Madison Neurology LLC: Compiled for Educational Purposes. Not for Clinical Use.

MADISON NEUROLOGY LLC

608 403 0000

Neurology Care 7 days a Week. Because Your Brain Matters.

Hemorrhagic Stroke (Brain Bleed)

Patient education guide · Stroke & Vascular · Madison Neurology LLC

What is it?

A hemorrhagic stroke occurs when a weakened blood vessel ruptures and bleeds into the brain tissue. The bleeding damages brain cells directly and increases pressure inside the skull. It is less common than ischemic stroke but tends to be more severe.

How does it happen?

The most common cause is long-standing high blood pressure, which weakens small arteries deep in the brain. Other causes include cerebral amyloid angiopathy (in older adults), ruptured aneurysms or vascular malformations, blood-thinning medications, and drug use (especially stimulants such as cocaine or amphetamines).

Common symptoms

- Sudden severe headache, often described as the worst of one's life
- Sudden weakness or numbness on one side of the body
- Nausea and vomiting
- Decreased alertness or loss of consciousness
- Trouble speaking, seeing, or walking

How is it diagnosed?

A non-contrast CT scan of the head is the fastest way to confirm bleeding in the brain. CT or MR angiography may be used to look for an aneurysm or vascular malformation, and blood tests check clotting function.

How is it treated?

Emergency treatment focuses on stopping the bleeding, controlling blood pressure, reversing any blood thinners, and managing pressure inside the skull. Surgery or a drain may be needed for large bleeds. After stabilization, rehabilitation and aggressive blood pressure control are the cornerstones of recovery and prevention.

What does the future hold?

Hemorrhagic stroke carries a higher early mortality than ischemic stroke, but many survivors make meaningful recoveries, particularly younger patients and those treated quickly. Recovery follows a similar timeline to ischemic stroke, with most gains in the first 6 months. Blood pressure control dramatically lowers the risk of recurrence.

Questions patients commonly ask

Q: Is a brain bleed the same as an aneurysm?

A: No. An aneurysm is a balloon-like weak spot in an artery wall; if it ruptures it can cause a bleed, but many brain bleeds have other causes such as high blood pressure.

Q: Will I need surgery?

A: Not always. Smaller bleeds are often managed with medication and close monitoring; surgery is reserved for larger or worsening bleeds.

Q: What is the most important thing I can do afterward?

A: Keep your blood pressure well controlled — it is the single most effective way to prevent another bleed.

National support groups & resources

- **American Stroke Association** — stroke.org — 1-888-478-7653
- **American Heart Association** — heart.org — 1-800-242-8721
- **American Academy of Neurology — Brain & Life patient resources** — brainandlife.org

(Organization contact details were current at the time of compilation; please verify online.)

Disclaimer — please read

This material is provided by Madison Neurology LLC for general educational purposes only. It is not medical advice, is not a substitute for the independent judgment of a qualified healthcare professional, and does not create a physician-patient relationship. Do not disregard, avoid, or delay seeking professional medical advice, diagnosis, or treatment because of anything in this material. Individual conditions, treatments, and outcomes vary; only your own healthcare team can evaluate your specific situation. If you think you may be experiencing a medical emergency, call 911 or go to the nearest emergency department immediately. To the fullest extent permitted by law, Madison Neurology LLC, its providers, and staff disclaim all liability for any loss, injury, or damage arising from the use of, reliance on, or inability to use this information. Organization contact details are provided as a courtesy, were current at the time of compilation, and may change; Madison Neurology LLC is not responsible for the content of external organizations.