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Service (sector) Retina and Vitreous

Nº CEP

INTRACRANIAL HEMORRHAGE AND TERSON SYNDROME: A PROSPECTIVE STUDY

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Purpose: To analyze the incidence, clinical course, ophthalmic findings, and prognosis of the patients with intracranial bleeding and Terson's syndrome.

Methods: A prospective, consecutive study of patients admitted to the Emergency Room with the diagnosis of acute subarachnoid hemorrhage. Neurological and funduscopic examination were performed upon admission and days 3, 7, 30 and 60. In all cases, the diagnosis of intracranial bleeding was made by computerized tomography and the clinical condition was graded according to the Hunt and Hess, and Glasgow scales. Ocular examination was done using binocular indirect ophthalmoscope under mydrasis.

Results: Seventeen patients were enrolled in this study from July to October 2000. Terson's syndrome was diagnosed in 5 patients (29.4%). Fifteen cases were associated with ruptured cerebral aneurysms, and the remaining two with head trauma. There was no gender preponderance (9F: 8M) and the median age was 48 years. Four out of five patients (80%) with Terson's syndrome passed away due to intracranial complications, whereas 12 patients with intracranial bleeding and no ocular involvements survived. The leading cause of mortality was the rebleeding. The ophthalmoscopic findings included intraretinal bleeding (3 cases), intraretinal associated with subhyaloid hemorrhage (1 case) and intaretinal hemorrhage with cotton wool spots (1 case).

Conclusion: The incidence of Terson's syndrome was 29.4% and was associated with high mortality rate. This study suggests that Terson's syndrome is a life-threatening entity, mainly due to intracranial rebleeding, and the main ocular finding were intraretinal bleeding, subhyaloid hemorrhage and cottonwool spots confined to the juxtapapillary and macular areas.