



Clinical Treatment for Intracerebral Hemorrhage

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Message from the Guest Editor

Dear Colleagues,

Intracerebral hemorrhages can be caused by ruptured brain aneurysms, arteriovenous malformations, arteriovenous fistulas, amyloid angiopathies, or hypertensive bleeding. The need to reach a consensus about the treatment of such patients and to clarify which treatment is optimal is more important than ever. The treatments we offer to patients can be different, but the data regarding the morbidity and mortality of each option should be clear in order to be able to specify guidelines. No matter which discipline sees a patient first, it should always be clear that neurosurgery and interventional neurology both have to discuss the treatment options for every patient and ensure the treatment is based on hard evidence. The actual data allow for a clear evidence-based approach, or at least they provide space for a scientific, unemotional conversation about the right treatment.

In this Special Issue, we hope to collect publications which will help physicians lead patients to the right treatment in intracerebral hemorrhages depending on pathology and other factors.





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