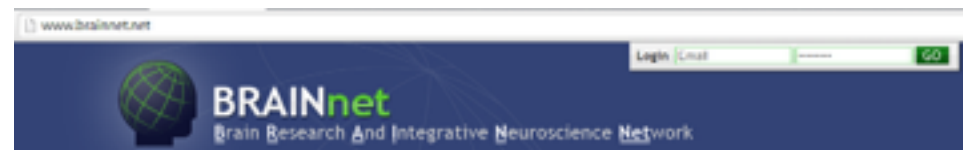
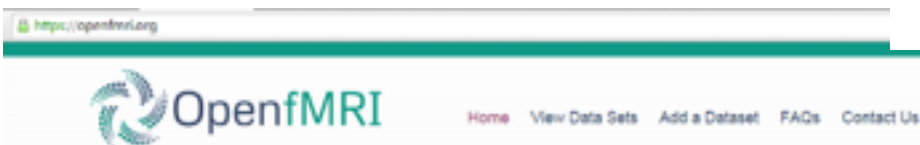
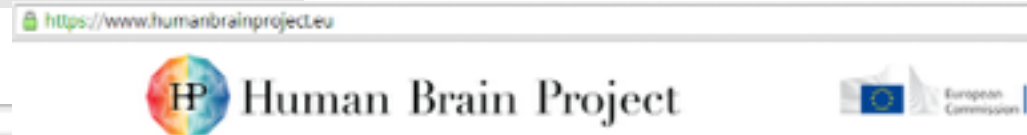
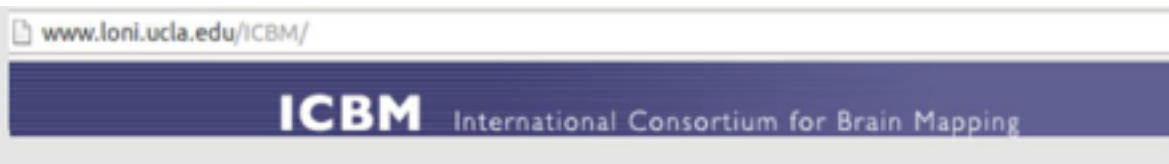


Introduction

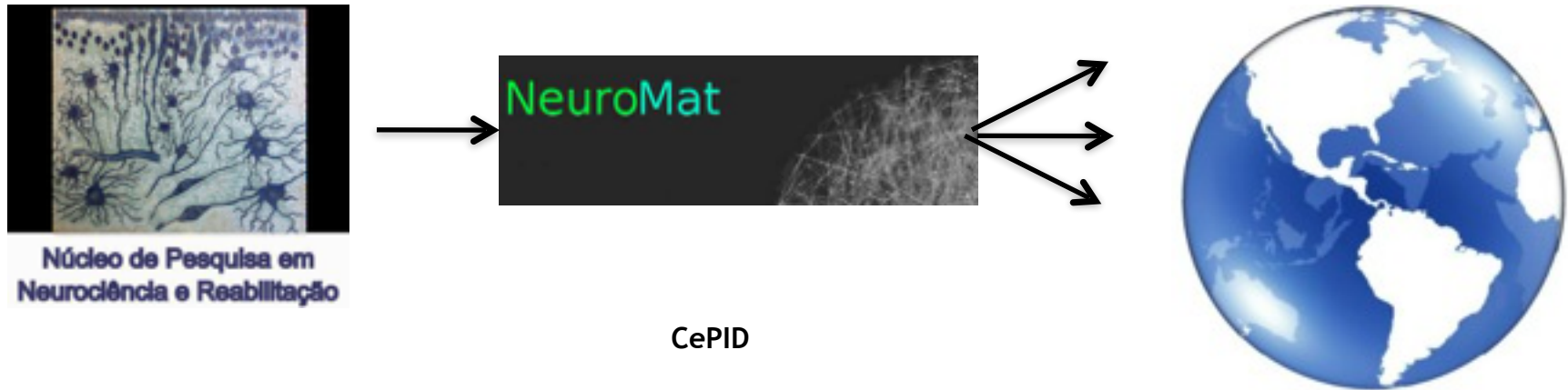
Public Databases are fundamental for the effective advance in the understanding of brain function and treatment of its dysfunctions.

