



Management of subarachnoid hemorrhage in the medical emergency departement of the oran university hospital

Authors : Soulef Bousbia, Soumia Benbernou, Nabil Ghomari, Khalida Bouyacoub, Abdelkader Azza, Ryad mounen Ayoun, Houria Mokhtari Djebli

Introduction:

Subarachnoid hemorrhage, or non-traumatic subarachnoid hemorrhage (HSA) is defined as extravasation of blood into the subarachnoid space. Globally, the incidence is 2 to 16 cases per 100,000 population. The average age of patients with ASA is around 40 years old with a predominance of women (around 60% women). (1) It is characterized by acute meningeal syndrome (sudden thunderclap headache).

The definitive diagnosis is based on brain imaging: CT or MRI of the brain. The ruptured brain aneurysm is the most common cause (85%). (1) In Algeria, its incidence remains unknown. It is with this in mind that we have carried out this work in order to determine the frequency, clinical, etiological and progressive profile of subarachnoid hemorrhages hospitalized in the UMC department of CHUOran.

Material and methods:

It is a descriptive retrospective study which focuses on the epidemiological, clinical, therapeutic and evolutionary data of patients admitted for spontaneous (non-traumatic) HSA to the medical emergency and intensive care unit of the Oran university hospital for two successive years from January 01 2014 to December 31, 2015

Results :

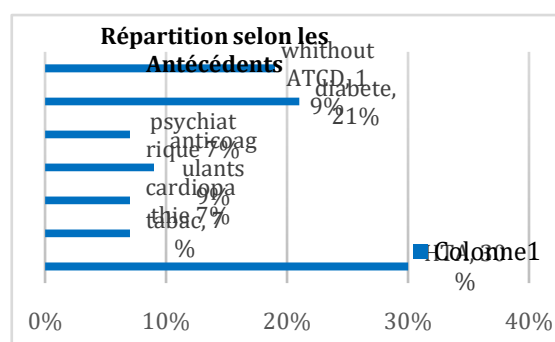
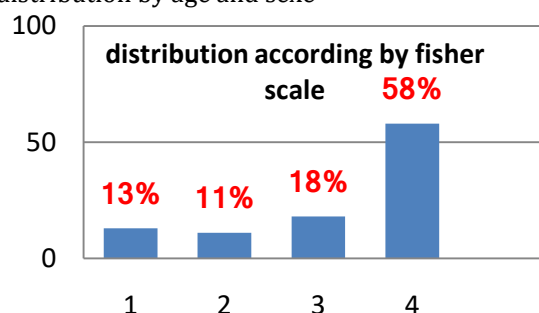
During this period 45 patients were admitted to the Medical Emergencies and Resuscitation department of the ORAN university hospital for spontaneous HSA.

Which represents 3.7% of all strokes
The pathology affected more women than men in our study.

The sex ratio was 0.8. (20 M / 25 F)



distribution by age and sexe



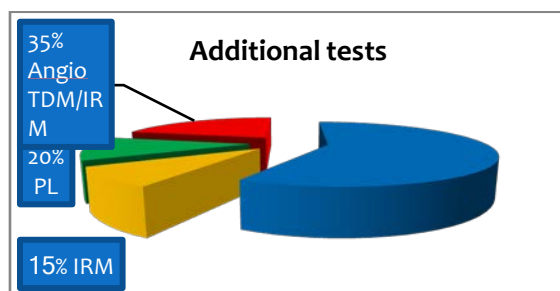
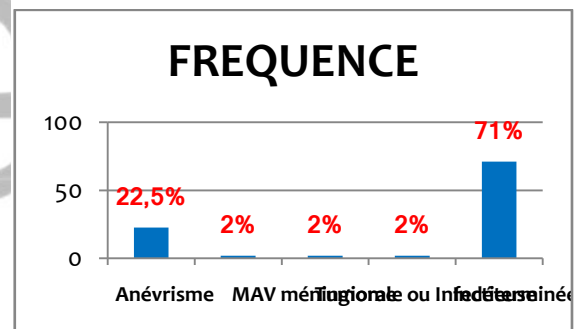
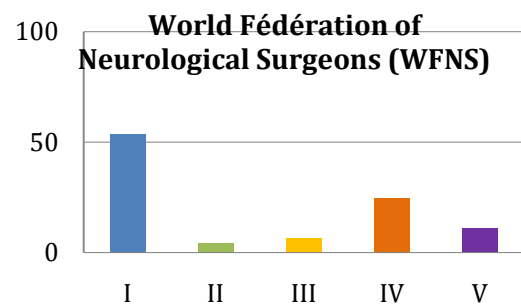
Médical

- Treatment of headaches: Acupan by parenteral route; Effergal codeine; or Tramadol orally.
- Hydration based on physiological serum.
- Prevention of Vasospasm: 28 patients out of 45 were put on Nimodipine at a rate of 2cp / 04h. Prevention of secondary attacks of systemic origin

Chirurgical

- A patient is operated on for meningioma; Two patients operated for arterial aneurysm: clipping.
- In our study, 09 patients presented with Hydrocephalus; of which 06 have benefited from a DVE of rescue.

COMPLICATIONS	Nombre patients	%
Vasospasme	11	25%
Cardiaques et Hémodynamiques	21	47%
Respiratoires	04	09%
Métaboliques et Electrolytiques	20	45%
Crises convulsives	03	07%
Ressaignement	02	05%
Hydrocéphalie	09	20%



Evolution:

25 patients left alive, ie (55.5%). 20 patients died (44.5%). In our study 19 patients were scored (III to V) on WFNS: - 15 patients died (i.e. 79%) - 04 living patients (21%).

discussion:

ASH is a form of stroke that occurs in young people since the age group most affected is between 40-50 years in both sexes; in men the average age is 49.9 years; in women the average age is 55.76 years.

HSA is predominant in women with a sex ratio of 0.8. the involvement of hormonal factors has been suggested to explain this disproportion between the sexes in the literature. The risk attributed to hypertension remains very high.

This is the most common risk factor; with a frequency of 30%. According to the literature; Hypertension and tobacco are not causal factors, but the occurrence of HSA by rupture of an aneurysm should lead the patient to quit smoking and to strict BP control. In our study approach; 20% of the patients did not present any particular ATCD.

Brain CT is the additional emergency diagnostic test of choice. Its normality does not rule out the HSA. 14% of our patients had normal CT. (In the literature, CT is normal in 20% of ASH cases) Faced with strong clinical suspicion; 20% of patients underwent a PL and 15% of a brain MRI In our study 44.5% of the patients died; the Monica study shows a mortality rate of 40%. (2) Hydrocephalus is a complication of poor prognosis; 67% of patients who presented with hydrocephalus died.

Conclusion :

Meningeal hemorrhage is a serious condition. Performing an emergency CT, etiological research and specific management are the guarantors of good

management. The care system should develop in Algeria

Bibliographie

1- Pr Gérard Audibert, Dr Antoine Baumann. Hemorragie méningée. SFAR 2016

2 - Ingall, T., K. Asplund, M. Mahonen, and R. Bonita, A multinational comparison of subarachnoid hemorrhage epidemiology in the WHO MONICA stroke study. Stroke., 2000. 31: p. 1054-61.

GSJ