Winfried Bettag

22.8.1925-19.8.2018 ¹⁾.

Publications

1. Neurol Res. 1986 Dec;8(4):243-9.

Prevention of symptomatic vasospasm after SAH by constant venous infusion of nimodipine.

Grotenhuis JA, Bettag W.

Sixty-one patients with SAH due to rupture of a cerebral aneurysm, classified in Grades I to IV according to Hunt and Hess, received a constant venous infusion of Nimodipine in a dose of 2mg/h for at least 14 days, followed by an oral administration of 60 mg/6 h for at least 4 days. Patients admitted after the 6th day of SAH, patients with SAH but without aneurysm on the angiogram and patients in Grade V were excluded. Mortality in 30 patients of Grades I-II was 3.3%, in 31 patients of Grades III-IV 42%. In the latter group 1 patient died due to cerebral vasospasm. Transient vasospasm occurred in 2 patients of Grades I-II. Recovery was complete in both cases. Thus, incidence of cerebral vasospasm was 4.9%, the incidence of poor-outcome-vasospasm even only 1.6%. The syndrome of cerebral vasospasm seems to be more than only constriction of cerebral vessels. The deleterious effects of Ca2+ shift into vascular cells and into neural cells which causes irreversible damage are discussed. Early administration of a specific 'cerebral' calcium antagonist like Nimodipine after SAH will prevent the intracellular Ca2+ overloading, thus protecting the neural cells and preventing Ca2+-induced smooth-muscle contraction of cerebral vessels, which encourages ischaemic deficits after SAH. The preventive use of Nimodipine has markedly reduced the incidence of symptomatic vasospasm in our clinic.

PMID: 2880316 [Indexed for MEDLINE]

2. J Neurosurg. 1984 Aug;61(2):231-40.

Intracarotid slow bolus injection of nimodipine during angiography for treatment of cerebral vasospasm after SAH. A preliminary report.

Grotenhuis JA, Bettag W, Fiebach BJ, Dabir K.

Nimodipine was given as an intracarotid slow bolus injection in six patients with subarachnoid hemorrhage (SAH) due to rupture of a cerebral aneurysm, with angiographically demonstrated vasospasm. The patients were followed by serial angiograms for demonstration of the effect of nimodipine on vasospasm. After angiography, all patients were treated with a constant venous infusion of this new calcium antagonist. Although the therapeutic regimen was started only a few hours after onset of vasospasm, there was no change in cerebral vessel caliber detectable on angiograms following the intracarotid injection. Three patients died, two patients finally recovered with neurological deficits due to cerebral ischemia, and one patient with asymptomatic vasospasm remained symptom-free. Although nimodipine may act to prevent cerebral vasospasm after SAH, the authors believe that the intracarotid application is not effective after vasospasm has occurred.

DOI: 10.3171/jns.1984.61.2.0231 PMID: 6737047 [Indexed for MEDLINE]

3. Radiobiol Radiother (Berl). 1989;30(3):213-20.

[Radiation treatment of intracranial arteriovenous malformations–experiences with a semistereotactic technic].

[Article in German]

Makoski HB, Zeilstra DJ, Bettag W.

Since 1982 79 patients with intracranial AVM's were irradiated at linear accelerator with 10 MV photons. Diagnosis, localization and therapy were done immobilizing the head for identical positioning. In a controlled study the therapy was done with fractionated irradiation up to 50 Gy in 25 fractions within 5 weeks or with 20 Gy in 4 fractions within 7 days. Complications, due to therapy, did not occur. Suffering from convulsion was not affected. Five patients have died, one patient got a hemorrhage 36 months later. The angiographical analysis of the first 25 patients until 30 months after radiotherapy gave complete obliterations and reduction of volume in more than 50% with minor AVM's. The result are not detrimental compared with a group after photon irradiation.

PMID: 2505305 [Indexed for MEDLINE]

4. J Neurosurg. 1986 Mar; 64(3):525.

Radiotherapy of intracranial AVM's.

Zeilstra D, Bettag W, Makoski H.

PMID: 3950734 [Indexed for MEDLINE]

5. Z Gerontol. 1989 Sep-Oct;22(5):228-35.

[Normal pressure hydrocephalus in geriatric patients-a treatable form of dementia].

[Article in German]

Martin U(1), Martin M, Bettag W, Fiebach BJ, Leven B, Magnus L, Makoski HB, Wandt H.

Author information: (1)Geriatrische Klinik, Radioonkologie, Nuklearmedizin der Städtischen Kliniken Duisburg.

