

# Queen Elizabeth University Hospital-Southern General Hospital

[Queen Elizabeth University Hospital, Glasgow, United Kingdom](#)

The Neurosurgery unit for Glasgow is based at the Institute of Neurosciences in the Southern General Hospital, Glasgow. The Institute of Neurological Sciences provides Neurosurgical, Neurological, Clinical Neurophysiology, Neuroradiology and Neuropathology facilities for the West of Scotland. It serves a population of 2.7million.

The neurosurgical department comprises three wards (Wards 63, 64 and 65), with 66 beds and an ITU and HDU facility catering for a further 12 patients. There are three dedicated neurosurgical theatres.

There is an outpatients clinic within the unit where consultant-led neurosurgery clinics are held on a daily basis. There are also clinics run by Extended Scope Physiotherapy Practitioners.

The Institute is equipped with two Magnetic Resonance Imaging Suites, SPECT Scanner, two Computerised Axial Tomography Scanners, and angiography facilities.

There are currently 14 neurosurgeons based in the unit. Approximately 60% of the unit's workload is emergency care. The adult unit has close links with the Royal Hospital for Sick Children, Glasgow. Four consultants work between the adult unit and the children's unit at Yorkhill hospital. In 2015 the children's hospital will move to the new hospital at the Southern General.

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## Publications

1: Amiraraghi N, Gaggini M, Crowther JA, Locke R, Taylor W, Kontorinis G. Benefits of pre-labyrinthectomy intratympanic gentamicin: contralateral vestibular responses. J Laryngol Otol. 2019

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6: Molinari E, Curran OE, Grant R. Clinical importance of molecular markers of adult diffuse glioma. *Pract Neurol.* 2019 Jun 6. pii: practneurol-2018-002116. doi: 10.1136/practneurol-2018-002116. [Epub ahead of print] PubMed PMID: 31175262.

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9: Seiffge DJ, Paciaroni M, Wilson D, Koga M, Macha K, Cappellari M, Schaedelin S, Shakeshaft C, Takagi M, Tsivgoulis G, Bonetti B, Kallmünzer B, Arihiro S, Alberti A, Polymeris AA, Ambler G, Yoshimura S, Venti M, Bonati LH, Muir KW, Yamagami H, Thilemann S, Altavilla R, Peters N, Inoue M, Bobinger T, Agnelli G, Brown MM, Sato S, Acciarresi M, Jager HR, Bovi P, Schwab S, Lyrer P, Caso V, Toyoda K, Werring DJ, Engelte ST, De Marchis GM; CROMIS-2, RAF, RAF-DOAC, SAMURAI, NOACISP LONGTERM, Erlangen and Verona registry collaborators. Direct oral anticoagulants versus vitamin K antagonists after recent ischemic stroke in patients with atrial fibrillation. *Ann Neurol.* 2019 Jun;85(6):823-834. doi: 10.1002/ana.25489. Epub 2019 Apr 30. PubMed PMID: 30980560; PubMed Central PMCID: PMC6563449.

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13: Banerjee G, Chan E, Ambler G, Wilson D, Cipolotti L, Shakeshaft C, Cohen H, Yousry T, Lip GYH, Muir KW, Brown MM, Jäger HR, Werring DJ; CROMIS-2 collaborators. Effect of small-vessel disease on cognitive trajectory after atrial fibrillation-related ischaemic stroke or TIA. *J Neurol.* 2019 May;266(5):1250-1259. doi: 10.1007/s00415-019-09256-6. Epub 2019 Mar 7. PubMed PMID: 30847646; PubMed Central PMCID: PMC6469837.

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