
FELIX HENDRIK PAHL**

The present study was designed to define prognostic factors related to subarachnoid haemorrhage (SAH) in the early clinical evaluation of patients.

In order to define the prognostic factors, 268 consecutive and non selected patients with SAH from a ruptured aneurysm or from idiopathic origin (ISAH) were studied. Patients were initially divided into two groups according to the origin of the SAH. The first group of patients was formed by those with SAH secondary to a ruptured aneurysm and the second group, formed by those with ISAH.

The outcome of these two groups was analysed according to the Glasgow outcome scale. The statistical method used to define prognostic factors was the chi-square method.

The casuistics was studied in three different periods, so called “evaluation moments”, representing the moments the neurosurgeon examines the patients. The first moment evaluates the casuistics considering only the clinical history, the general physical examination and the neurological examination. The second moment evaluates the casuistics considering the same of the first plus the results of the computerized tomography scan (CT). The third moment considers all phases of diagnosis and treatment of the SAH. The statistical method used was a multivariate model using logistic regression analysis.

The results of the univariate analysis converge to two points that are important to establish the prognosis in SAH: the first neurologic examination and the intensity of the initial bleeding measured on the CT. They are the important factors that will determine prognosis. The severity of findings in the neurological examination and the intensity of the bleeding are significatively related to poor prognosis.

The results of the multivariate analysis give similar conclusions. In relation to the first moment, the multivariate analysis selected only the neurologic examination as a significant prognostic factor. In the second moment, the significative variables were the neurologic examination and the intensity of the bleeding on the CT. In the third moment, again the significative variables were the neurologic examination and the intensity of the bleeding on the CT.

In conclusion, it can be said that the prognosis for this group of patients can be predicted in all moments of the evaluation and treatment, and that the prognosis is dependent on the first neurologic examination and on the intensity of the bleeding on the CT.

KEY WORDS: subarachnoid hemorrhage, primary, aneurysm rupture; prognostic factors evaluation, neurological examination, CT scan findings.


**Address: Praça Amadeu Amaral 47 conj 112 - 01327-010 São Paulo SP - Brasil.