Hemorrhagic and Ischemic Strokes Compared Stroke Severity, Mortality, and Risk Factors -
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Background and Purpose-Stroke patients with hemorrhagic (HS) and ischemic strokes were compared with regard to
stroke severity, mortality, and cardiovascular risk factors. Methods-A registry started in 2001, with the aim of registering all
hospitalized stroke patients in Denmark, now holds information for 39 484 patients. The patients underwent an evaluation
including stroke severity (Scandinavian Stroke Scale), CT, and cardiovascular risk factors. They were followed-up from
admission until death or censoring in 2007. Independent predictors of death were identified by means of a survival model
based on 25 123 individuals with a complete data set. Results-Of the patients 3993 (10.1%) had HS. Stroke severity was
almost linearly related to the probability of having HS (2% in patients with the mildest stroke and 30% in those with the
most severe strokes). Factors favoring ischemic strokes vs HS were diabetes, atrial fibrillation, previous myocardial
infarction, previous stroke, and intermittent arterial claudication. Smoking and alcohol consumption favored HS, whereas
age, sex, and hypertension did not herald stroke type. Compared with ischemic strokes, HS was associated with an
overall higher mortality risk (HR, 1.564; 95% CI, 1.441-1.696). The increased risk was, however, time-dependent; initially,
risk was 4-fold, after 1 week it was 2.5-fold, and after 3 weeks it was 1.5-fold. After 3 months stroke type did not correlate
to mortality. Conclusion-Strokes are generally more severe in patients with HS. Within the first 3 months after stroke, HS is
associated with a considerable increase of mortality, which is specifically associated with the hemorrhagic nature of the
lesion. (Stroke. 2009; 40: 2068-2072.)

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