



Blood pressure optimization in different types of stroke a systemic review

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Abstract

Stroke alters the cerebral autoregulation as a result blood pressure is elevated in most of the stroke patients. Different stroke types namely, intracerebral hemorrhage, ischemic infarct and SAH (subarachnoid hemorrhage) each require different ranges of BP blood pressure optimization to maintain CPP and MAP. Inappropriate ranges of BP result as rebleed, infarct evolution and cerebral edema. The stroke types require different MAP (mean arterial pressure), CPP (cerebral perfusion pressure), systolic blood pressure (SBP) and diastolic blood pressure (DBP) to maintain adequate cerebral perfusion. Blood pressure optimization is among one of the most important steps in neuroprotection. This systemic review presents the latest updates in BP management in acute stroke. It also stipulates recommended ranges of CPP, MAP, ICP (Intracranial Pressure), SBP and DBP, for acute stroke management. Emphasis on, injectible antihypertensive only in acute stroke is given and commonly used IV (Intravenous) agents are also listed.

Biography

Bista BK is one of the first neurologists of Nepal. He has been pioneering in field of neuroscience in Nepal and established the first neuroscience centre of eastern Nepal. Through years the work of this neuroscience centre has been recognized home and abroad. He shows keen interest in medical management and providing state of art services to this impoverished region of Nepal. Recently he added the first stroke centre of Nepal. He firmly believes in continuous updated education and its implementation in hospital practices.

