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John Batchelor

Central Manchester Foundation Trust, UK

Coagulopathy in traumatic brain injury: Current concepts and controversies

Coagulopathy following traumatic brain injury (TBI) is a well-recognized pathophysiological state following head injury. A meta-analysis found that the weighted average number of patients with coagulopathy following traumatic brain injury was 35.2%. The temporal pattern of coagulopathy is viable. Some patients have an early transient raise in coagulation parameters others have more delayed response. The most important coagulation parameter is currently an area of debate. Some others suggest that the PT is the most important predictor of hemorrhagic progression. Other authors suggest that thrombocytopenia is the most important predictor of haematoma progression. The presence of traumatic brain induced coagulopathy increases the risk of hematoma progression by an odds ratio of 6.897. The aim of this talk is to review the characteristics of this disease process and to discuss possible etiological mechanisms responsible for this response.

Biography

John Batchelor is currently a Consultant in Emergency Medicine at Central Manchester Foundation Trust, UK. He is also a Lecturer at Manchester Metropolitan University. He completed his Graduation at Leeds University England in 1982. He is a Fellow at Royal College of Surgeons in Ireland and Fellow in the Faculty of Emergency Medicine of England. He completed his MD at University College London. He has presented a paper in Paris in 2012 on "Meta-analysis looking at the relationship between cerebral micro-bleeds and anti-platelet agents". His current research interest includes "Risk factors for intracranial haemorrhage in both adults and pediatrics secondary to coagulopathy and thrombocytopenia".

johnbatchelor@msn.com

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