

Intrahospital transfer

Intrahospital transfer (IHT), a routine in the management of neurocritical patients requiring imaging or interventions, might affect brain metabolism. Studies about IHT effects using microdialysis (MD) have produced conflicting results. In these studies, only the most damaged hemisphere was monitored, and those may not reflect the impact of IHT on overall brain metabolism, nor do they address differences between the hemispheres. Herein we aimed to quantify the effect of IHT on brain metabolism by monitoring both hemispheres with bilateral MD. In this study, 27 patients with severe brain injury (10 traumatic brain injury and 17 subarachnoid hemorrhage patients) were included, with a total of 67 IHT. Glucose, glycerol, pyruvate and lactate were measured by MD in both hemispheres for 10 h pre- and post-IHT. Alterations in metabolite levels after IHT were observed on both hemispheres; although these changes were more marked in hemisphere A (most damaged) than B (less damaged). Our results suggest that brain metabolism is altered after an IHT of neurocritical ill patients particularly but not limited to the damaged hemisphere. Bilateral monitorization may be more sensitive than unilateral monitorization for detecting metabolic disturbances not directly related to the course of the disease ¹⁾.

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Pedrosa L, Hoyos J, Reyes L, Mosteiro A, Zattera L, Topczewski T, Rodríguez-Hernández A, Amaro S, Torné R, Enseñat J. Brain metabolism response to intrahospital transfers in neurocritical ill patients and the impact of microdialysis probe location. *Sci Rep.* 2024 Mar 28;14(1):7388. doi: 10.1038/s41598-024-57217-5. PMID: 38548829; PMCID: PMC10978944.

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