procedures seemed to be possible, and moreover, in these 3 groups, more than 80% of cases harbored the hematomas as large as 3-6 cm in diameter or more.

36. Experimental Studies on Intracerebral Hemorrhage

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The clinicopathological changes in the early stage in experimental intracerebral hemorrhage, which was made by putting the fresh clot into internal capsule, were studied. Results were obtained as follows:

- 1) Blood pressure rised slightly and puls rate showed no changes or decreased. Respiration became rapid immediately after putting and slow lately.
- 2) Cerebrospinal fluid pressure rised immediately 2 or 3 times as normal and maintained in high pressure.
- 3) Cerebral blood flow (carotic artery) and O₂ volume of cerebral blood decreased.
- 4) Cerebral oxygen tention decreased immediatly and recovered in 30 to 60 minutes and then increased afterward.
- 5) O₂ and CO₂ volume of periferal blood showed no marked changes, but O₂ volume of venous blood tended to decrease.
- 6) Leucocyte count did not show any constant changes and blood sugar decreased, and Ht, serum protein showed no changes.

From the above results, it may be concluded that cerebral blood circulation and cerebral metabolism are markedly decreased.

37. The Operation of Hypertensive Intracerebral Hemorrhage

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Twenty cases of massive intracerebral hemorrhage out of 38 surgically treated cases of cerebral apoplexy, including 3 cerebral softenings, were operated upon from 12 hours to 13 days after stroke. And though 18 cases had been complicated