Six geriatric patients are presented who were treated because of normal pressure hydrocephalus. A tentative diagnosis was made if dementia, gait disturbance, and incontinence together with a typical CAT-scan were present. In these cases an operation was carried out. After ventriculo-peritoneal shunting clinical improvements were seen in four patients. Postoperative complications were hygromas in three patients and a shunt-dislocation in another patient. A chronic subdural bleeding was recorded also in one of these patients with only a temporary success in this case. Two patients showed no clinical improvement at any time. However, in these cases additional neurologic symptoms together with typical CAT-scan changes were present. Before making a decision for an operation vascular processes and Alzheimer's disease should be ruled out.

PMID: 2588764 [Indexed for MEDLINE]

6. Zentralbl Neurochir. 1957;17(3):151-5.

[Multiple cerebral aneurysms (report on a case)].

[Article in German]

GROTE W, BETTAG W.

PMID: 13497169 [Indexed for MEDLINE]

7. Fortschr Geb Rontgenstr. 1955 Oct;83(4):579-83.

[On the use of urogradin in cerebral angiography].

[Article in German]

GROTE W, BETTAG W.

PMID: 13285601 [Indexed for MEDLINE]

8. Acta Radiol Diagn (Stockh). 1972;13(1):187-94.

[Diagnostic difficulties of angiographic findings in atypically located aneurysms].

[Article in German]

Otto H, Bettag W, Löhr E, Grote W.

PMID: 4660123 [Indexed for MEDLINE]

9. Langenbecks Arch Chir. 1970 Dec;327(1):1118-24.

[Tissue substitution by means of lyophilised dura in neurosurgery].

[Article in German]

Grote W, Bettag W.

PMID: 5520933 [Indexed for MEDLINE]

10. Munch Med Wochenschr. 1972 May 5;114(18):849-57.

[Intensive care in skull injuries].

[Article in German]

Grote W, Bettag W, Bock WJ.

PMID: 4625984 [Indexed for MEDLINE]

11. Acta Neurochir (Wien). 1970 Apr 21;22(1):1-27.

[Indication, technic and results of cervical fusion].

[Article in German]

Grote W, Bettag W, Wüllenweber R.

PMID: 5444701 [Indexed for MEDLINE]

12. Neurochirurgia (Stuttg). 1975 Jan;18(1):1-11.

[Complications of anterior cervical fusion operations].

[Article in German]

Roosen K, Grote W, Bettag W.

The authors describe the technique of operation and then report about 15 intra- and post-operative complications in 360 anterior cervical fusions in 307 patients who suffered from cervical disc lesions. The complication rate was 4.16%. Apart from one case of complete but clinically reasonably well compensated recurrent paresis, all complications healed without permanent deficit. The differential diagnosis, prophylaxis and therapy of these specific operative complications are discussed.

DOI: 10.1055/s-0028-1090422 PMID: 1124139 [Indexed for MEDLINE]

13. Rofo. 1975 Jun;122(6):520-7.

[Complications of cervical discography (author's transl)].

[Article in German]

Roosen K, Bettag W, Fiebach O.

The report deals with 1,005 discographic examinations in 380 patients with a cervical syndrome. Three cases of a discitis were observed, of which two had to be regarded as complications of the examination. The aetiology, clinical features, diagnosis and differential diagnosis are described: therapeutic and prophylactic problems and possible complications are discussed. With a complication rate of 0.2%, the authors recommend contrast demonstration of the cervical disc as a supplementary radiological method for the investigation of the cervical syndrome.

DOI: 10.1055/s-0029-1230126 PMID: 125708 [Indexed for MEDLINE]

14. Chirurg. 1967 Mar;38(3):138-40.

[Management of cervical dislocation fractures through ventral fusion].

[Article in German]

Grote W, Wüllenweber R, Bettag W.

PMID: 5585738 [Indexed for MEDLINE]

15. Hippokrates. 1969 Feb 28;40(4):138-41.

[Importance of diskography in the treatment of the "cervical syndrome"].

[Article in German]

Bettag W, Grote W.

PMID: 5770361 [Indexed for MEDLINE]

16. Langenbecks Arch Chir. 1972;331(1):15-22.

[The ventral approach to the dens epistropheus].

[Article in German]

Grote W, Römer F, Bettag W.

PMID: 4626447 [Indexed for MEDLINE]

17. Klin Monbl Augenheilkd. 1973 Sep;163(3):327-31.

[Surgical management of indirect traumatic lesions of the optic nerve (author's transl)].

