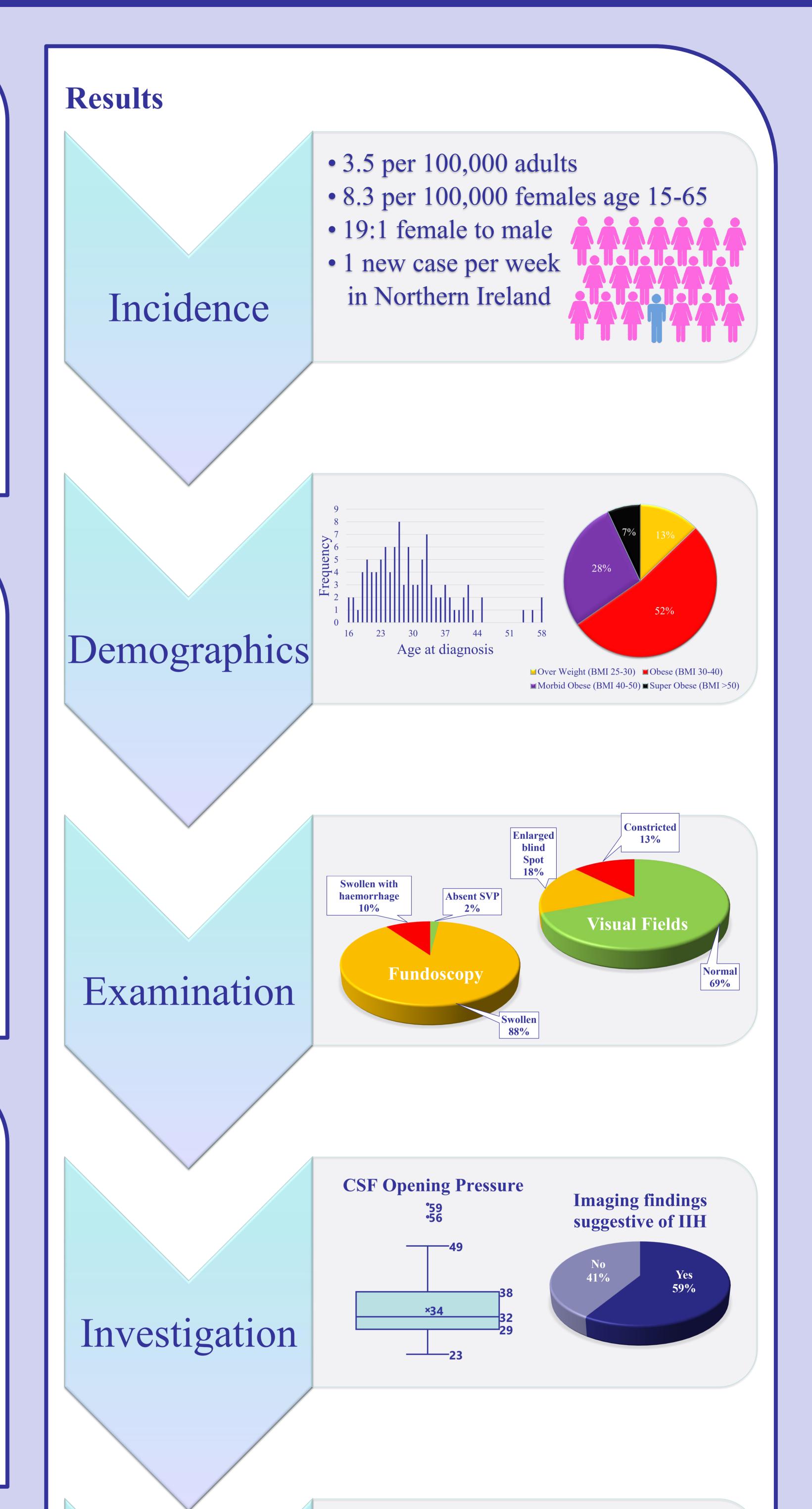
Idiopathic Intercranial Hypertension -A study of incidence and demographics in Northern Ireland Harley M, Peukert T

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Introduction

Idiopathic Intercranial Hypertension (IIH) is a common neurological condition which often initially presents to acute services. Incidence is normally reported at 1-2 per 100,000¹ however in practice the number often feels larger than this and indeed our collages McCluskey *et al*² reported a much higher incidence when they preformed a seven year review of notes from their practice in the North West of Ireland. We wanted to look at the point incidence of IIH in Northern Irish adult population taking advantage of networked imaging and electronic care systems which allowed us to capture details all patients accessing NHS services within Northern Ireland.



Methods

We used networked imaging systems to review all imaging requests for CT and MR venography between March 2017 and February 2019 inclusive. This was chosen as a capture method as it would be the practice of all consultant neurologists working in Northern Ireland to exclude CVST prior to confirming a diagnosis of IIH in line with expert opinion.³

Electronic care records were reviewed and 104 patients with a confirmed new diagnosis of IIH were identified. A limited capture-re-capture exercise was carried out using clinical coding from the RVH site and no new patients were identified. Population data was obtained from NISRA⁴. In cases where only weight was recorded a mean adult height was used to calculate BMI with this number taken from the Health survey for England as no data was available for Northern Ireland ⁵.

Conclusions

We have demonstrated an incidence of IIH in our population higher than that previously reported in the established literature but in line with other studies from Northern Ireland. Our patient demographics are similar to what would be expected in this condition. We suggest that this variance reflects the obesity epidemic and dated studies in the area rather than being a problem unique to our region.

We would hope to take this work forward by creating a centralised patient register so that more detailed epidemiological work can be carried out and real world data on treatment responses can be collated.

References

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