



AC027

Adult Cardiology & Clinical Cardiovascular Medicine • Poster Presentation

ADMISSION BLOOD PRESSURE AND OTHER PREDICTORS OF IN-HOSPITAL MORTALITY AMONG PATIENTS WITH HAEMORRHAGIC STROKE

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Stand: POSTER #AC027 | **Venue:** Poster Exhibition Hall & Gallery - Eko Convention Centre | **Online Ref:** <https://nigeriancardiacsociety.com/abstracts/AC027>

Background Haemorrhagic stroke is associated with substantial early mortality, particularly in settings with a high burden of hypertension and limited access to specialised stroke care. Early identification of readily available prognostic factors may improve risk stratification and management. This study aimed to determine the association between admission blood pressure and in-hospital mortality and to identify other clinical, neurological, and radiological predictors of mortality among patients with haemorrhagic stroke.

Methodology A hospital-based study was conducted among adults admitted with clinically and radiologically confirmed haemorrhagic stroke at the Rivers State University Teaching Hospital between January 2023 and December 2024. Sociodemographic, clinical, neurological, and neuroimaging data were extracted. Survivors and non-survivors were compared using appropriate parametric and non-parametric tests. Univariable and multivariable binary logistic regression analyses were performed to identify predictors of in-hospital mortality. **Results** One hundred and sixty-one records were analysed. The mean age was 54.2 ± 12.0 years, 51.6% were female, and 83.9% had pre-existing hypertension. Intracerebral haemorrhage accounted for 85.1% of cases. In-hospital mortality was 27.3%. Non-survivors were older and had higher admission mean arterial pressure, lower Glasgow Coma Scale scores, higher NIHSS scores, and more frequent intraventricular extension and hydrocephalus. Independent predictors of mortality were older age, higher mean arterial pressure, lower Glasgow Coma Scale score, and intraventricular extension.

Conclusion Haemorrhagic stroke was associated with high in-hospital mortality. Admission blood pressure, level of consciousness, age, and intraventricular extension were important prognostic indicators and should inform early risk assessment and monitoring.

Keywords: Haemorrhagic stroke; Blood pressure; Hypertension; In-hospital mortality; Nigeria