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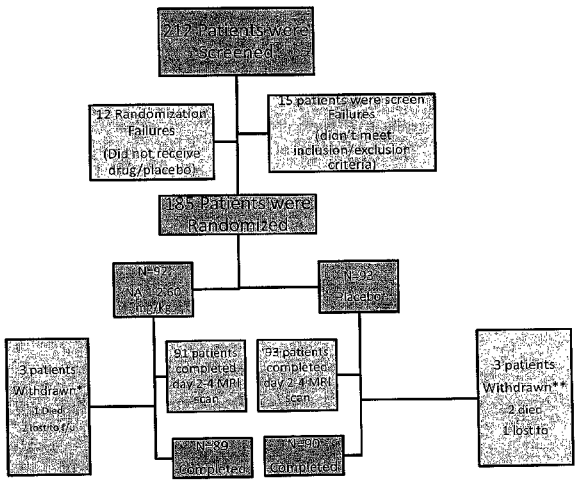
— *with international search report (Art. 21(3))*

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(54) Title: THERAPY FOR SUBARACHNOID HEMORRHAGE AND ISCHEMIA

FIG. 2



* Full set of MRIs (pre- and post- coiling available for 2 of the 3, and included in MRI analysis . 1 patient died before day 2-4 MRI could be performed.
**Full set of MRIs (pre- and post- coiling available for all 3, and included in MRI analysis.

(57) Abstract: The application provides data from a clinical trial of a PSD-95 inhibitor in subjects undergoing endovascular repair of an aneurysm in or otherwise affecting the CNS. The subjects were stratified by whether the aneurysm ruptured before performing the endovascular surgery. Rupture is associated with higher mortality or increased debilitation if a subject survives. The trial provided evidence of significant benefit in subjects with and without aneurysm rupture before endovascular was surgery performed. Surprisingly, the subjects benefitting most from treatment as judged both by pathology and neurocognitive outcome were those in which the aneurysm had ruptured causing a subarachnoid hemorrhage. These data constitute evidence that a PSD-95 inhibitor is beneficial not only in ischemic and hemorrhagic stroke but in forms of hemorrhage in or affecting the CNS, particularly, subarachnoid hemorrhage.

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