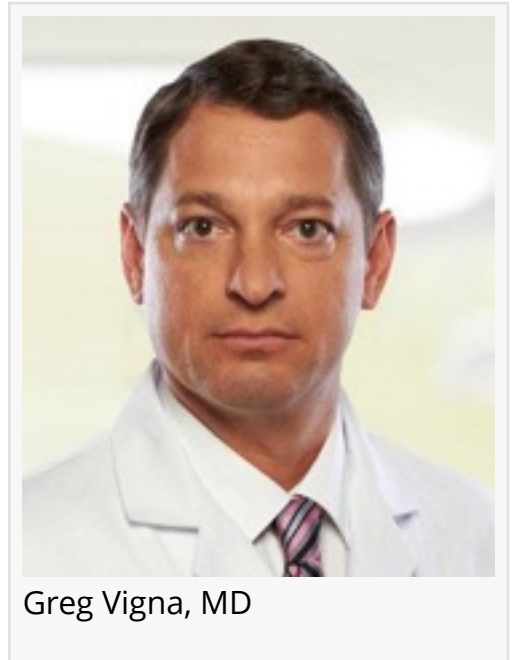


Neonatal Hypoxia and Therapeutic Cooling: The Survivors Without Cerebral Palsy are at Risk

Therapeutic cooling reduces cerebral palsy risk but may lead to cognitive and motor impairments, emphasizing the need for early MRI testing and intervention

SANTA BARBARA, CA, UNITED STATES, March 27, 2025 /EINPresswire.com/ -- "The literature shows that 79% of those who underwent therapeutic cooling for hypoxic-ischemic encephalopathy do not have cerebral palsy. Unfortunately, nearly a quarter of those have cognitive impairment and are at risk for motor impairments," states [Greg Vigna, MD, JD](#), Board Certified Physical Medicine and Rehabilitation.

Dr. Greg Vigna, national birth injury attorney, states, "There are important studies that reveal objective evidence that children who require therapeutic cooling have an increased risk of cognitive and motor impairment that correlate with objective evidence of brain damage on advanced MRI's with volumetric analysis. This allows for early diagnosis and treatment of the children who aren't diagnosed with cerebral palsy and are most at risk for adverse neurodevelopmental outcomes."



Greg Vigna, MD

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Hypoxic brain injuries are serious injuries, and objective testing, such as diffusion MRI with volumetric assessment, is crucial to rule out hypoxic brain injury in those with normal CT scans and MRI.”

Greg Vigna, MD

What does Dr. Arthur P.C. Spencer report in his article “Brain volumes and functional outcomes in children without cerebral palsy after therapeutic hypothermia for neonatal hypoxic-ischaemic encephalopathy” published in *Dev Med Child Neurol.* 2023; 65:367-375?:

“In patients, hippocampal and thalamic volumes correlated with full-scale IQ and MABC-2 total score (Motor Ability) independent of age, sex, and total brain volume.

Interpretation: Children who underwent therapeutic hypothermia have reduced whole-brain grey and white-

matter volumes, with associations between hippocampal and thalamic volumes and functional outcomes.”

Read Dr. Spencer’s article: <https://pubmed.ncbi.nlm.nih.gov/35907252/>

Dr. Vigna states, “This study showed that children who required therapeutic cooling had lower whole-brain volumes compared with children without a history of birth asphyxia. Additionally, cognitive and motor skills were correlated with hippocampal and thalamic volumes. Whole-brain volumes appear to be a sensitive indicator of hypoxic brain damage as there is structural brain damage. The hippocampal region does not appear to be as protected with therapeutic cooling as other parts of the brain, and children with decreased hippocampal and thalamic volumes are most at risk for difficulties in school.”

Dr. Vigna concludes, “My law firm provides case evaluations with an in-house Board Certified in Obstetrics and Gynecology to understand the events related to the birth. Hypoxic brain injuries are serious injuries, and objective testing, such as diffusion MRI with volumetric assessment, is necessary to rule out a hypoxic brain injury in those with normal CT scans and MRI of the brain. Brain injuries come in many forms. Objective testing is available. This is about early intervention and compensation for the negligent acts of others.”

Read Dr. Vigna’s book, [‘The Mother’s Guide to Birth Injury’](#).

Dr. Vigna is a California and Washington DC lawyer who focuses on neurological injuries caused by medical negligence including birth injury. He is Board Certified in Physical Medicine and Rehabilitation. Dr. Vigna co-counsels with [Ben Martin Law Group](#), a national pharmaceutical injury law firm and birth injury lawyer in Dallas, Texas.

Click here to learn more: <https://vignallawgroup.com/practice-areas/birth-injuries/>

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