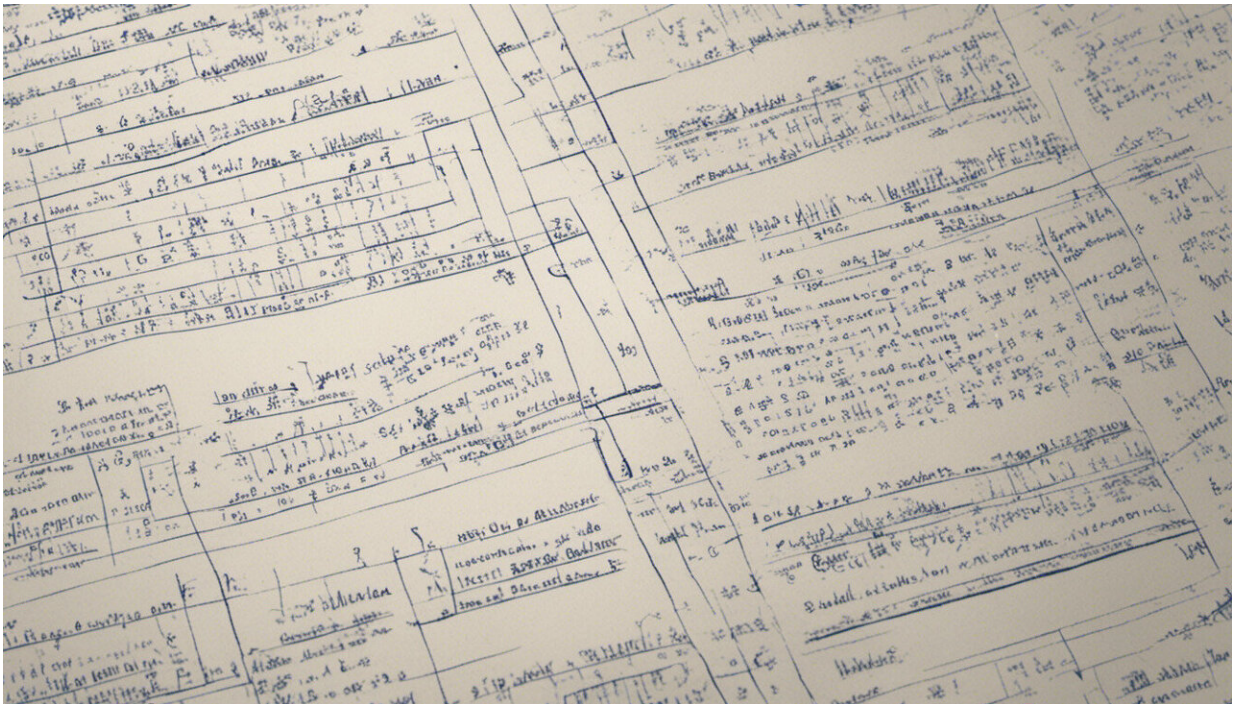


# Doctors beat calculators when predicting stroke recovery

December 17 2015, by Bill Hathaway



Credit: AI-generated image ([disclaimer](#))

In the past 15 years, clinicians have developed scientific "calculators" to predict long-term outcomes for patients with bleeding strokes. This information is used by families and doctors to make life-and-death decisions about whether to continue life support or undertake aggressive treatment.

A new Yale-led study, however, identifies a better tool to predict outcomes for [patients](#) suffering from life-threatening brain hemorrhages—a clinician's own judgment.

"Doctors and nurses should trust their own judgment in these life-or-death situations and not rely on prognostic scales by themselves," said David Y. Hwang, assistant professor of neurology at Yale School of Medicine and lead author of a study appearing Dec. 16 in the journal *Neurology*.

Hwang and colleague Kevin N. Sheth, associate professor of neurology and neurosurgery and senior author of the study, led a national team that enrolled 121 patients who had suffered intracerebral hemorrhages (ICH) at five different hospitals. For each patient, a doctor and a nurse actually taking care of the patient were each asked what level of function the patient would have at three months. The three-month prognosis for each patient was also predicted using two common prognostic scales, which estimate a patient's likely outcome using clinical data such as patient age, ICH location, and ICH size.

The researchers found that the estimated patient prognoses by doctors and nurses tended to be more accurate than those generated by the outcome "calculators." This was true even though all the doctors and nurses who were surveyed in the study were asked about patient prognosis within only one day of patient arrival in the hospital.

"For these types of bleeding stroke, early subjective predictions of recovery are still better than our best available scientific prediction tools," Hwang said.

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Provided by Yale University

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