

### Cerebral Vasospasm: what happens to Critical Closing Pressure?

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### Introduction

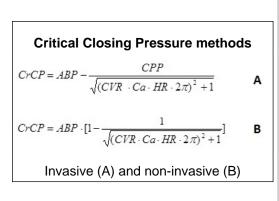
The effect of cerebral vasospasm on critical closing pressure following subarachnoid haemorrhage has not been fully delineated. [1]

- Using a new methodology we sought to describe the behaviour of CrCP during CVS.
- As CrCP is the sum of intracranial pressure and vascular wall tension, we also explored its role in reflecting changes occurring in small vessels distal to CVS. [2]

CrCP = ICP + WT

# Methods

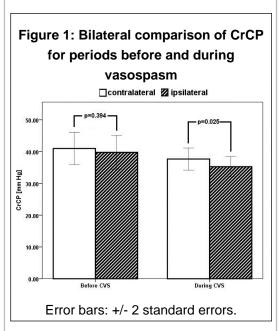
This retrospective analysis included recordings from 98 aneurysmal SAH patients, 52 of whom were diagnosed with CVS through transcranial Doppler FV measurements. CrCP was calculated non-invasively using the cerebral impedance methodology. Measurements of ICP were available in 21 patients, and were used to validate non-invasive CrCP.

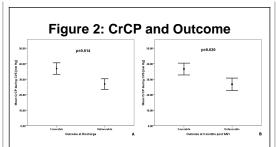


## Results

**I**: The onset of CVS caused a significant decrease in CrCP (p=0.025) and induced asymmetry, with CrCP ipsilateral to CVS becoming significantly lower than contralateral (p=0.025).In contrast, no significant interhemispheric difference was found before CVS (*Figure 1*). ICP did not differ with presence of CVS (p=0.134).

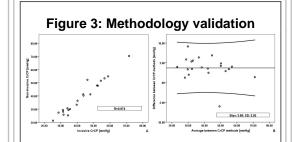
**II**: CrCP was independently to FV associated with outcome, with unfavourable cases assessed at both discharge and at 3 months post SAH having a significantly lower CrCP after the onset of CVS (p=0.014 and p=0.020 respectively; *Figure 2*)





Association of CrCP ater the onset of CVS with outcome of patients at both discharge

 (A) and 3 months post subarachnoid haemorrhage (B). In both time points, unfavourable outcome cases presented a significantly lower CrCP, in comparison to favourable cases. Error bars represent +/-2 standard errors.



Validation of the non-invasive method for calculating CrCP. (A) Non-invasive CrCP is strongly correlated to the respective invasive impedance CrCP (B) Bland–Altman plot for comparing differences between invasive and noninvasive methodologies.

# Conclusions

- CrCP became lower in presence of CVS and was associated with an unfavorable outcome.
- As ICP remained unchanged during CVS, reduced CrCP probably reflects a lower WT and dilated small vessels distal to CVS.

## References

1.Soehle M et al. Critical Closing Pressure in Subarachnoid Hemorrhage: Effect of Cerebral Vasospasm and Limitations of a Transcranial Doppler-Derived Estimation. Stroke 2004; 35: 1393–1398.

2.Dewey RC et al. Experimental cerebral hemodynamics. Vasomotor tone, critical closing pressure, and vascular bed resistance. J Neurosurg 1974; 41: 597–606.

3.Varsos GV et al. Critical closing pressure determined with a model of cerebrovascular impedance. J Cereb Blood Flow Metab Off J Int Soc Cereb Blood Flow Metab 2013; 33: 235–243.

# Abbreviations

<u>ABP</u>: arterial blood pressure; <u>CPP</u>: cerebral perfusion pressure; <u>CrCP</u>: critical closing pressure; <u>CVS</u>: cerebral vasospasm; FV: blood flow velocity <u>HR</u>: heart rate; <u>ICP</u>: intracranial pressure; <u>SAH</u>: subarachnoid haemorrhage; <u>WT</u>: vascular wall tension