

Outcome of external ventricular drainage in spontaneous intracerebral hemorrhage with ventricular extension in different GCS score

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Background: Intracerebral Haemorrhage (ICH) is a medical emergency of the highest degree with frequent early neurological deterioration or death. External ventricular drainage (EVD) is the procedure of choice for the treatment of spontaneous intracerebral haemorrhage with ventricular extension or blood within the ventricles, acute hydrocephalus and increased intracranial pressure in patients of intracerebral haemorrhage and subarachnoid haemorrhage (SAH) with hydrocephalus and its sequelae.

Objective: The aim and objective of this study was to predict the outcome of pre operative GCS (Glasgow Coma Scale) following external ventricular drainage in spontaneous intracerebral haemorrhage with ventricular extension.

Method: In this was prospective observational studies, a total number of 60 cases were taken purposively for a period of July 2015-March 2017 diagnosed by CT scan of brain at Department of Neurosurgery, Dhaka Medical College Hospital. All the patients, fulfilling the inclusion and exclusion criteria, were enrolled for the study. For assessing outcome of EVD in post operative patients and evaluating the efficacy of EVD surgery in follow ups. Glasgow Coma Scale (GCS) and Glasgow Outcome Scale (GOS) scoring method for patient assessment were used for outcome of EVD surgery.

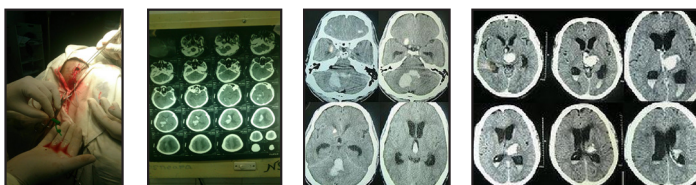
Result: A total of 60 patients were included in this study, age range was 45 to 86 years. Majority patients, 24 (40.0%) were from 61-70 years of age. The mean age was found 62.0±20. It was observed that 24 (40.00%) patients had GCS 5. GCS 6 was observed in 14(23.33%) patients. GCS 5 and 6 were not found post operatively in any cases. GCS 7 was observed in 14 (23.33%) cases. Whereas, GCS 8, 9, 10 were found in 11 (18.33%), 13 (21.66%), 10(16.66%) cases respectively and 4 cases were died on first post operative day. In most cases GCS level raised to 2 points. GOS at 7th POD died total 12 (20.00%) cases. It was observed that 48 (80.00%) patients were alive. Moderate disability existed in 12(25.00%) cases. Again, severe disability and persistent vegetative cases observed in 14(29.16%), 9(18.75%) cases. Glasgow Outcome Scale at 3 months follow up of my study patients, it was observed that total died patients 16 (26.66%).

Conclusion: According to my study, majority of the study patients survived following EVD in spontaneous ICH with ventricular extension, but most cases was unfavourable outcome which was statistically not significant (as p value > 0.05) and GCS score raised 2 in majority cases in the study subjects.

Biography

Md Mahamudul Haque Morshed, completed MBBS very good from Sher-e-Bangla Medical College, Bangladesh in 2002. After passed MBBS joined Bangladesh Civil Service (BCS Health), worked various hospitals, and give services to poor people's of Bangladesh. He was very much interested in Neurosurgical field from very beginning, and completed MS (Neurosurgery) in 2018, from DHAKA MEDICAL COLLEGE HOSPITAL, under DHAKA UNIVERSITY, BANGLADESH. He attend conference and workshop of neurosurgery in various countries in the world. He is now working as a neurosurgeon in Dhaka Medical College hospital and honorary consultant Neurosurgeon in Delta Medical College Hospital, Bangladesh.

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Spontaneous ICH on axial CT scan and EVD surgery