In neuroscience, the provision of public Data is a global trend, and building a database that will allow the recovery of clinical and neurophysiological information in a systematic way is a challenge in contemporary science

This challenge lies in the interface between computer science, neurobiology, statistics and medicine.



Objective



CePID

INDC/UFRJ

Create a digital database of public access falls within the context of the The Research, Innovation and Dissemination Center for Neuromathematics (CePID NeuroMat).

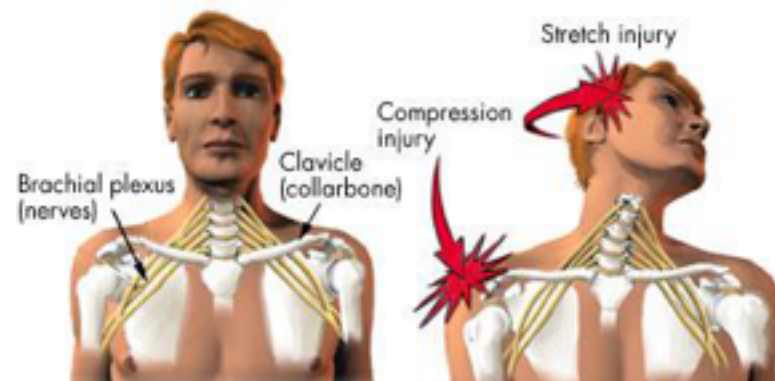
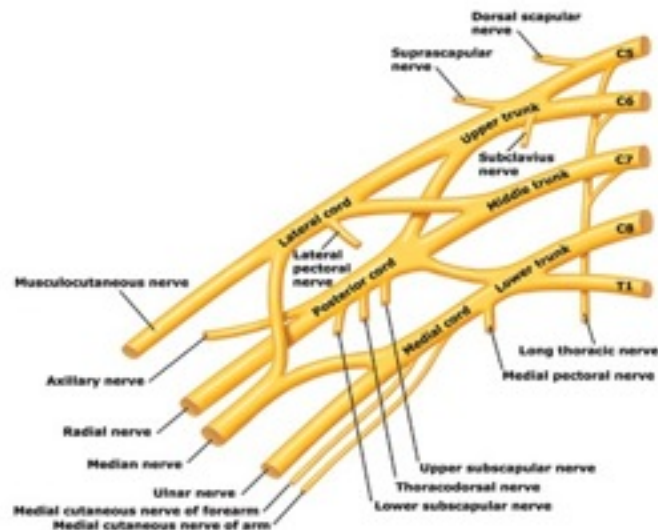
In 2014 began the creation of database that stores in a standard and secure manner the data set collected in the Neuroscience and Rehabilitation laboratory (LabNer) in INDC/UFRJ, facilitating its sharing and reuse.

Methods and Results

Prototype: Database from patients with brachial plexus injury (BPI).

BPI occurs primarily by automobile accidents in young people, affecting motor and sensory nerves for upper limb. The main treatments are intense physical therapy and surgical reinnervation of the brachial plexus.

BPI is an important model to investigate mechanisms of brain plasticity following peripheral injury.



Example of brachial plexus injury mechanism.
Injury by stretching and compression.

