The Grading of Normal Pressure Hydrocephalus

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Objective: In the daily routine of a hospital, a clinical grading must be easy to handle, clearly arranged and, if possible, without including and excluding criteria.

Methods: During a period of 18-years we investigated 300 patients suspected of normal pressure hydrocephalus (NPH) by means of an intrathecal infusion test. In 162 patients (54%) the diagnosis of a normal pressure hydrocephalus could be confirmed. For the evaluation of the course of disease, we used the Black-Grading-Scale for shunt assessment and the clinical grading for chronic hydrocephalus (Kiefer-scale) pre- and postoperative as well as in a follow-up examination seven months after surgical treatment. The aim of our study was to find a quick and easy to handle a bed-side examination for the grading of NPH.

Results: The Black-Grading-Scale does not allow us to distinguish between patients in an unchanged condition and those with a worsening of their symptoms. Therefore this scale is useful for patients with an obstructive hydrocephalus but not for those with a NPH. In our opinion the clinical grading of Kiefer seems to be the most reliable scale for the grading and long term follow up of a normal pressure hydrocephalus.

Conclusion: Our own created NPH-Recovery-Rate is based on the clinical grading for chronic hydrocephalus (Kiefer-scale). It allows the individual comparison between the courses of disease in patients with normal pressure hydrocephalus.