

Correspondence

Coother Editor:

I wish to comment on certain aspects of the article entitled "Effect of Endothelin on Experimental Intracerebroventricular Haematoma" by Baykal et al (1).

In the introduction the authors state that "because of the risk of haemorrhagic complications of fibrinolytic agents, we therefore carried out this experiment to study the effectiveness for clot lysis and safety of endothelin, using its effects on the serum level of the endogen tissue plasminogen activator and PGI₂." Unfortunately I could not find any measurements of endogenous tissue plasminogen activator and/or PGI₂ in the material and method or results sections. I think that these levels would make this study very valuable even if the levels are not higher than that of controls.

Recently, Hamann et al. (3) reported a clinical study in which plasma big endothelin levels were studied in 17 patients with spontaneous intracerebral haematoma (ICH). They did not find significant difference between different localizations and between patients with different prognoses and concluded that endothelins do not play a significant pathophysiological role in acute severe ICH (3). They also speculated that the vascular leakage in

spontaneous intracerebral haematomas (ICH) is too small and too localized to produce a significant increase in endothelin, and vasospasm is not a common finding after ICH (3). However, it is a well known fact that the existence of the blood-brain barrier prevents a vasoconstrictor effect of circulating endothelin-1 (2). Why ICH does not cause increased endothelin levels is still obscure. I only agree with the authors on one point: that we need further studies about endothelin.

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3. Hamann GF, Isenberg E, Strittmatter M, Stoll M, Keshevar T, Moili R, Schimrigk K. Big endothelin in spontaneous intracerebral haemorrhage. *Eur Neurol* 34:99-102, 1994.