A Multidisciplinary Team

The database for the BPI study was designed in INDC/UFRJ by:

- Doctors
- Physiotherapists
- Neuroscientists

USP:

NeuroMat Researchers

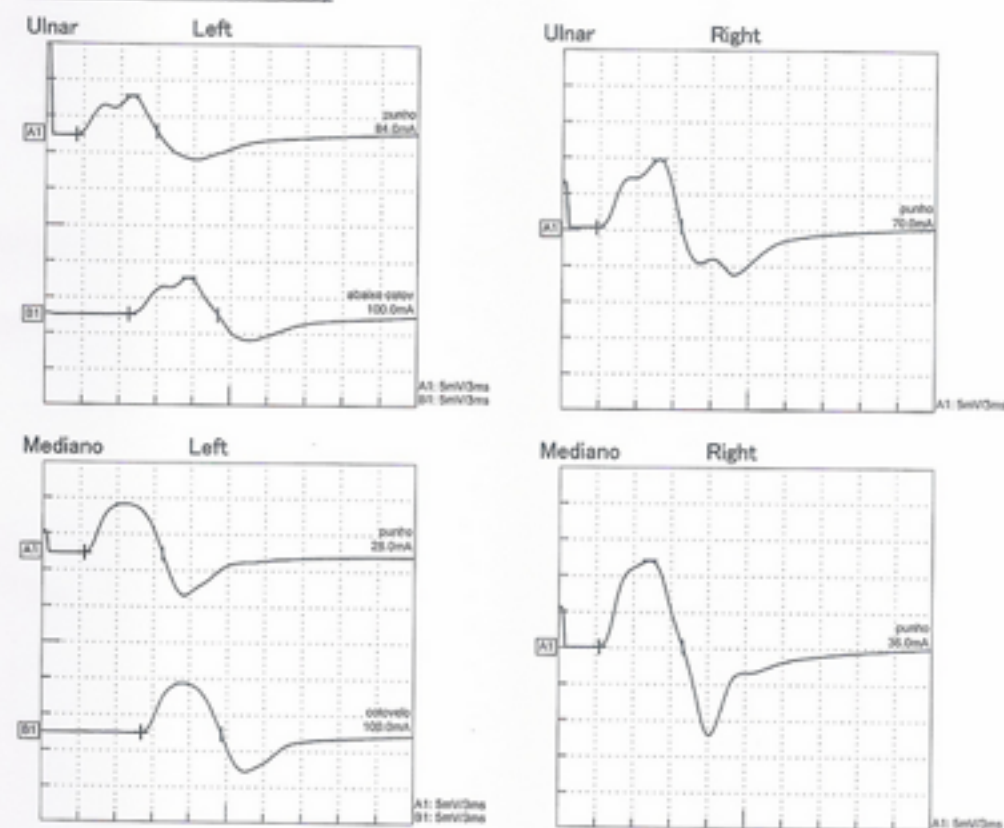


Steps to create the database:

Step 1: General Information

- Patient Registration
- Socio-demographic data
- Social History
- Medical history and complementary exams (longitudinal)

Motor Nerve Conduction Study



Sensory Nerve Conduction Study

Ulnar Left Ulnar Right

RONEUROMIOGRAFIA DOS MEMBROS SUPERIORES

miográfico com eletrodo de agulha monopolar evidenciamos sinais de da com ondas positivas e fibrilações em repouso nos músculos supridos · C6, C7 e, em menor grau, C8 - T1 à esquerda. Observam-se ondas n na musculatura paravertebral cervical esquerda.

ontração não foram dispolarizados potenciais de unidades motoras nos 5 e C7.

trínsecos da mão e nos supridos pelas raízes C8 - T1 observa-se tamento incompleto à contração.

condução sensitiva com valores normais de amplitude e latência nos s, ulnares e radiais superficiais.

condução motora evidenciando amplitudes dos CMAPs dos nervos esquerdos diminuídas em aproximadamente 40% em relação ao lado

ais são sugestivos de comprometimento axonal pré-ganglionar agudo rritório das raízes motoras C5 -C6, C7 e, em menor grau, C8 - T1 à ando sido detectadas unidades motoras funcionantes nos miótomos C5 estudo (aproximadamente 20 dias de evolução).

