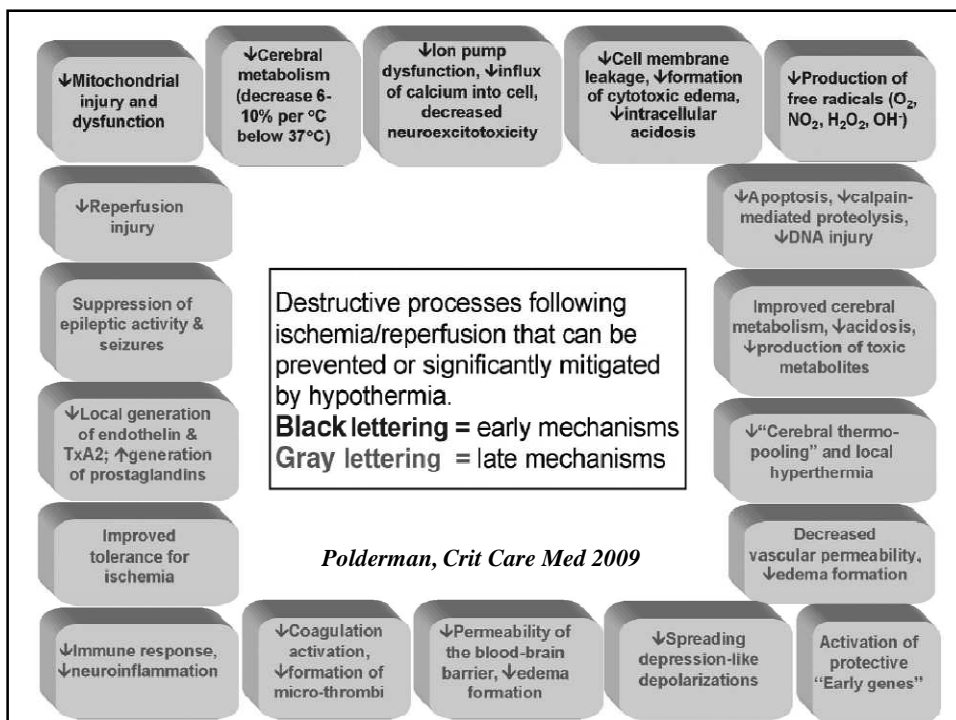
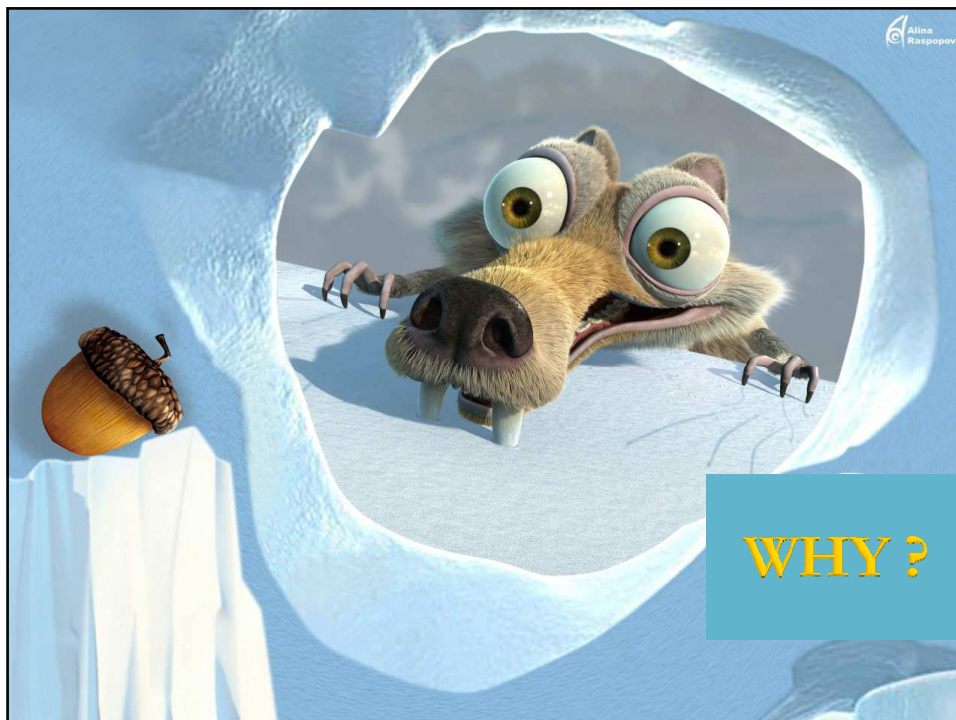


