

R1 R2 R3 PG0 PG1 Estagiário Tecnólogo
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Service (sector) Retina and Vitreous N° CEP

**TERSON SYNDROME AS INDICATIVE FACTOR OF LIFE
THREATING** Song SE, Bordon AF, Sallum JK, Farah ME.

PURPOSE To evaluate the life prognosis of patients with subarachnoid hemorrhage compared to patients with Terson's Syndrome.

METHODS A prospective, consecutive study of patients admitted to the Emergency Room with the diagnosis of acute subarachnoid hemorrhage. Neurological and fundoscopic 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 clinical condition was graded according to the Hunt and Hess and Glasgow scales. Ocular examination was done using binocular indirect ophthalmoscope under mydriasis.

RESULTS Fifty patients with the diagnosis of subarachnoid hemorrhage were enrolled. Terson's syndrome was diagnosed in 15 patients (30%). Forty seven cases were associated with ruptured aneurysms and 3 cases with head trauma. Among patients with Terson's syndrome 7 patients (46,7%) passed away, whereas only 3 (8,6%) without Terson's syndrome died. Ocular findings in Terson's syndrome were: pre retinal hemorrhage, intraretinal, subretinal, and vitreous hemorrhage. Associated ocular findings included third nerve palsy, papilledema, and subconjunctival hemorrhage.

CONCLUSIONS The presence of Terson's syndrome has significantly increased the mortality rate (46,7% versus 8,6%; $p < 0,01$). Therefore, all patients with the diagnosis of intracranial hemorrhage should undergo a dilated fundoscopic examination, as the presence of intraocular hemorrhage, ie Terson's Syndrome; has a life threatening prognostic value.