Hypoperfusion Intensity Ratio (HIR)

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Hypoperfusion Intensity Ratio (HIR) is a cerebral perfusion imaging biomarker used in acute ischemic stroke to quantify the severity of hypoperfusion and assess collateral blood flow.

Definition

HIR = Volume of tissue with Tmax >10 seconds / Volume of tissue with Tmax >6 seconds

- **Tmax** >6 sec: represents all hypoperfused tissue (potentially salvageable penumbra).
- **Tmax** >10 sec: represents severely hypoperfused tissue (more likely to become infarct core).

Interpretation

- High HIR (~1):
 - A large portion of hypoperfused tissue is severely delayed.
 - Indicates poor collateral flow.
 - $\circ\,$ Associated with greater infarct growth and worse clinical outcome.
- Low HIR (~0):
 - $\circ\,$ Most of the hypoperfused tissue has only moderate delay.
 - Suggests good collateral circulation.
 - $\circ\,$ Associated with better response to reperfusion therapies.

Clinical Relevance

HIR is used alongside other imaging parameters (CBF, CBV, core/penumbra mismatch) to:

- Predict infarct growth and clinical outcomes.
- Select patients for endovascular therapy in extended time windows (e.g., DEFUSE 3, DAWN).
- Guide treatment decisions when standard time-based criteria are insufficient.

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Last update: 2025/07/10 20:23

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