# **THERAPEUTIC HYPOTHERMIA (Acute Brain Injury)**

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## **Therapeutic hypothermia (HT)**

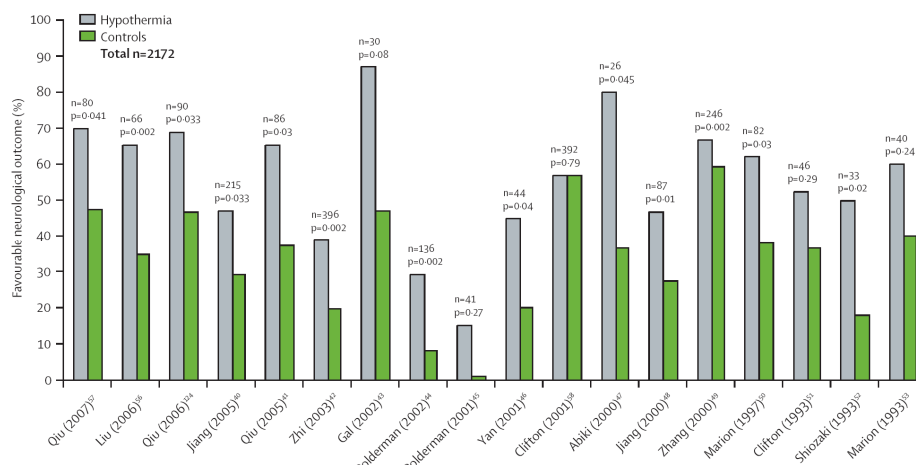
- **WHY** (should we use TH) ?
- **WHICH** (patient) ?
- **WHEN** (to start) ?
- **HOW** (to do) ?
- **WHAT** (to do during TH) ?



