Reviewer's report

Title: Focal subarachnoid haemorrhage mimicking transient ischaemic attack - do we really need MRI in acute stage?

Version: 1 Date: 21 December 2013

Reviewer: fausto viader

Reviewer's report:

The authors report still another series of patients with focal subarachnoid haemorrhage mimicking TIAs. This time there are 7 patients, who all had both positive CT and MRI for the diagnosis of cortical haemorrhage. Hence the authors question the statement that MRI is mandatory to diagnose this type of haemorrhage and are concerned by potential medicolegal implications of such a statement.

The authors might want to quote another recent series of 17 patients (Apoil et al. Focal Cortical Subarachnoid Hemorrhage Revealed by Recurrent Paresthesias: A Clinico-Radiological Syndrome Strongly Associated with Cerebral Amyloid Angiopathy. Cerebrovasc Dis 2013;36:139–144) in which 15 of 17 CTs were positive vs. 17 MRIs (88%), providing additional evidence that one cannot entirely rely on the CT to rule out a small cortical subarachnoid haemorrhage.

MRI may not be available on a 24/24 basis everywhere, but the CT is sufficient in most cases to get to the diagnosis. The question is: what should the neurologist do in presence of transient neurological symptoms suggesting a focal cortical SAH, and a normal CT? There is a dilemma between not preventing a stroke in a patient with a TIA, and causing an ICH in a patient with amyloid angiopathy. I would not advise antithrombotic treatments knowing that around 10% of patients with cortical focal SAH may have a normal CT. In these rare cases, one cannot escape the need of an MRI. In the meanwhile what can only be expected from the neurologist is to closely monitor the patient and arrange for the MRI to be done as soon as possible.

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests