

RESPONSE TO LETTER TO THE EDITOR

Response to “Treating Vasospasm with IV Milrinone: RELAX (the Vessel) or DON’T DO IT!”



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To the Editor:

We thank Drs. Robert-Edan and Lakhal for their kind words [1] regarding our article on practice guidance for hemodynamic management in the prevention of delayed cerebral ischemia (DCI) after subarachnoid hemorrhage [2]. Although the intent of our article was not to describe mechanisms of action, we agree with the writers that the benefits of milrinone in DCI treatment may involve vasodilation and/or cytoprotective mechanisms, perhaps above and beyond milrinone’s inotropic effect. We also agree with the writers that the mechanisms of DCI are varied and incompletely understood. Vasodilation alone is unlikely to ameliorate DCI, as has been demonstrated in more than one randomized controlled trial [3, 4]. Likewise, the mechanisms by which nimodipine provides neuroprotection after subarachnoid hemorrhage are debated to this day [5]. Large randomized trials with suitable end points will be necessary before we can say with any certainty that milrinone does—or does not—have benefit in the management of DCI, and even then we may not fully understand its mechanisms of action.

Sincerely,

Drs. Deem, Livesay, and Treggiari.

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