

# STICH2

The Surgical Trial in [Intracerebral Hemorrhage \(STICH\)](#) has failed to provide positive evidence to support the effect of surgical operation, and [STICH2](#) also showed no benefit (NCT01320423) <sup>1) 2)</sup>.

The STICH2 results confirm that early surgery does not increase the rate of death or disability at 6 months and might have a small but clinically relevant survival advantage for patients with spontaneous superficial intracerebral haemorrhage without intraventricular haemorrhage <sup>3)</sup>

<sup>1)</sup>

Mendelow AD, Gregson BA, Fernandes HM, Murray GD, Teasdale GM, Hope DT, et al. Early surgery versus initial conservative treatment in patients with spontaneous supratentorial intracerebral haematomas in the International Surgical Trial in Intracerebral Haemorrhage (STICH): a randomised trial. *Lancet*. 2005;365(9457):387–97.

<sup>2)</sup>

Mendelow AD, Gregson BA, Rowan EN, Murray GD, Gholkar A, Mitchell PM, et al. Early surgery versus initial conservative treatment in patients with spontaneous supratentorial lobar intracerebral haematomas (STICH II): a randomised trial. *Lancet*. 2013;382(9890):397–408.

<sup>3)</sup>

Mendelow AD, Gregson BA, Rowan EN, Murray GD, Gholkar A, Mitchell PM; STICH II Investigators. Early surgery versus initial conservative treatment in patients with spontaneous supratentorial lobar intracerebral haematomas (STICH II): a randomised trial. *Lancet*. 2013 Aug 3;382(9890):397–408. doi: 10.1016/S0140-6736(13)60986-1. Epub 2013 May 29. Erratum in: *Lancet*. 2013 Aug 3;382(9890):396. PubMed PMID: 23726393; PubMed Central PMCID: PMC3906609.

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