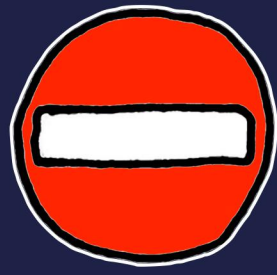
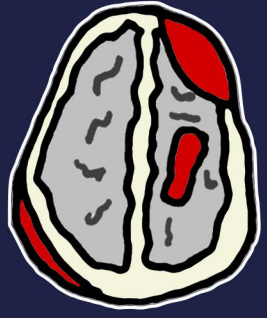


RAISED ICP

CAUSES



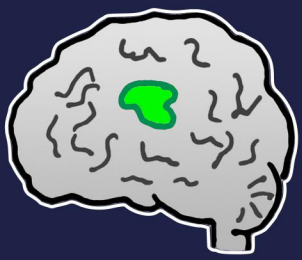
VENOUS SINUS OBSTRUCTION
 - Venous sinus thrombosis
 - depressed skull #



INTRACRANIAL BLEED
 - extra dural
 - subdural
 - Intracerebral
 - secondary oedema



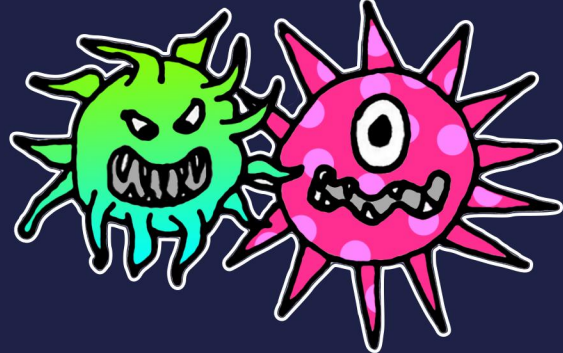
CSF CIRCULATION DISTURBANCE
 - hydrocephalus



TUMORS



IDIOPATHIC

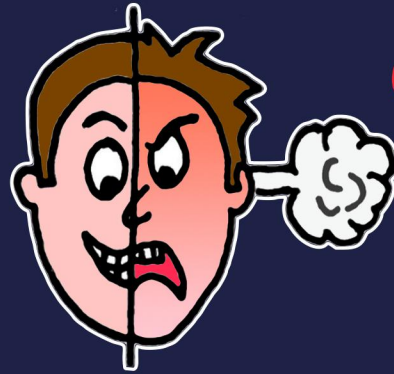


INFECTIONS
 - abscess

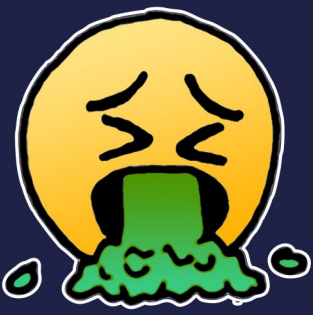
SIGNS + SYMPTOMS



HEADACHE
 - worse in the morning
 - worse on coughing
 - worse on movement



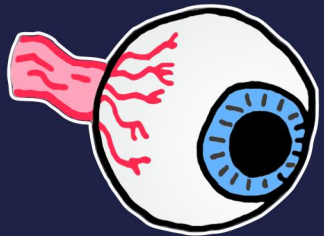
CHANGE IN MENTAL STATUS
 - Irritability
 - lethargy
 - coma



VOMITING



LATE SIGNS
 - Hypertension
 - Bradycardia
 - Irregular respiratory pattern
 ↳ sign of brainstem distortion / ischaemia



EYE SIGNS
 - papilloedema
 - pupillary dilatation
 - ptosis
 - Ophthalmoplegia
 } signs of tonsillar herniation rather than level of ICP

TREATMENT

#EM3

Dr. Pandora Spilman-Henham
 @pandoraspilman

1st Tier

- DIURETICS e.g. mannitol
- HYPERTONIC SALINE as per local guideline
- CONTROL CO₂ (hyperventilation - PaCO₂ 4-4.5 kpa)
- TEMPERATURE CONTROL (avoid pyrexia)
- SEIZURE CONTROL
- HEAD ELEVATION (bed head to 30°)
- ANALGESIA
- maintain EVOVOLAEMIA
- maintain NORMOGLYCAEMIA

MANNITOL

ADULTS

- 0.25-2g/kg over 30-60 mins
- repeated if necessary 1-2 times after 4-8hrs

CHILDREN 1 MONTH - 11 YEARS

- 0.25-1.5g/kg over 30-60 mins
- repeated if necessary 1-2 times after 4-8hrs

CHILDREN OVER 12 YEARS

- As per adult dose

2nd Tier

- BARBITURATE COMA (e.g. thiopentone infusion titrated to burst suppression on EEG)
 - 1.5-3mg/kg in ADULTS.
- HYPOTHERMIA (cooling to 34°C)
- DECOMPRESSIVE CRANIECTOMY