

Box One: Symptoms of Intracerebral Hemorrhage

Clinical assessment cannot reliably distinguish intracerebral hemorrhage from ischemic stroke; brain imaging is required. More frequent symptoms of ICH may include:

- Alteration in level of consciousness (present in approximately 50% of patients)
- Nausea and vomiting (approximately 40-50%)
- Sudden, severe headache (approximately 40%)
- Seizures (approximately 6-7%)
- Sudden weakness or paralysis of the face, arm or leg, or numbness, particularly on one side of the body
- Sudden vision changes
- Loss of balance or coordination
- Difficulty understanding, speaking (slurring, confusion), reading, or writing

Presentation:

- The classic presentation of ICH is sudden onset of a focal neurological deficit that progresses over minutes to hours with accompanying headache, nausea, vomiting, decreased consciousness, and elevated blood pressure.
- Patients may present with symptoms upon awakening from sleep. Neurologic deficits are related to the site of parenchymal hemorrhage.
- Thus, ataxia is the initial deficit noted in cerebellar hemorrhage, whereas weakness may be the initial symptom with a basal ganglia hemorrhage.

Early progression of neurologic deficits and decreased level of consciousness can be expected in 50% of patients with ICH. ([Ramandeep Sahni](#) and [Jesse Weinberger](#); Vasc Health Risk Manag. 2007 October; 3(5): 701–709.)