A STUDY ON "INCIDENCE OF STROKE IN PATIENTS PRESENTING WITH ACUTE DIZZINESS, VERTIGO AND IMBALANCE IN EMERGENCY DEPARTMENT"

ABSTRACT

BACKGROUND: Dizziness is one of the most common complaint in patients admitted with emergency department and there are no clear guidelines on who are benefitted by CT Brain. MRI is not ideal or feasible in every patient admitted with acute dizziness.

OBJECTIVE: Risk stratification of patient population presenting with dizziness and having an abnormal CT brain finding. Correlation between examination findings, biochemical parameters and ECG with CT Brain.

METHODOLOGY: Prospective observational study of patients admitted in emergency department with acute dizziness <2 weeks duration. Study period of 6 months.

RESULTS: History of hypertension (OR 4.17, PPV 52.6), abnormal CNS examination (OR 5.08, PPV 50) and UMN signs or pyramidal signs on examination (OR 4.91, PPV 77.8) found to be significant after multivariate regression analysis.

CONCLUSION: 35% of patients admitted with dizziness had abnormal CT brain suggestive of stroke. 11.6% had posterior circulation stroke. History of hypertension associated with 4 times risk of stroke and patients with abnormal CNS examination have 5 times risk of stroke when presenting with dizziness. Though MRI Brain is clearly superior to CT Brain in many studies, CT still has a role in emergency.

KEY WORDS

DIZZINESS, VERTIGO, GIDDINESS, POSTERIOR CIRCULATION STROKE, CT BRAIN, HYPERTENSION, EMERGENCY DEPARTMENT, INDIA