Update on Intracerebral Hemorrhages

Three outstanding Original Papers are listed on the cover as “Highlights in this issue” and will now also be briefly introduced in this Editorial. They will be presented for free access in addition to new results reported by the SMART Study Group suggesting different etiologies of lacunar infarcts according to their different risk factor profiles with different progression in natural history.

All 3 papers deal with *Intracerebral Hemorrhages*:

The first paper by Maas et al. [1] from Chicago, IL, USA, proposes a simple intracerebral hemorrhage (ICH) score re-assessment after 5 days of care, which significantly improves the prognosis of good vs. poor outcome.

The second paper by Beuscher et al. [2] from Erlangen-Nuremberg, Germany, remedies the longstanding opinion that functional outcomes after left- vs. right-sided ICH results in different morbidity and/or mortality scores: after statistical corrections for confounding variables, there was no impact of hemispheric location on functional outcome after ICH.

The third paper from a cooperation between Committees and Investigators of the PERFORM and PRoFESS trials [3] re-evaluated the Intracranial-B2LEED3S score and the risk of intracranial hemorrhage in ischemic stroke patients during antiplatelet treatment: this score helps to identify patients who are at a high risk of bleeding but need to be improved by additional parameters (e.g., microbleeds).

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References

- 1 Maas MB, Francis BA, Sangha RS, Lizza BD, Liotta EM, Naidech AM: Refining prognosis for intracerebral hemorrhage by early reassessment. *Cerebrovasc Dis* 2017;43:110–116.
- 2 Beuscher VD, Kuramatsu JB, Gerner ST, Köhn J, Lücking H, Kloska SP, Huttner HB: Functional long-term outcome after left- versus right-sided intracerebral hemorrhage. *Cerebrovasc Dis* 2017;43:117–123.
- 3 Amarenco P, Sissani L, Labreuche J, Vi-caut E, Boussier MG, Chamorro A, Fisher M, Ford I, Fox KM, Hennerici MG, Mattle H, Rothwell PM, Steg PG, Diener HC, Sacco RL, Greving JP, Algra A; PERFORM and PRoFESS Committees and Investigators: The intracranial-B2LEED3S score and the risk of intracranial hemorrhage in ischemic stroke patients under antiplatelet treatment. *Cerebrovasc Dis* 2017;43:145–151.