

# AHA/ASA Guideline

## Guidelines for the Management of Aneurysmal Subarachnoid Hemorrhage

### A Guideline for Healthcare Professionals From the American Heart Association/American Stroke Association

*The American Academy of Neurology affirms the value of this statement as an educational tool for neurologists.*

*Endorsed by the American Association of Neurological Surgeons and Congress of Neurological Surgeons; and by the Society of NeuroInterventional Surgery*

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#### Fever treatment

Page 1726/1727: Fever is the most common medical complication in aneurysmal Subarachnoid Hemorrhage (aSAH). [309] The presence of fever of noninfectious (central) origin has been associated with severity of injury, amount of hemorrhage, and development of vasospasm, and it may represent a marker of a systemic inflammatory state triggered by blood and its byproducts. [310–312]

Analysis of data from a prospectively collected registry of aSAH indicated that fever was independently associated with worse cognitive outcome in survivors of aSAH. [313,314]

Improved functional outcome with effective control of fever has been reported. [315]

#### Recommendations

**Class IIa; Level of Evidence B.** (New recommendation)

Page 1727: Aggressive control of fever to a target of **normothermia** by use of standard or advanced temperature modulating systems is reasonable in the acute phase of aSAH.