Cerebral angiography for subarachnoid hemorrhage

The knowledge from digital subtraction angiography (DSA) guides both definitive therapy and perioperative management based on the number, size and location of aneurysm and status of collateral circulation and vasospasm.

Hemogram, renal and hepatic function, electrolytes, coagulation status, electrocardiogram (ECG), echocardiogram and chest radiograph provides information about systemic effects of aSAH.

Certain patterns of SAH are associated with a low yield of abnormalities on repeat imaging if the initial angiography is normal. The pattern of hemorrhage on the presenting CT should be used to guide the most appropriate use of further imaging modalities and present a diagnostic algorithm for this purpose [1)].

Transcranial Doppler (TCD) and ICP monitoring also help evaluation and management.

see Angiographically negative subarachnoid hemorrhage

1)
Yap L, Dyde RA, Hodgson TJ, Patel UJ, Coley SC. Spontaneous subarachnoid hemorrhage and negative initial vascular imaging-should further investigation depend upon the pattern of hemorrhage on the presenting CT? Acta Neurochir (Wien). 2015 Jul 16. [Epub ahead of print] PubMed PMID: 26174752.