

higher median mRS at 1st [3(2–4) vs 1(1–2), $p < 0.001$], and final [2(1–4) vs 1(1 (0–2), $p < 0.001$] follow-up. Conclusions: Patients treated with DC fared worse at every endpoint, which was disproportionate to the difference in presenting WFNS grade. These data do not support the use of DC following microsurgical clipping of a ruptured aneurysm.

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Outcome prediction in patients with aneurysmal subarachnoid hemorrhage undergoing microsurgical aneurysm repair: analysis of a South Australian Cerebrovascular Registry

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doi: 10.1017/cjn.2023.220

Background: Accurate outcome prediction among patients with aneurysmal subarachnoid haemorrhage (aSAH) has remained elusive. We aimed to identify outcome predictors and develop a model to guide clinicians and the families of patients who are being considered for microsurgical repair of a ruptured aneurysm. **Methods:** We identified 246 consecutive patients with aSAH who underwent microsurgical clipping of the culprit aneurysm between 01/09/2011 and 20/07/2020. Independent predictors of outcome were identified using logistic regression and an outcome prediction model was developed. **Results:** Age > 55 (OR 3.35, 95%CI 1.06–10.56, $p = 0.04$), high-grade aSAH (WFNS ≥ 4) (OR 7.82, 95%CI 2.66–22.98, $p < 0.001$) and midline shift of ≥ 5 mm (OR 10.35, 95%CI 3.22–22.23, $p < 0.001$) were all associated with unfavourable outcome (mRS ≥ 4) at a mean of 87.27 (± 53.40) days after ictus. Age > 55 was also associated with inpatient mortality (OR 4.98, 95%CI 1.83–13.54, $p = 0.002$) and unfavourable outcome at final follow-up (OR 3.76, 95%CI 1.26–11.20, $p = 0.002$). Furthermore, midline shift of > 5 mm was significantly associated with inpatient mortality (OR 5.55, 95%CI 1.74–17.64, $p = 0.004$) and unfavourable outcome at final follow-up (OR 9.71, 95%CI 3.25–29.04, $p < 0.001$). **Conclusions:** Older age, poorer presenting WFNS grade and increased mass effect are all associated with poorer outcome among patients undergoing microsurgical clipping of a ruptured aneurysm. These data have been used to construct an outcome prediction model for these patients.

OTHER MULTIDISCIPLINARY

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Women in Canadian neurosurgery: an update

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doi: 10.1017/cjn.2023.221

Background: Women continue to represent a minority of the neurosurgery workforce in Canada. We herein aim to provide an

update of the current Canadian landscape to gain a better understanding of the factors contributing to this disparity. **Methods:** Chain-referral sampling, interviews, personal communications, and online resources were used as data sources. Online survey results obtained from women attending neurosurgeons across Canada were also utilized. Quantitative analyses were performed, including summary and comparative statistics. Qualitative analyses of free-text responses were performed using axial and open coding. **Results:** We observe a positive trend in the incoming and graduating of female residents across the country, although this trend is lagging compared to other surgical specialties. The proportion of women in active practice remains low. Positive enabling factors for success include supportive colleagues and work environment (52.6%), academic accomplishments (36.8%), and advanced fellowship training (47.4%). Perceived barriers reported included inequalities regarding career advancement opportunities (57.8%), conflicting professional and personal interests (57.8%), and lack of mentorship (36.8%). **Conclusions:** Women continue to represent a small proportion of practicing neurosurgeons across Canada. Our work highlights several key factors contributing to the low representation of women in neurosurgery and identifies actionable items that can be addressed by training programs and institutions.

OTHER NEUROSURGERY

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Neurosurgery research output in The Association of Southeast Asian Nations (ASEAN) region: a scientometric analysis

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doi: 10.1017/cjn.2023.222

Background: Various challenges and innovations have led to the evolution of neurosurgery in the ASEAN region. This has increased interest among neurosurgeons to publish research papers for the past years. The study aims to compare the publication trend, and topic trend on research in the region using scientometric techniques. **Methods:** Publications from Web of Science (WoS) using the keywords “neurosurgery” OR “neurological surgery.” were obtained. Results only included English articles published from ASEAN countries. Publication, citation, collaboration, and text-co-occurrence analysis were done using WoS and VOSviewer. **Results:** 1951 articles published between 1996 to 2022 were analyzed. The ASEAN countries' productivity are: Singapore (34.07%), Thailand (21.66%), Indonesia (15.25%), Malaysia (14.72%), Philippines (5.99%), Vietnam (5.15%), Cambodia (1.78%), Myanmar (1.16%), Brunei (0.21%). Singapore, Thailand, Malaysia, and Indonesia were the top research collaborators. Publications have clusters of co-occurring keywords: (1) seizure, aneurysm, pain; (2) traumatic brain injury, mortality, functional outcome; (3) technology, application; (4) survey, training; (5) glioblastoma, brain metastases, chemotherapy. **Conclusions:** Trend in publications support the growing importance of neurosurgery. Variations in