



Information for You from Your Health Care Team

What is a subarachnoid hemorrhage? (sub-a-rak-noyd hem-oh-rij)

A subarachnoid hemorrhage (SAH) is when there is blood in the cerebrospinal fluid (CSF). The CSF is normally a clear, colorless fluid that flows around the brain to cushion and protect the brain. When there is blood in the CSF, it annoys the brain. Some people describe it as “the worst headache of your life.” Other signs of an SAH are:

- Pain in the eyes from bright lights, called “photophobia” (fo-toe-fo-bee -a)
- Throwing up
- Sleepiness
- Confusion
- Weakness on one side of the body
- *Seizure*
- *Facial numbness or droop*

How does blood get into the CSF?

Blood gets into the CSF when a blood vessel is torn or ruptures. There are many reasons a blood vessel may tear. Some of the more common ones are:

- Substance abuse, such as inhaling cocaine
- Trauma, such as a car accident
- Aneurysm (an-yer-ism), a weak spot on the blood vessel
- Abnormal area of arteries and veins within the brain

How do I know if I have an SAH?

There are many tests to find out if you have an SAH. You may have one or more of them. Your doctor will examine you and discuss which tests will be best for you. You will be given more information about the tests that you will have. Some choices are:

- CT Scan or MRI, a type of x-ray
- Cerebral angiogram, a special test that uses x-rays and dye
- Lumbar puncture, a test to remove some CSF from the spinal column

What is the treatment for an SAH?

The goal is to stop the bleeding and decrease the amount of brain damage. You will be watched very closely to reduce your chance of bleeding again. You may be placed on “SAH precautions.” These are things the staff will do to decrease stress and help prevent bleeding. **It is important that you and your family are aware of these things so you can help with them too.** They include:

- Quiet room
- No bright lights
- No television or loud noises
- No telephone
- Bed rest, with the head of your bed up a little bit
- Measures to make it easy to have bowel movements

You will also be monitored for “vasospasm.” This happens when the blood vessels narrow and decrease blood flow to the brain. This can cause more brain damage. Your health care team is very skillful at watching for this and treating it with medicines.

Other treatments that maybe advised by the health care provider include the following:

- Surgery to repair weak areas of a blood vessel in the brain
- Insertion of tiny metal coils into an aneurysm which will deflate it
- Surgery to remove part of the skull bone to allow the brain to swell and not create additional pressure on the brain
- Medicines to treat and avoid seizure

How long will I be in the hospital?

You may need to stay in the intensive care unit for up to 2 weeks. This is so the health care team can carefully watch for any signs of complications, such as vasospasm, that could cause more brain damage.

What are the long-term effects of an SAH?

You may recover completely or you may have a part of your brain that has been damaged because of the bleeding. Your long-term effects depend on how severe the brain was damaged. Your health care team will work with you to achieve the best recovery that is possible.

How can I prevent an SAH?

You may not be able to completely prevent an SAH. It is helpful to know your family’s history and if anyone has had an SAH. Certain conditions, such as pregnancy, may cause an aneurysm to rupture. It is important to talk to your doctor about your risk. Other things you can do to help are:

- Keep your blood pressure under control
- Avoid smoking
- Avoid alcohol
- Avoid the use of cocaine

Where can I get more information?

The Health Information Center (HIC) is located at the Upstate Medical University library. Staff will be glad to research your health-related topics.

Visit HIC at www.upstate.edu/library/hic/ or call (315) 464-4410.

Speak up if you have any questions or concerns

Reference: Mayfield Clinic and Spine Institute

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