

Spinal epidural hematoma case reports

2022

An almost 80-year-old female patient who received long-term oral warfarin therapy for atrial fibrillation. She developed sudden onset waist pain, and 2 days later, she developed pain and weakness in both lower limbs. Computed tomography (CT) of the thoracolumbar spine showed no obvious hematoma. Eight days after admission, contrast-enhanced CT of the thoracolumbar spine showed intraspinal hematomas at T5-T8 and T12-L2 levels. We performed T3-T7 laminectomy, T5-T8 hematoma removal, and spinal dural repair. The clinical symptoms did not improve significantly, postoperatively. The low incidence of spinal epidural hematoma after anticoagulation treatment means this condition is not recognized timely, and it is misdiagnosed easily. Clinicians should consider this condition when patients treated with anticoagulants have neurological deficits below a spinal segmental plane ¹⁾.

2018

A previously healthy 13-year-old girl presented with a 9-day history of acute onset severe neck pain associated with limited range of movement. Medical evaluation at day 2 was suggestive of muscle contracture, and she was discharged home with [diazepam](#), antiinflammatory agents, and rest; however, she returned because of progressive clinical worsening with left arm distal paresthesia and paralysis since day 3. There was no history of trauma or other systemic complaints, and her familial medical history was unremarkable. Physical examination revealed left cervical and paravertebral tenderness on palpation with severe limitation of cervical and trunk movements; neurologic examination revealed left forearm and hand weakness and paralysis (grade II/V) with thenar/hypothenar atrophy. Laboratory studies including coagulation profile were normal. Magnetic resonance imaging revealed an epidural hematoma from C4-T1 without underlying cause apparent on magnetic resonance angiography. On day 12, she underwent C3-7 laminotomy with laminoplasty and complete drainage of the hematoma. After 5 months of follow-up, she displays no neurological deficits. The spontaneous spinal epidural hematoma is a rare neurosurgical emergency in children. It usually presents acutely with neurologic deficits, but the initial presentation may be atypical or insidious, delaying diagnosis and intervention. Definitive diagnosis is made by magnetic resonance imaging and implies a high index of suspicion. Surgical drainage of the hematoma is the mainstay of treatment with favorable prognosis even in cases with a delayed diagnosis ²⁾.

2016

A 2-year-old boy with a large spinal epidural hematoma resulting after an event of nonaccidental injury, specifically, domestic child abuse. This patient exhibited no focal neurological deficits and was managed conservatively without surgical clot evacuation. On a follow-up visit, repeat imaging studies demonstrated a stable resolution of spinal epidural hematoma, providing further support for the safety of conservative management in these patients ³⁾

2014

Buvanendran et al. first reported a case of aspirin leading to an epidural hematoma following an interventional chronic pain procedure. Prior to interventional pain procedures, one should contemplate cessation of aspirin therapy because there are, at present, no consensus guidelines to direct such a decision ⁴⁾.

1)

Li X, Zeng Z, Yang Y, Ding W, Wang L, Xu Y, Yang W, Bi W. Warfarin-related epidural hematoma: a case report. J Int Med Res. 2022 Mar;50(3):3000605221082891. doi: 10.1177/03000605221082891. PMID: 35317631; PMCID: PMC8949737.

2)

Ayres Pereira Harry Leite MIB, Alves SAF, Reinas RPV, Rodrigues MG, Garrido ASMDN, da Cunha OP, Rodrigues JSO, Santos Poças MFO, Resende Martins MAL. Sudden Onset of Severe Cervical Pain in an Adolescent Girl: Case Report and Review of Literature. Pediatr Emerg Care. 2018 Feb 28. doi: 10.1097/PEC.0000000000001437. [Epub ahead of print] PubMed PMID: 29489609.

3)

Rangwala SD, Birk DM, Tobin MK, Hahn YS, Nikas DC. Spontaneous Resolution of Spinal Epidural Hematoma Resulting from Domestic Child Abuse: Case Report. Pediatr Neurosurg. 2016 Sep 20. [Epub ahead of print] PubMed PMID: 27644085.

4)

Buvanendran A, Young AC. Spinal epidural hematoma after spinal cord stimulator trial lead placement in a patient taking aspirin. Reg Anesth Pain Med. 2014 Jan-Feb;39(1):70-2. doi: 10.1097/AAP.000000000000029. PubMed PMID: 24310047.

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