

# Chronic subdural hematoma and cerebral hypotension

Chronic subdural hematoma after ventriculoperitoneal shunt overdrainage

Intracranial hypotension is one of the promoting factors of chronic subdural hematoma.

Rare reports: complication of lumbar drain placement for the management of iatrogenic cerebrospinal fluid leak <sup>1)</sup>.

Case 1 is a 47-year-old man who was admitted with disorientation following 2 week history of orthostatic headache. Spinal fluid pressure was 7mmH<sub>2</sub>O in the lateral recumbent position. CT scan revealed bilateral isodense chronic subdural hematoma. The subdural hematoma reaccumulated 17 days after the first operation.

Case 2 is a 31-year-old woman who was admitted with 4 week history of progressive orthostatic headache accompanied by nausea and vomiting. Spinal fluid pressure was 0 mmH<sub>2</sub>O. CT scan and cerebral angiography showed bilateral chronic subdural hematoma. The hematoma reaccumulated 20 days after the first operation. Six cases including our two cases of primary intracranial hypotension associated with chronic subdural hematoma have been reported. When changes of characters of headache, especially mental symptoms and disturbances of consciousness occurred in patients with chronic orthostatic headache, association of chronic subdural hematoma should be suspected. In cases with chronic subdural hematoma associated with low spinal fluid pressure syndrome, the reaccumulation of hematoma tends to occur after burr hole opening and irrigation of hematoma <sup>2)</sup>

<sup>1)</sup>

Tan VE, Liew D. A case of chronic subdural hematoma following lumbar drainage for the management of iatrogenic cerebrospinal fluid rhinorrhea: pitfalls and lessons. Ear Nose Throat J. 2013 Oct-Nov;92(10-11):513-5. PubMed PMID: 24170465.

<sup>2)</sup>

Ohara K, Seki Y, Maeda T, Aiba T. [Primary intracranial hypotension associated with chronic subdural hematoma-report of 2 cases]. No Shinkei Geka. 1984 Sep;12(10):1203-8. Japanese. PubMed PMID: 6504258.

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