Steps to create the database:

Step 2: Evaluation and follow-up forms

- Medical admission
- Physiotherapist admission (longitudinal)
- Physical examination (longitudinal)
- Surgery Description (degree of injury, procedure description, complications)
- Berg Balance Scale, DN4, DASH, Laterality Assessment (Oldfield)



LimeSurvey®
the open source survey application,
...refreshingly easy and free

9

The Limesurvey is a free software developed in order to prepare, publish and collect survey responses. Once you have created a questionnaire, it can be published online (question by question, group by group or all issues in a single page questionnaires).

NPNR - Nucleo de Pesquisa em Neurociência e Reabilitação - INDC

Administração -- Logado como: Juliana

Questionários: Por favor, selecione

Questionários

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	Status	ID do questionário	Questionário	Data de criação	Proprietário	Acesso	Respostas anônimas	Completo	Parcial	Total	Fichas disponíveis	Taxa de respostas
<input type="checkbox"/>		113491	Ficha de Seguimento	30.07.2013	Juliana (Editar)	fechado	Não	40	4	44	40	90
<input type="checkbox"/>		345282	DAGH	13.01.2014	maki	fechado	Não	5	2	7	3	66.7
<input type="checkbox"/>		364666	Avaliação sobre membro fantasma	26.09.2013	bia	Aberto	Não					
<input type="checkbox"/>		451487	Ficha da Cirurgia	26.11.2013	talita	Aberto	Não					
<input type="checkbox"/>		466776	Ficha da Fisioterapia	13.12.2013	Juliana (Editar)	fechado	Não	20	4	24	22	86.4
<input type="checkbox"/>		547437	Ficha de Avaliação Sensorial com Neurotôm	07.02.2014	bia	Aberto	Não					
<input type="checkbox"/>		578559	QUESTIONÁRIO PARA DIAGNÓSTICO DA DOR NEUROPÁTICA - DNH	16.06.2014	maki	fechado	Não	1	1	2	1	100
<input type="checkbox"/>		599846	Avaliação de Entrada	25.02.2014	ana	fechado	Não	19	7	26	21	85.7
<input type="checkbox"/>		616949	Questionário de Dor	12.12.2014	Juliana (Editar)	Aberto	Não					
<input type="checkbox"/>		885183	Questionário para Avaliação de Estresse Pós-Traumático (PC-E)	25.03.2014	cristina	Aberto	Não					
<input type="checkbox"/>		957421	Narokas e Waizakul	13.01.2014	Samuel	fechado	Não	2	0	2	2	100

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Direita

Esquerda

Ambos

Não

Qual o lado da lesão?

