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Low level of C-reactive protein after stroke: Worse outcome in neuro intensive care unit versus good outcome in neurological ward

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Background: Level of inflammation markers like C-reactive protein (CRP) is a strong predictor of the risk of heart attack and death but their association with stroke remains controversial.

Aim: To identify the sensitivity of C-reactive protein (CRP) as the prognostic factor of stroke outcome.

Patients & Methods: 473 patients were divided into the 2 group (used NIHSS): Group-1 has 326 patients' mild-moderate stroke (0-15) in ND and Group-2 has 147 patients with severe (16-38) stroke in NICU. CRP was determined within 24 hour after stroke. Short-term functional outcome was measured by Rankin scale (RS) and Barthel index (BI) 14 days and 3 months later.

Result: In Group-1, the high CRP was associated with poor short-term functional outcome (RS>3; BI<85; p<0.001) and with higher score of NIHSS. The low-CRP was in a strongly correlation with good outcome, low grade of disability according to RS and BI. In Group-2, high CRP was associated with poor short-term functional outcome (RS>4; BI<70; p<0.001) but the low level of CRP also significantly correlated with short-term poor outcome, 3 months mortality and low grade of NIHSS (p<0.001).

Conclusion: A low admission CRP in NICU is strongly associated with severe NIHSS and high short-term mortality visa versa to low level of CRP in ND with the good outcome. It remains to establish if the low level of CRP can be a marker of poor prognosis in severe stroke due to neuro-immunological response failure to the critical condition.

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