LETTERS TO THE EDITOR

Brain banks. Do our patients know about them?☆

Banco de cerebros. ¿Conocidos por nuestros pacientes?

Over the last few years, advances in biomedical research have led to the creation of a brain bank network in Spain. These banks are distributed throughout the country in Murcia, Andalusia, Madrid, Catalonia, Navarre, the Basque Country, and Galicia. If these banks are to receive donations, our patients must be informed about the purpose and relevance of brain banks.1,2 But what do they think about them? Do they consider them useful? Have they even heard of them? The search for answers to these questions led us to frame our study’s objectives as follows: (a) evaluating to what extent our patients are aware of brain banks and understand their purpose, and (b) ascertaining patients’ attitudes (acceptance or rejection) regarding such banks. Our cross-sectional descriptive study was conducted in an urban health centre in the province of Murcia. Four residents in family and community medicine and their 4 advisors participated as researchers in our study, which was conducted between October and December 2011. Patients were randomly selected from those who came to the clinic during the study period. A total of 100 patients were included in the study sample. The variables analysed along with patients’ responses were as follows:

- Age: between 18 and 35, 12%. Between 35 and 50, 28%. Between 51 and 70, 34%. Older than 70, 26%.
- Sex: men, 32%; women, 68%.
- Marital status: single 12%, married 63%, life partner 8%, separated/divorced 9%, and widowed 8%.
- Employment status: 41% actively employed; 59% not actively employed.
- Chronic diseases: 54% yes, 46% no.
- Do you know what a brain bank is? Of the total, 32% could provide an answer and 68% could not.
- Patients who were able to answer were then asked the following questions: (a) How did you hear about them? Responses: Internet (9%), mass media (60%), through friends (12%), through health professionals (16%), and by other means (3%). (b) What is the purpose of these brain banks? Responses: To store brains for transplants (0%), to examine them in order to develop better treatments for neurological diseases (97%), to create collections (0%), and other uses (3%).

(NB: those patients who did not know about brain banks were briefly informed about them before continuing with the questionnaire).

- Do you think brain banks are useful? Yes (92%), no (2%), and no opinion (6%).
- Do any of your family members suffer from dementia? Yes (32%), no (68%).
- Would you donate your brain if you were asked to do so? Yes (59%), no (17%), undecided (24%).
- What is the main reason why you would or would not donate your brain? Among patients favourable to brain donation, 80% would do so to promote research and the other 20%, as an act of kindness and solidarity. Patients opposed to donating their brains cited fear of their bodies being manipulated even after death (64%), religious reasons (18%), or simply having no inclination to do so (18%).

This study reveals patients’ current attitudes regarding brain banks.3–5 It must be noted that only a third of our patients had heard of them, meaning that health professionals and the media should increase their efforts to provide information about the importance and purpose of brain banks. Patients do have a very positive opinion of their relevance, since 90% believe that these facilities are useful. In contrast, only slightly more than half of our patients would donate their brains if they were asked to do so. This percentage would probably be higher if brain banks received more publicity and if the population were better informed about their importance for research on neurodegenerative diseases. It is an interesting fact that most of our patients think brain banks are useful; however, far fewer of them would be willing to donate their brains. In summary, we can state that while brain donation is perceived as positive by our patients, they have received very little information about this practice.

References


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Dear Editor:

Your recent editorial on conflicts of interest and scientific publications was very interesting. I would like to share an idea regarding the statement "A declaration of relationships should be required in the communication of research, but its existence should not prejudice inappropriate conduct".1 Essentially, publishing conflict of interest statements is common practice for all journals. The problem resides in how to verify authors’ declarations. Generally speaking, those involved in the journal assume that the information provided is true, and the issue therefore arises in cases where statements are incomplete. I completely agree that other types of misconduct may exist, and that other issues related to conflict of interest may also come up. Despite complicated declaration forms, it is impossible to prevent authors from hiding their conflicts. How then can the problem be solved? Firstly, an additional system for detecting conflicts of interest must be in place, such as using an online tool to search for potential conflicts of interest related to the author (for example, mentioning specific products, working as a consultant, etc.). Secondly, providing referees with some information about the author may be useful for identifying possible conflicts of interest. Some may argue that this practice could create reviewer bias and affect the decision-making process for the document submitted. However, this step could be taken after the article has been accepted, for the purpose of checking for undeclared conflicts of interest. Lastly, the process used to check for undeclared conflicts of interest should be comparable to processes for detecting other types of inappropriate conduct, such as plagiarism.

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### Declaration of conflicts of interest

Declaración sobre el conflicto de intereses

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### Subdural haematoma secondary to epidural anaesthesia. A rare complication

Haematoma subdural secundario a anestesia epidural. Una complicación infrecuente

Dear Editor:

Intracranial subdural haematoma (SH) rarely presents as a complication of epidural anaesthesia, although we do find cases in the literature. If the dura mater is punctured during this procedure, there is a risk that SH will occur, and that risk may be related to cerebrospinal fluid (CSF) hypotension syndrome.

Symptoms of SH are linked to the mass effect and displacement of structures, and they depend on the patient’s age; haematoma location, size, and speed of onset; the patient’s prior clinical condition; and the compression of intracranial structures. Distinguishing CSF hypotension syndrome from SH due to intracranial hypertension may be difficult in differential diagnosis, and this can be an obstacle to diagnosing the condition early.

We present the case of a patient with no relevant personal history who presented a SH secondary to the epidural anaesthesia received during childbirth.

A 27-year-old woman came to our hospital’s emergency department on 2 consecutive occasions due to a frontal and occipital headache that increased while standing and