Epidural hematoma calcification

There has been a profound increase in the number of patients undergoing head computed tomography after minor injuries and the identification of intracranial epidural hematomas has risen concurrently. Although emergent craniotomy and evacuation has been the conventional standard for management, some epidural hematomas can be managed nonoperatively in carefully selected patients.

see Intracranial epidural hematoma spontaneous resolution.

Because of the difficulty in clinically monitoring epidural hematoma absorption and resolution because of the attributed risks of imaging radiation exposure in pediatric patients, the exact incidence of epidural hematoma ossification is unknown. Integrating epidural hematoma calcification into management algorithms is not clearly defined in the literature ¹⁾.

Case reports

A 21-year-old female patient was admitted to our hospital after being involved in a motor vehicle accident. An initial cranial CT revealed a right frontal bone fracture. She complained of right frontal headache, but showed no neurological deficit or tendency for bleeding. Therefore, she was treated conservatively without surgical intervention. Follow-up CT revealed an ossified epidural hematoma (EDH) 17 days after the head injury, and the ossification later thickened. However, a decrease in the width of the EDH was observed during the 9 months of follow-up during which serial CT images were acquired. The EDH resolved 9 months after the initial trauma, but the calcification layer remained thickened ²⁾.

Claiborne JR, Hoge MK, Wood BC, Couture DE, David LR. Extradural Ossification Following Epidural Hematoma in Children: A Rare But Significant Entity. J Craniofac Surg. 2015 Jul;26(5):1500-3. doi: 10.1097/SCS.000000000001806. PubMed PMID: 26106995.

Lee BH, Hwang YJ, Choi CY. Serial CT findings of a rapidly calcified epidural hematoma in a young adult: a case report. J Neuroimaging. 2014 Sep-Oct;24(5):531-2. doi: 10.1111/jon.12060. Epub 2013 Nov 19. PubMed PMID: 24251759.

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