[Article in German]

Römer F, Müller U, Bettag W.

PMID: 4764029 [Indexed for MEDLINE]

18. Ber Zusammenkunft Dtsch Ophthalmol Ges. 1974;72:116-8.

[Surgical treatment of traumatic injuries to the optic nerve].

[Article in German]

Müller U, Bettag W, Römer F.

PMID: 4480176 [Indexed for MEDLINE]

19. Neuroradiology. 1972 Jun;4(1):30-5.

Cerebral scintigraphy in relation to roentgenological methods for detection of tumours situated in the sellar region and the posterior fossa.

Otto H, Fiebach O, Sauer J, Bettag W, Löhr E, Strötgen MW.

PMID: 5081233 [Indexed for MEDLINE]

20. Neuroradiology. 1971 Jun;2(2):102-6.

Comparative studies of cerebral scintigraphy, angiography and encephalography for detection of meningiomas.

Sauer J, Fiebach O, Otto H, Löhr E, Strötges MW, Bettag W.

PMID: 5151839 [Indexed for MEDLINE]

21. Neuroradiology. 1971 Nov;3(1):27-31.

Comparative study of brain scintiphotography, cerebral angiography and pneumencephalography in detection of gliomas.

Fiebach O, Sauer J, Otto H, Bettag W, Löhr E, Strötges MW.

PMID: 4363892 [Indexed for MEDLINE]

22. Zentralbl Neurochir. 1958;18(1):11-8.

[Diagnosis & treatment of multiple vascular brain malformations].

[Article in German]

GROTE W, BETTAG W.

PMID: 13605039 [Indexed for MEDLINE]

23. Z Allgemeinmed. 1971 Feb 28;47(6):281-3.

[L-dopa effect in Parkinson's syndrome].

[Article in German]

Römer F, Bettag W, Bock WJ.

PMID: 5571715 [Indexed for MEDLINE]

24. Acta Radiol Diagn (Stockh). 1972;13(0):813-7.

[Spinal diagnosis by aid of angiographic methods with special regard to the electronic subtraction method].

[Article in German]

Löhr E, Clar HE, Bettag W.

PMID: 4600646 [Indexed for MEDLINE]

25. Fortschr Geb Rontgenstr Nuklearmed. 1972 Jun;116(6):766-72.

[Myelo-scintigraphy in the pre-operative evaluation of space-occupying lesions in the spinal canal].

[Article in German]

Otto H, Sauer J, Fiebach O, Bettag W.

PMID: 4340395 [Indexed for MEDLINE]

26. Fortschr Geb Rontgenstr Nuklearmed. 1972:Suppl:61.

[Results of tomography of the orbit].

[Article in German]

Löhr E, Bettag W, Waubke T, Krawitz P.

PMID: 4341226 [Indexed for MEDLINE]

27. Med Welt. 1973 Jun 8;24(23):966-9.

[Indicators for and results of the stereotaxic technic].

[Article in German]

Bettag W.

PMID: 4583086 [Indexed for MEDLINE]

28. Beitr Neurochir. 1966;13:207-18.

[Results of stereotaxic operations in extrapyramidal movement disorders].

[Article in German]

Bettag W.

PMID: 5341078 [Indexed for MEDLINE]

29. Neurochirurgia (Stuttg). 1982 Mar;25(2):62-5.

[An unusual manifestation of a pineal tumour (author's transl)].

[Article in German]

Lumenta C, Bettag W.

In the last two years, out of 186 cases of brain tumours we have treated 10 tumours in the pineal region. One of these patients had a pineocytoma. The patient was admitted to our clinic with generalized epilepsy. At the time of admission there were no neurological deficits. In the CT scan we found a tumour in the pineal region with cystic extension in the right temporo-occipital region. The tumour was totally excised and the patient did well postoperatively. The only neurological sequela was a left-sided homonymous hemianopia. He resumed his former profession and is working successfully up till now. It was necessary to radiate the patient, as no tumour recurrence was demonstrated in the CT scan.

DOI: 10.1055/s-2008-1053958 PMID: 7110494 [Indexed for MEDLINE]

30. Dtsch Med Wochenschr. 1959 Dec 11;84:2256-8.

[Stereotactic operations in extrapyramidal movement disorders].

[Article in German]

BETTAG W, YOSHIDA T.

