4th International Congress on Neurology and Neuropsychiatry

July 10-11, 2023 | Webinar

Two-ways Intracerebral drain (OMA-ICD) for Management of spontaneous intracerebral bleeding

Abstract

Objective and study design: (OMA-ICB drain). It is an innovative minimally invasive new technique for management of spontaneous intracerebral hemorrhage (ICH)

Aim of the work: The study explains a proposal of an innovation for the treatment of intracerebral bleeding using (OMA-ICB), drain. The study discusses the way of its practical application, its validity in the treatment of intracerebral hemorrhage.

Methods and design of the drain: it is a newly designed intracerebral drain like external ventricular drain in its action with some modifications that allows the drain to work inside the brain parenchyma, by using a specific fluid to liquefy the hematoma. The idea born when comparing between the intraventricular hemorrhage blood clot and the intracerebral blood clot dissolving time and liquification mechanisms. The clotted blood inside the ventricle liquefied and dissolved faster than the intracerebral clot due to CSF effect. The CSF can break the bounds formed during blood clot formation. Hypertonic fluid used has a better action than CSF in liquefying the intracerebral hematoma without any harm to the brain cells

The drain is two-way disposable drain. Consists of four parts:

- 1- Proximal tube
- 2- Connecting tube or distal tube
- 3- Drainage bag or Closed drainage system
- 4- 4- ICP sleeve for ICP monitoring if applicable

Results: still under investigations.

Conclusion: the (OMA-ICD) new drain for the treatment of intracerebral hematoma to reduce its morbidity and mortality rates is a new hope for all patients having ICB. The new drain idea will provide proper treatment, avoid the risk of surgery, avoid the risk of anticoagulant medications used to liquefy the hematoma used with other drains, and avoid high coast and reducing long hospital stay

Recent Publications:

- 1. Boucart M, Moroni C, Thibaut M, Szaffarczyk S, Greene M. (2013). Scene categorization at large visual eccentricities. Vision Research, 86: 35-42.
- 2. Crabb D P, Smith N D, Glen F C, Burton R, Garway-Heath D F (2013) How does glaucoma look? Patient perception of visual field loss. Ophthalmology, 120(6): 1120-1126.
- 3. Levi A, Shaked D, Tadin D, Huxlin K R (2015) Is improved contrast sensitivity a natural consequence of visual training? Journal of vision, 15(10): 4-4.
- 4. Xi J, Yan F, Zhou J, Lu Z L, Huang C B (2014) Perceptual Learning Improves Neural Processing in Myopic Vision. Investigative Ophthalmology & Visual Science, 55(13): 784-784.
- 5. Crossland M D, Engel S A, Legge G E (2011) The preferred retinal locus in macular disease: toward a consensus definition. Retina, 31(10): 2109- 2114.

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Biography

Omar Abdelhay Eldanasory is affiliated to <u>Al-Azhar University</u>. He is a recipient of many awards and grants for his valuable contributions and discoveries in major area of <u>Neurosurgery</u> research. His international experience includes various programs, contributions and participation in different countries for diverse fields of study. His research interests reflect in his wide range of publications in various national and international journals.

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