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C0109 - REMOTE SITE SUPRATENTORIAL HEMORRHAGE: CASE REPORT AND LITERATURE REVIEW

P. González Vargas, J. Thenier, R. Galárraga, A. de la Lama and C. Conde

Hospital Álvaro Cunqueiro, Vigo, Spain.

Resumen

Objectives: Remote site intracranial haemorrhage is a complication of very low incidence consisting of a spontaneous bleeding at a distance from the site of the craniotomy. Remote cerebellar hemorrhages are the most frequent presentation and occur in 0.08-0.6% of cases. However, the supratentorial ones are even less frequent. They have been described after supratentorial craniotomies, burr holes for evacuation of hematomas or trans-sphenoidal processes. The pathophysiology remains unknown, however, hypotheses have been raised about the substantial loss of cerebrospinal fluid during surgery the main reason for this complication.

Methods: We present a case of a patient who, after a surgical procedure, developed a supratentorial remote hematoma and reviewed the literature.

Results: A 65-year-old woman attending our center due to progressive headache and decreased visual acuity of six months of evolution. It was assessed by its Primary Care Physician and after performing Magnetic Resonance is sent to our service for evidence of homogeneous mass in the suprasellar region with peripheral contrast uptake suggestive of craniopharyngioma. We performed excision of the supratentorial lesion through left fronto-pterional craniotomy, without complications in the immediate postoperative period. When performing control CT, a spontaneous hyperdense lesion was observed in the right temporo-occipital region suggestive of a remote hematoma. The patient remained hospitalized for seven days with good progression and indicated the clinical discharge without relevant facts.

Conclusions: Remote postoperative hematomas are uncommon complications but to be taken into account especially in those where the cisterns or the ventricular system are exposed, producing sudden changes in the pressures of cerebrospinal fluid. There are no pre or post-operative factors that can predict the occurrence of this phenomenon. The presence of a remote hematoma should be part of the differential diagnosis of those that cause deterioration of the level of consciousness in a patient exposed to a neuro-surgical procedure.

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