

## عنوان مقاله:

The Comparative Study of ECG Findings in the Patients Suffered from Subarachnoid Hemorrhage and Control Group in Northeastern Iran

## محل انتشار:

مجله ایمنی و بهبود بیمار، دوره 3، شماره 2 (سال: 1394)

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## خلاصه مقاله:

**Introduction:** Subarachnoid Hemorrhage (SAH) which accounts for (5% to 10%) of cerebrovascular accidents is an important cause of mortality and disability. It can be complicated by many neurological and medical conditions including cardiovascular complications. During the course of SAH morphologic Electrocardiography (ECG) changes, arrhythmias, myocardial injury and elevation of cardiac enzymes, subendocardial hemorrhage and necrosis may be observed. **Materials and Methods:** 102 SAH patients, without any history of Ischemic heart Disease (IHD), admitted in Ghaem Hospital were studied. Their clinical and radiological parameters were evaluated. Three serial ECGs were performed within the first 72 hours for each patient and the ECG findings were analyzed. The control group consisted of 102 elective patients of Ghaem hospital without any expected heart disease. **Results:** ECG changes were observed in 60.8% of SAH patients with average age of  $(53.4 \pm 14.2)$  years and in (2.9%) of control group. The ECG findings were as follows: chamber abnormalities (6.9%), conduction abnormalities (7.8%), repolarization abnormalities (49%), rhythm abnormalities (22.5%) and pathologic Q wave (6.9%). According to this study, ECG changes are related to subarachnoid hemorrhage ( $p < 0.01$ ). ECG changes are independent from age and sex but they are related to clinical grading and mortality of SAH patients ( $P < 0.01$ ). ECG changes are related to presence of intracranial aneurysm ( $p < 0.05$ ). **Conclusion:** Our clinical, radiological and ECG findings are compatible with the previous studies. In this study, ECG findings in subarachnoid hemorrhage are related to the prognosis and to presence of intracranial aneurysm.

## کلمات کلیدی:

Aneurysm, Electrocardiography, Subarachnoid Hemorrhage

لینک ثابت مقاله در پایگاه سیویلیکا:

