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CT blend sign is closely associated with the post-operative re-haemorrhage in patients with hypertensive ICH

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Intracranial post-operative re-haemorrhage is an important complication in patients with hypertensive intra-cerebral haemorrhage (ICH). The purpose of the present study was to determine the value of the computed tomography (CT) blend sign in predicting post-operative re-haemorrhage in patients with ICH. In this study, a total of 126 patients with ICH were included in the present study. All the patients underwent standard stereotactic minimally invasive surgery (MIS) to remove the ICH within 24 hours following admission. There were 41 patients with a blend sign on initial CT and 85 patients without a blend sign on the initial CT. Multivariable logistic regression analyses were performed to assess the relationship between the presence of the blend sign on the non-enhanced admission CT scan and post-operative re-haemorrhage. Post-operative re-haemorrhage occurred in 24 of the 41 patients with the blend sign, and in 9 of the 85 patients without the blend sign. The incidence of re-haemorrhage was significantly different between the groups. The multivariate logistic regression analysis demonstrated that the initial Glasgow coma scale score (p=0.002) and blend sign (P 0.00) on the initial CT scan are independent predictors of post-operative re-haemorrhage. The sensitivity, specificity, and positive and negative predictive values of the blend sign for predicting post-operative re-haemorrhage were 72.7%, 81.7%, 58.5% and 89.4%, respectively. The presence of the blend sign on the initial CT scan is closely associated with post-operative re-haemorrhage in patients with ICH who undergo stereotactic MIS.

Biography

Guofeng Wu completed his PhD from Fudan University. He is the Director of Emergency Department, Affiliated Hospital of Guizhou Medical University. He is serving as an Associate Editor of Neuropsychiatry. He has published more than 100 papers relating to epilepsy and intra-cerebral hemorrhage. He has undertaken several projects regarding intractable epilepsy and minimally invasive surgery for intra-cerebral hemorrhage evacuation. He is now the Chairman of the Professional Committee of Neuro-emergency of Emergency Medicine Branch, Chinese Medical Doctor Association. He is also the Standing Committee Member of Emergency Medicine Branch, Chinese Stroke Society as well as the Chairman of the Professional Committee for Epilepsy of Guizhou Preventive Medicine Association. He won the Guizhou Provincial Science and Technology Progress Award in 2015, and the Science and Technology Progress Award of Chinese Ministry of Education in 2014.

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