



Leaving hospital

The return home from hospital after a brain injury is usually eagerly awaited by family members.

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What to expect

The amount of changes a family has to make will depend on the degree of brain injury. For example, in the case of a severe traumatic brain injury, the family may be taking on a full time caring role and need a wide range of supports. With a mild brain injury, an almost complete recovery might be expected but the family may need to assist the person with ongoing rehabilitation at home for behavioural issues and cognitive changes such as memory problems.

Hospital discharge information

Upon discharge, the hospital should provide a wide range of information on topics such as:

- prescriptions and medications
- cognitive changes and how to respond appropriately
- symptoms of any complications that could need urgent treatment
- activities to avoid and for how long (e.g. work, driving, drinking alcohol)

Family members can contact the hospital to ask for any information that has not been provided. Usually the social worker is the best person to provide this information.

The first few days after discharge

For the first few days after discharge, make sure you:

- ensure someone stays with you for the first two days
- can easily contact emergency services if needed
- don't drink any alcohol
- rest as much as possible and don't rush into activities

Important symptoms to watch out for

Learn as much as you can about brain disorders such as traumatic brain injury. There are various symptoms that are normal after a brain injury. These include headaches, inability to concentrate, fatigue, depression, memory problems and poor sleep. These generally do not require medical treatment but if you have any concerns consult your doctor.



However, there are symptoms that could indicate urgent treatment is needed.

Examples of these include:

- any unconscious episodes or fits
- vomiting
- increased disorientation or loss of balance
- loss of hearing in one or both ears
- changes in vision
- sudden difficulty understanding or speaking
- paralysis or weakness in the limbs
- bleeding from the ears, or clear fluid from ears or nose
- severe headaches not relieved by paracetamol.

Ongoing rehabilitation

The family plays a key role in ongoing rehabilitation once a person is discharged from hospital and formal rehabilitation has ended. The rehabilitation team should provide information about how family members can help long-term.

In some cases a person will return home after a brain injury with unrealistic expectations about how soon they can return to activities such as work and driving, if at all. The family may need to help the person slowly come to terms with their abilities and the length of time recovery can take, especially if self-awareness has been affected.

Fatigue is an extremely common problem after a brain injury.

Overdoing activities can bring on extreme fatigue that lasts several days.

Challenging behaviours can emerge after the return home due to various cognitive changes. While this can be difficult for families, having consistent appropriate responses to these behaviours will make a significant difference.

Most rehabilitation specialists recommend avoiding alcohol for at least two years, if not permanently, after a significant brain injury.

Support for family members

Family members may have to take on new roles and responsibilities as part of the changes needed to care for their loved one. For example, a person may have to take on the role of breadwinner or full time parenting for the first time, and children might be asked to help around the house more. Support is available for carers and their family.