



Optimism Bias in Neurocritical Care and Neurotrauma: The Proof is in the Pudding!

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Our optimistic behaviors are not key elements to plan future actions. Optimistic thoughts lead us to feel fuller of vitality and better face problems and future challenges. Positive thoughts seem to help make better decisions. The optimistic bias has been described in nature including in some species such as rats and birds.¹ This bias causes us to consider that we have unreasonably optimistic expectations or that we are invulnerable; this last one is very relevant in medicine; we believe that negative situations are no less probable in our hands. The overoptimistic thoughts about the future of social liking lead to significantly more desirable than undesirable outcomes.² That might not be true in the practice of medicine as real expectations with no counter-transference are required to provide the best clinical judgment and ultimately the management.

Neurocritical care medicine is a highly complex practice. Technological advancements can lead to complex decision-making. The optimism bias element cannot be ignored with normal hemodynamic numbers, normal pulmonary status, and normal laboratory findings. The bias can be viewed with some risk determinants. These can be absolute risks like extensive resuscitation translate to survival vs comparative

risk where comparison is done with similar situations.³ This bias can be negative where the concept of the glass half empty is more obvious with prognosis and outcomes are seen as much worse.

In conclusion, optimism bias is considered to be part of normal human behavior. It can have a positive or negative influence on decision-making. Neurointensivists are susceptible to this phenomenon due to the complex nature of the practice. Exposure and understanding are required in the early phase of training. With experience, the optimism bias can become subtle and not as clear.

Conflict of Interest

None declared.

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