Is Craniotomy for Intracerebral Hemorrhage Treated Properly in the Latest AHA Guideline?

To the Editor:

Beneficial effects of the surgical intervention, especially craniotomy, for the treatment of patients with putaminal hemorrhage, is inconclusive. In the recent issue of Stroke,1 guidelines for the treatment of spontaneous intracerebral hemorrhage were presented. Craniotomy for the supratentorial intracerebral hemorrhage was placed Class III, not beneficial, except for the superficial lobar hemorrhage.

Such a recommendation must be drawn from the results of the international STICH study,2 in which early surgical intervention yielded only marginal insignificant benefit in mortality and morbidity over initial conservative treatment. It should be noted, however, that one fourth of the initial conservative treatment group eventually had surgery within 99 hours of ictus. Initial conservative treatment policy therefore maintained just the equal levels of outcome as early surgical intervention policy, only when surgical intervention with an average time lag of 30 hours was added in a significant number of the cases.

From this point of view, placement of craniotomy for the intracerebral hemorrhage in Class III category is misleading for the physicians treating stroke patients and also for the families of the stroke patients.

Disclosures

None.

Eiharu Morikawa, MD, DMSc
Section of Cerebrovascular Surgery
Stroke Center
Saitama Medical University International Medical Center
Hidakashi, Saitama, Japan


Is Craniotomy for Intracerebral Hemorrhage Treated Properly in the Latest AHA Guideline?
Eiharu Morikawa

*Stroke*. 2008;39:e69; originally published online February 28, 2008;
doi: 10.1161/STROKEAHA.107.503623

*Stroke* is published by the American Heart Association, 7272 Greenville Avenue, Dallas, TX 75231
Copyright © 2008 American Heart Association, Inc. All rights reserved.
Print ISSN: 0039-2499. Online ISSN: 1524-4628

The online version of this article, along with updated information and services, is located on the World Wide Web at:
http://stroke.ahajournals.org/content/39/4/e69

Permissions: Requests for permissions to reproduce figures, tables, or portions of articles originally published in *Stroke* can be obtained via RightsLink, a service of the Copyright Clearance Center, not the Editorial Office. Once the online version of the published article for which permission is being requested is located, click Request Permissions in the middle column of the Web page under Services. Further information about this process is available in the Permissions and Rights Question and Answer document.

Reprints: Information about reprints can be found online at:
http://www.lww.com/reprints

Subscriptions: Information about subscribing to *Stroke* is online at:
http://stroke.ahajournals.org/subscriptions/