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# HEMORRHAGIC STROKE - SYMPTOMS AND TREATMENT

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**Abstract:** Hemorrhagic stroke (Hemorrhagic stroke) is a hemorrhage in the gray or white matter of the brain that occurs due to ruptured blood vessels. It is also known as intracerebral hemorrhage.
In such an acute and dangerous disorder, blood accumulates, presses on the surrounding brain tissue and damages it, which threatens disability. But if help is given in time, irreversible consequences can be prevented and a person's life can be saved.
**Keywords:** hemorrhagic stroke, impaired cerebral circulation.

**Introduction.** Hemorrhagic stroke refers to acute cerebral circulatory disorders (ACBD). It most commonly occurs when a vessel in the brain ruptures from a sudden increase in blood pressure (BP). This condition is usually manifested by a sudden severe headache, nausea and impaired consciousness, as well as a variety of focal neurologic symptoms such as facial asymmetry, marked weakness in an arm and/or leg, etc.
The diagnosis is confirmed by computerized tomography (CT) or magnetic resonance imaging (MRI) of the brain. Treatment is complex and includes adequate BP correction, supportive therapy and sometimes surgery.
*Prevalence of hemorrhagic stroke*
According to international epidemiologic studies (World Development Report), stroke as a cause of death ranks second to third in the world. In Russia, it ranks second after cardiovascular diseases.Brain hemorrhage can occur at any age, but people over 50 are at risk, and it occurs more often in men than in women.
Hemorrhagic stroke is five times less common than ischemic stroke, but they die from it much more often. This is due to the rapid development of brain swelling and compression of brain tissue by a hematoma (blood pooling).
*Causes and risk factors of hemorrhagic stroke*

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Arterial hypertension (high BP). Due to constant fluctuations in blood pressure, the vessel wall becomes thinner, and at some point it completely or partially ruptures. With partial rupture, blood seeps through the vessel wall into the surrounding tissue, such a phenomenon is called diapedesis hemorrhage.
Pathology of the vascular wall, such as aneurysm - bulging of the vessel wall due to its thinning.
Taking combined oral contraceptives (COCs) in combination with triptans, which are used for migraines. The combination of these drugs can disrupt hemostasis, i.e. the work of the clotting and anti-clotting systems of the blood.
Age over 60 years, since over time the vascular wall thins.
Alcohol abuse. Alcohol affects the liver, where the most important clotting factors are produced. Violation of their production significantly increases the risk of bleeding.

*Drug abuse*. Drugs can cause a sharp spasm (narrowing) of blood vessels and a spike in BP, as a result, the vessel may rupture.
Treatment with anticoagulants and thrombolytics, which thin the blood.
Blood diseases. These include hemophilia, thrombocytopenias (platelet deficiency) and thrombocytopathies (platelet malfunction when platelets are normal in number), and antiphospholipid syndrome, which can cause cerebral hemorrhage in young adults.

*Coronavirus infection.* Can disrupt the ratio of the clotting and anti-clotting systems of the blood, which increases the risk of hemorrhagic stroke [8].
Symptoms of hemorrhagic stroke
The signs of hemorrhagic stroke are quite vivid. Most often there is general cerebral symptomatology in the form of headache and impaired consciousness, as well as focal neurologic manifestations.
*General cerebral symptomatology:*
The headache is usually sudden, “gushing from within.” It is often accompanied by nausea and vomiting, sometimes with loss of consciousness. Vomiting does not provide relief.

Disorder of consciousness manifests itself in different ways: with extensive focal hemorrhage, a person may lose consciousness and even fall into a coma. In some cases, symptoms of irritation of the cerebral membranes (meningeal syndrome) such as tension of the posterior cervical muscles or seizures occur.

Focal neurological symptoms are diverse: speech, vision and swallowing may be impaired, and there may be paresis and paralysis in which an arm or leg on one side of the body becomes markedly weaker or stops moving altogether.
The manifestations will depend on the location of the hematoma. For example, a hemorrhage in the area of the lobo-parietal-parietal cortex, which is responsible for the movements of the arms and legs, can lead to their weakness or paralysis. In this case, the person suddenly drops objects from his hands, falls and loses consciousness. If consciousness persists, the person often complains of a severe headache, with repeated vomiting.
The most severe course of STEMI in the brain stem, because here are vital centers: vascular-motor, respiratory, thermoregulatory. Also located here is the cerebellum - the main organ of balance and coordination of movements. In addition to these structures in the brain stem are located nuclei of cranial nerves, which are responsible for facial symmetry, swallowing, sound and clarity of speech, common eye movements. In stem stroke, breathing is sometimes disturbed, fever, dizziness, shakiness when walking, indomitable vomiting, weakness in an arm or leg of one half of the body, facial asymmetry, impaired speech, swallowing, voice sound, as well as impaired consciousness, up to coma.

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The main symptoms of stroke need to know every person to give the victim first aid and call an ambulance. After all, the earlier the patient receives qualified help, the lower the risk of severe complications.

**Conclusion:** Thus, complications of hemorrhagic stroke include recurrent SNMD, hydrocephalus, severe irreversible brainstem damage. In addition, there may be post-stroke symptoms such as sleep disturbance, confusion, urinary and fecal incontinence, and cognitive impairment (e.g., memory decline). These symptoms can occur in the early and long-term, depending on the severity of the condition. Prolonged lying down can lead to thrombosis in the blood vessels of the legs, and a detached thrombus (embolus) can lead to pulmonary embolism and pulmonary infarction (necrosis). Hypodynamia also increases the risk of urinary tract infection: from simple cystitis and pyelonephritis to urosepsis, in which bacteria and their toxins from the genitourinary system massively enter the bloodstream, spread throughout the body and damage all organs and systems.

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