

Retroclival epidural hematoma

Tectorial membrane injury with development of an retroclival **epidural hematoma** (REH) is a rare entity in the pediatric population. High-speed motor vehicle accidents (MVAs) are the predominant cause of **injury**, as was also shown in our case series. Young children are more at risk for cervical injury, especially in the occipitoatlantoaxial region ¹⁾.

Traumatic retroclival **epidural hematoma** is very rare and only a few cases are described in literature. All previous cases occurred in the pediatric population and were classically seen in pedestrians or cyclists hit by speeding motor vehicles. It is probable that horizontal articulation between the cranium and the atlas and ligamentous laxity at the craniocervical junction in this age group predispose them to ligamentous injury at the craniospinal junction and formation of retroclival hematoma. MRI or three-dimensional reconstructed CT is considered essential for diagnosing this condition. Conservative treatment is an option if neurological deficits are mild and brainstem compression is not significant. Bony fixation is, however, required if there is suspicion of instability.

CASE REPORT: The authors describe the case of an 8-year-old girl who developed traumatic retroclival epidural hematoma after a motor vehicle accident and who was managed conservatively with good recovery.

CONCLUSION: This case and the review of literature suggest that retroclival epidural hematoma is a pediatric entity usually associated with ligamentous injury at the craniocervical junction ²⁾.

¹⁾

Sun PP, Poffenbarger GJ, Durham S, Zimmerman RA. Spectrum of occipitoatlantoaxial injury in young children. J Neurosurg. 2000 Jul;93(1 Suppl):28-39. PubMed PMID: 10879755.

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Agrawal D, Cochrane DD. Traumatic retroclival epidural hematoma - a pediatric entity? Childs Nerv Syst. 2006 Jul;22(7):670-3. Epub 2006 Mar 21. PubMed PMID: 16550441.

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