DOI: 10.1055/s-0028-1114609 PMID: 13800185 [Indexed for MEDLINE]

31. Confin Neurol. 1962;22:383-4.

Results of stereotactic interventions in extrapyramidal motor disorders.

BETTAG W, YOSHIDA T, SCHULZE E.

PMID: 13967827 [Indexed for MEDLINE]

32. Neurochirurgia (Stuttg). 1960 Dec;3:193-202.

[An aneurysm simulating a suprasellar space-occupying process and its treatment].

[Article in German]

WAPPENSCHMIDT J, BETTAG W.

DOI: 10.1055/s-0028-1095491 PMID: 13783081 [Indexed for MEDLINE]

33. Neurochirurgia (Stuttg). 1980 Nov;23(6):239-44.

[A traumatic aneurysm of the pericallosal artery (author's transl)].

[Article in German]

Meyer-Hörstgen H, Bettag W.

A case is reported of a traumatic pericallosal artery aneurysm in an eleven-year-old boy. A comparison is made with previously published cases of traumatic cerebral aneurysms. The need to consider such a diagnosis is urged in cases of delayed recovery after head injury.

DOI: 10.1055/s-2008-1053890 PMID: 7442897 [Indexed for MEDLINE]

34. Zentralbl Neurochir. 1968;29(5):241-78.

[Effect of basal ganglia on the central nervous regulation of the blood picture and electrolyte balance].

[Article in German]

Bettag W.

PMID: 4893968 [Indexed for MEDLINE]

35. Med Klin. 1974 Nov 15;69(46):1883-8.

[Operative treatment of Parkinson's disease].

[Article in German]

Bettag W.

PMID: 4614040 [Indexed for MEDLINE]

36. Z Allgemeinmed. 1973 Jun 30;49(18):887-9.

[Indication of surgical treatment of the root-compression syndrome].

[Article in German]

Bettag W.

PMID: 4728551 [Indexed for MEDLINE]

37. HNO. 1972 Feb;20(2):47-51.

[Current status of clinical practice and therapy of otogenic and rhinogenic cerebral complications. Neurosurgical viewpoints].

[Article in German]

Bettag W.

PMID: 5019160 [Indexed for MEDLINE]

38. Z Neurol. 1971;199(4):295-305.

[Endocarditis and subarachnoid hemorrhage].

[Article in German]

Agnoli A, Bettag W.

PMID: 4104833 [Indexed for MEDLINE]

39. Z Allgemeinmed. 1970 Jun 20;46(17):863-7.

[First aid and transport of patients with skull and brain injuries].

[Article in German]

Bettag W.

PMID: 5509059 [Indexed for MEDLINE]

40. Acta Neurochir (Wien). 1967;16(1):122-8.

[On the question of longer survival time in glioblastomas].

[Article in German]

Gullotta F, Bettag W.

PMID: 6032336 [Indexed for MEDLINE]

41. Confin Neurol. 1966;27(1):234-7.

[Long term observations after thalamotomies in pain and their meaning for the indication of treatment as well as the selection of destruction sites].

[Article in German]

Bettag W.

PMID: 5334015 [Indexed for MEDLINE]

42. Fortschr Neurol Psychiatr Grenzgeb. 1959 Nov;27:623-31.

[On the glioblastoma multiforme].

[Article in German]

BETTAG W.

PMID: 13800186 [Indexed for MEDLINE]

43. Munch Med Wochenschr. 1959 Feb 6;101(6):229-32.

[Renal infarcts].

[Article in German]

VAHLENSIECK W, BETTAG W.

PMID: 13644071 [Indexed for MEDLINE]

44. Dtsch Z Nervenheilkd. 1959;178(6):639-47.

[Diencephalic-autonomic epilepsy in childhood].

[Article in German]

LANG K, BETTAG W.

PMID: 13619436 [Indexed for MEDLINE]

45. Acta Neurochir (Wien). 1957;5(1):68-81.

[Chronic subdural hematomas].

[Article in German]

BETTAG W.

PMID: 13424188 [Indexed for MEDLINE]

46. Acta Neurochir Suppl (Wien). 1955;3:36-9.

[Homeoplastic covering of cranial gaps].

[Article in German]

BETTAG W.

PMID: 13301525 [Indexed for MEDLINE]

1)

Grotenhuis A. Winfried Bettag, 1925-2018. J Neurol Surg A Cent Eur Neurosurg. 2019 Jan;80(1):1-2. doi: 10.1055/s-0038-1676596. Epub 2019 Jan 10. PubMed PMID: 30630202.

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