

# Bilateral chronic subdural hematoma

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## Definition

A bilateral [chronic subdural hematoma](#) (bCSDH) is a [condition](#) where there is an [accumulation](#) of [blood](#) in the [subdural space](#) on both [hemispheres](#) of the [brain](#). These [hematomas](#) develop over weeks to months, often due to minor [head trauma](#), and can lead to progressive [neurological deficits](#).

## Epidemiology

The overall incidence of [Bilateral Chronic Subdural Hematoma](#) has been reported to vary from 16% to 20%<sup>1) 2) 3)</sup>

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Data on bilateral [chronic subdural hematomas](#) (CSHs) are scant<sup>4)</sup>, including information on the frequency of symptoms, response to various treatments, and postoperative complications, compared with data on unilateral CSH. Bilateral CSHs constitute a fair portion of CSHs, especially in patients older than 75 years and in those with [coagulopathy](#).

## Classification

see also [Chronic subdural hematoma classification](#)

### Bilateral hypodense chronic subdural hematoma

[Bilateral hypodense chronic subdural hematoma](#).

### Bilateral isodense chronic subdural hematoma

[Bilateral isodense chronic subdural hematoma](#).

## Clinical features

[Bilateral chronic subdural hematoma clinical features](#).

## Diagnosis

[Bilateral chronic subdural hematoma diagnosis](#).

## Differential diagnosis

If the lesion is placed more anteriorly and medially, hyperdense in intensity and enclosed in thick capsule, it may look biconvex in shape and can mimic extradural hematoma. This location of the lesion will also displace the frontal horns of the lateral ventricles laterally than medially, as in the present case. To avoid this confusion, if available, magnetic resonance imaging (MRI) would be better than CT in identifying these lesions <sup>5) 6) 7) 8) 9)</sup>.

## Treatment

see [Bilateral chronic subdural hematoma treatment](#).

## Outcome

Mixed high and low intensity in T2WI or low intensity in T1WI is the most predictable factor to show rapid aggravation <sup>10)</sup>.

Clinicians must be aware of the higher recurrent rate of bilateral CSDH after burr hole craniostomy <sup>11)</sup>.

## Case series

[Bilateral chronic subdural hematoma case series](#)

## Case reports

[Bilateral chronic subdural hematoma case reports](#)

# Bilateral chronic subdural hematoma General University Hospital of Alicante Cases

[Bilateral chronic subdural hematoma General University Hospital of Alicante Cases](#)

<sup>1)</sup>

O. De Jesus, H. Pacheco, B. Negron Chronic and subacute subdural hematoma in the adult population. The Puerto Rico experience P R Health Sci J, 17 (3) 1998

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G. Penchet, H. Loiseau, J.P. Castel Chronic bilateral subdural hematomas Neurochirurgie, 44 (4) (1998), pp. 247-252

<sup>3)</sup>

R.G. Robinson Chronic subdural hematoma: surgical management in 133 patients J Neurosurg, 61 (2) (1984), pp. 263-268

<sup>4)</sup>

Schaller B, Radziwill AJ, Wasner M, Gratzl O, Steck AJ. [Intermittent paraparesis as manifestation of a bilateral chronic subdural hematoma]. Schweiz Med Wochenschr. 1999 Jul 27;129(29-30):1067-72. German. PubMed PMID: 10464909.

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Fujisawa H, Nomura S, Kajiwara K, Kato S, Fujii M, Suzuki M. Various magnetic resonance imaging patterns of chronic subdural hematomas: indicators of the pathogenesis? Neurol Med Chir (Tokyo) 2006;46:333-9.

<sup>6)</sup>

Kelly AB, Zimmerman RD, Snow RB, Gandy SE, Heier LA, Deck MD. Head trauma: Comparison of MR and CT experience in 100 patients. AJNR Am J Neuroradiol. 1988;9:699-708.

<sup>7)</sup>

Guenot M. Chronic subdural haematoma: diagnostic imaging studies. Neurochirurgie. 2001;47:473-8.

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Hosoda K, Tamaki N, Masumura M, Matsumoto S, Maeda F. Magnetic resonance images of chronic subdural hematomas. J Neurosurg. 1987;67:677-83.

<sup>9)</sup>

Agrawal A. Bilateral biconvex frontal chronic subdural hematoma mimicking extradural hematoma. J Surg Tech Case Rep. 2010 Jul;2(2):90-1. doi: 10.4103/2006-8808.73625. PubMed PMID: 22091345; PubMed Central PMCID: PMC3214288.

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