Resposta

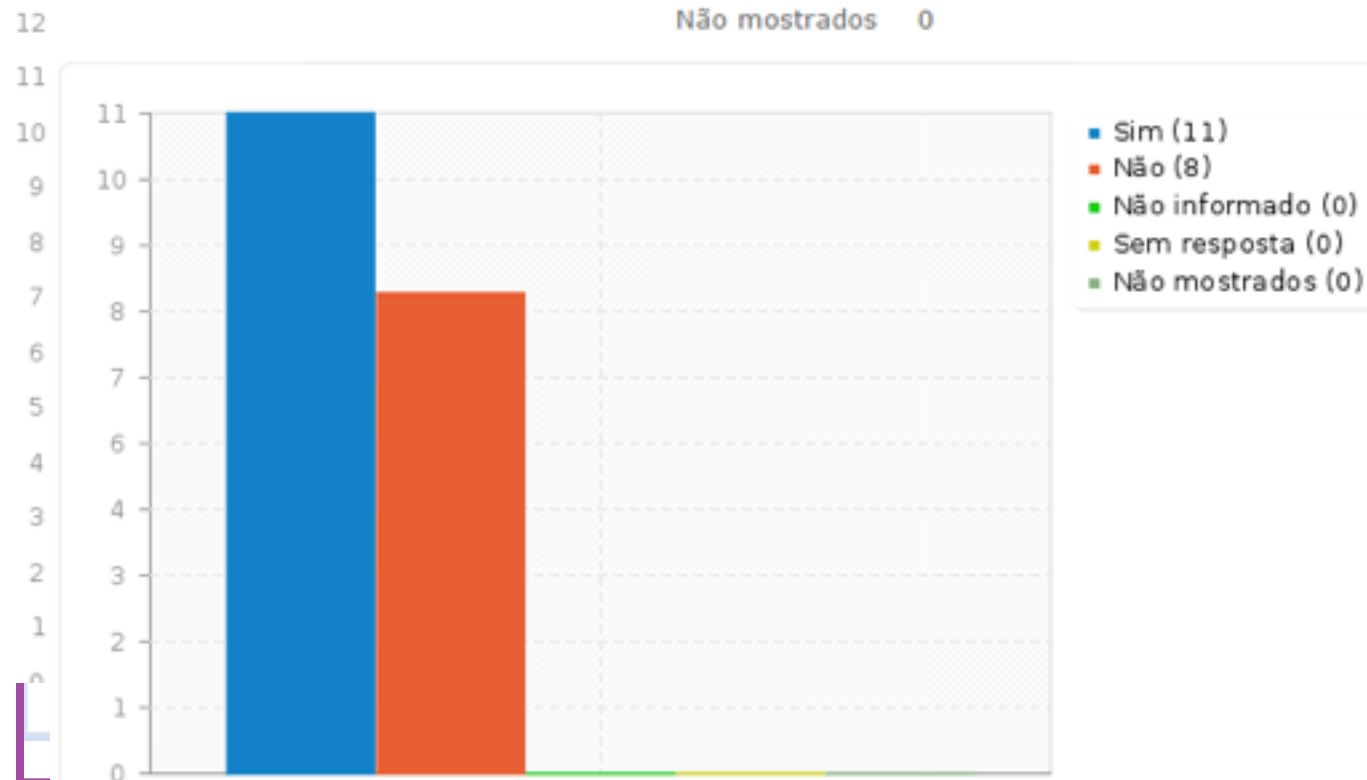
Contagem

Teve alguma fratura associada à lesão?

