Low risk of stroke after peripheral vestibular disorder

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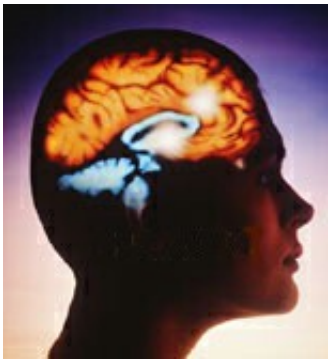

(HealthDay)—The risk of stroke is low following emergency department discharge with a diagnosis of peripheral vestibular disorder; however, some strokes are being misdiagnosed as peripheral vestibular disorders, according to a study published online Sept. 18 in the *Annals of Neurology*.

Clare L. Atzema, M.D., from the University of Toronto, and colleagues conducted a population-based study involving all adult patients discharged from an emergency department with a primary diagnosis of peripheral vestibular disorder. Hospitalized strokes were assessed at seven, 30, 90, and 365 days, as were subsequent falls, motor vehicle accidents, fractures, and burns. The same outcomes were examined in propensity score-matched discharged emergency department patients

with renal colic.

The researchers found that 0.18 percent of the 41,794 qualifying patients had a stroke within 30 days. At 30 days, accidental injury ranged from 0.01 percent for falls to 0.15 percent for fractures. Compared with matched renal controls, the relative risk of 30-day stroke was 9.3 times higher. The highest relative risk was seen at seven days (50.0) and it decreased with duration from emergency department visit (relative risks, 6.1 and 2.5 at 90 and 365 days, respectively). The risk of accidental injury did not differ.

"The frequency of early stroke following discharge from an emergency department with a diagnosis of a peripheral vestibular disorder was extremely low," the authors conclude. "However, the relative risk was markedly higher than in matched patients with renal colic, suggesting that some strokes, or sentinel events for strokes, are being misdiagnosed as peripheral vestibular disorders."

More information: Abstract
Full Text (subscription or payment may be required)