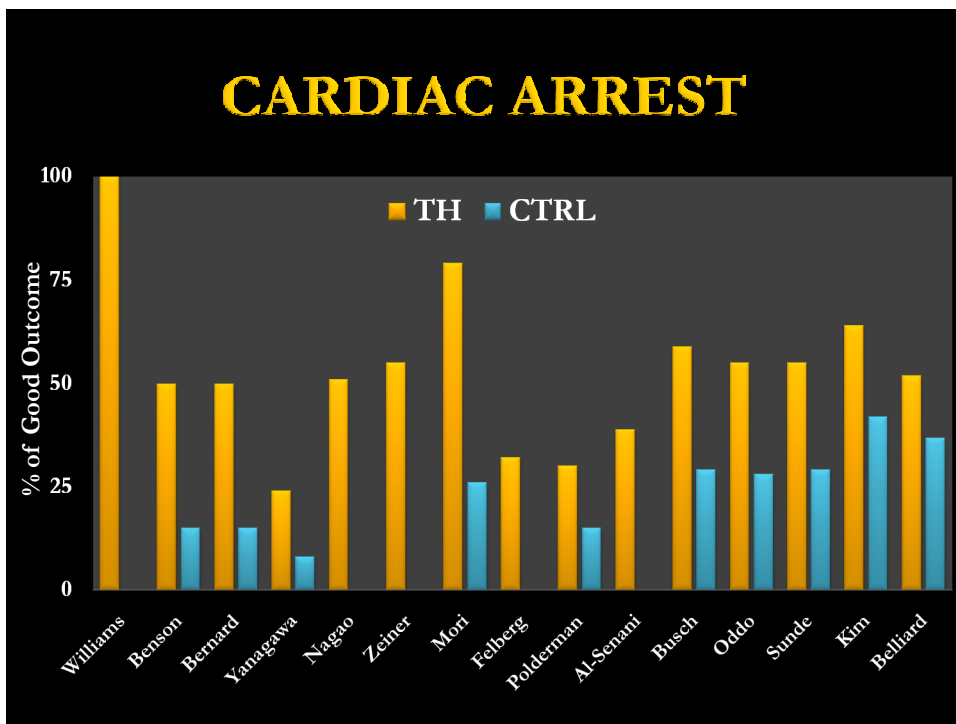
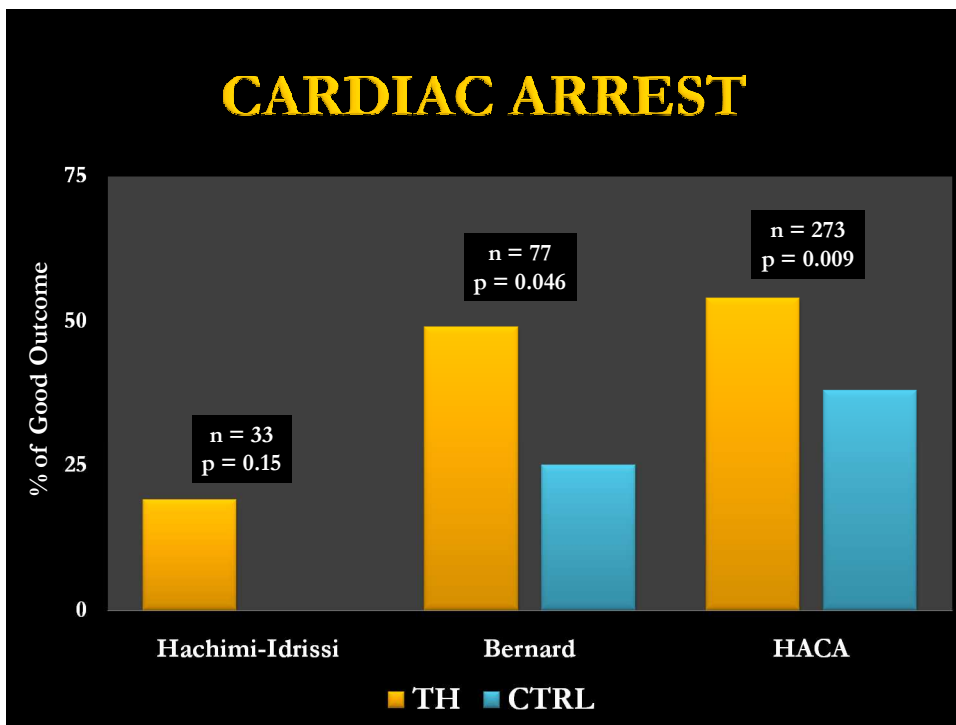
## WHICH (PATIENT) ?

- Cardiac Arrest (VF)
- Traumatic Brain Injury (TBI)
  
- Perinatal asphyxia
- Stroke
- Subarachnoid hemorrhage
- Refractory seizures
- Cardiogenic shock after cardiac surgery
- Spinal cord injury
- Prevent contrast nephropathy
- Hepatic encephalopathy
- ARDS
- Sepsis

## TRAUMATIC BRAIN INJURY



Polderman, Lancet 2008



## Hypothermia after Cardiac Arrest

### Summary: ILCOR Recommendations

On the basis of the published evidence to date, the ILCOR ALS Task Force has made the following recommendations:

- Unconscious adult patients with spontaneous circulation after out-of-hospital cardiac arrest should be cooled to 32°C to 34°C for 12 to 24 hours when the initial rhythm was VF.
- Such cooling may also be beneficial for other rhythms or in-hospital cardiac arrest.



*Nolan, Circulation 2003*

## Hypothermia after Cardiac Arrest