Resposta

Contagem

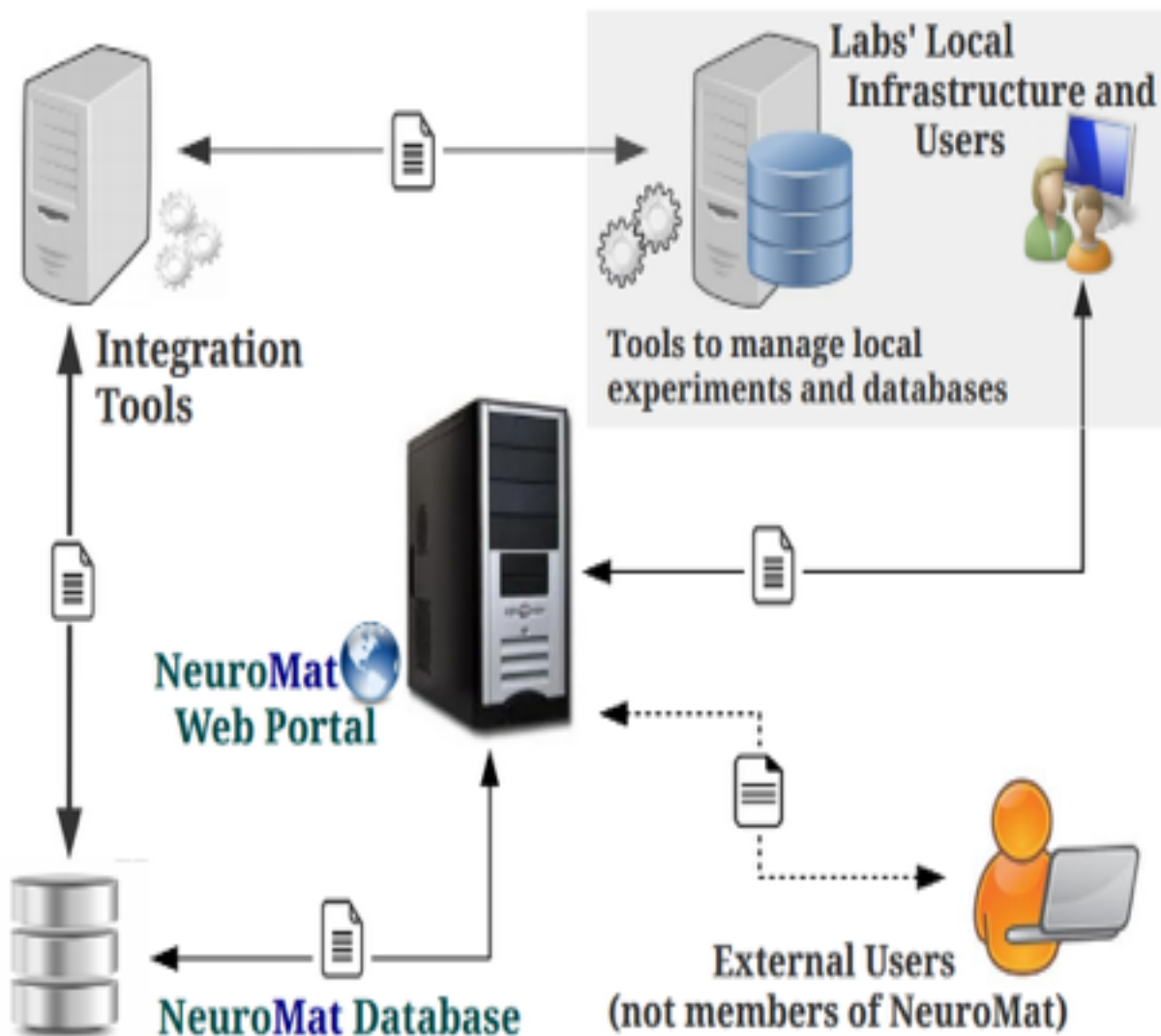
Sim (A1)	11	57.89%
Não (A2)	8	42.11%
Não informado (A3)	0	0.00%
Sem resposta	0	0.00%
Não mostrados	0	0.00%



Next Steps

- Development version - versão 0.2
 - Experimental protocol description
 - Adjustments based on INDC experience
- Step 3: load and manage physiological data
 - EEG, EMG, TMS, Stabilometry etc.
 - Challenges
 - Several research projects use different ways to store data
 - Store data efficiently
 - Why Standardize?
 - Maintenance, recovery, sharing and reuse
 - Experimental reproducibility and comparison between research projects

- Step 4: Data Sharing



Current Numbers

53 patients already registered

69 patients to be registered

7 questionnaires per patient

Under development questionnaires:

- Pain Assessment
- Muscle strength by dynamometry
- Postural Assessment
- Psychological Assessment

Questions:	N	%
Which side of the lesion?		
Left	12	63,16%
Which event led to the trauma of the brachial plexus?		
Motorcycle accident	16	84,21%
Performs physical therapy regularly?		
No	11	57,89%
Degree of strength to muscle test: Shoulder Abduction		
0	10	52,63%
2	3	15,79%
Degree of strength to muscle test: Elbow flexion		
0	11	57,89%
4	2	10,53%
5	1	5,26%
Referred pain after the injury?		
Yes	12	63,16%
Which suggested diagnosis?		
Upper Trunk	1	5,26%
Extended upper trunk (C5-C7)	4	21,05%
Lower Trunk	1	5,26%
C5-T1	11	57,89%
No response	2	10,53%

Barriers

- Past records: review and data collect
- Incomplete and contradictory information
- Lack of follow up and recall
- Different types of information to be uploaded (anatomic, clinical, surgical, image, electrographic)
- NES program is still being adjusted to the INDC real needs

THANK YOU

Financial Support:
FAPERJ / CAPES / CNPq / FAPESP / NeuroMat