Abstract

Background: Subarachnoid haemorrhage (SAH) is a grave condition with high morbidity and mortality. This condition may easily be confused with other clinical conditions such as bacterial or viral meningitis. Diagnosis to date has depended on high index of suspicion. Misdiagnosis of SAH does not only delay definitive diagnosis, but it may be fatal due to complications like re-bleeding or vasospasm. This study was designed to describe the pattern of non-traumatic subarachnoid hemorrhage (SAH) at the Kenyatta National hospital (KNH). Methods: A cross sectional analysis of consecutive patients who had SAH and admitted at the KNH between December 2010 and March 2011 was performed. A total of 55 patients with SAH were recruited in the study, with a male: female ratio of 1: 1.1. Results: Headache was the commonest symptom (91%) in patients with SAH. Facial nerve palsy was the commonest of the cranial nerve palsies (75%) observed in these patients. Fifty one percent (51%) of the patients were known hypertensives prior to the SAH episode. Sixty six percent (66%) of patients presented with Glasgow Coma Scale (GCS) between 7 and 14. Thirty eight percent (38%) presented in World Federation of Neurosurgeons (WFNS) grade 1. Conclusion: Non-contrast CT-scan was the investigation of choice for acute SAH. However in the absence of CT-scan, and where there was a strong clinical suspicion of SAH, lumbar puncture was a reliable test.