22. Infantile Obstructive Hydrocephalus such as Dandy-Walker Syndrome, Septum Pellucidum Tumor, and Subdural Hematoma

Report of Five Cases

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There are some difficult problems in treatment of infantile neurological patients in comparison with adult ones. That is, inadequate to catch neurological findings exactly; difference of ventricular system on X-rays, and of cerebrovascular system on angiograms. Such obstructive hydrocephalies have been presented here as various diagnostic attempts were requested. (Case 1): A girl aged 2 months, born on Cæsarean section, was admitted to our department with a big head and vomiting. The girl's poor conduction was not permitted to carry out a bubbling air study completely through a fontanel, so that PVG, MVG through a burr hole could not help being employed. Thus, Dandy-Walker syndrome was revealed, and Pudenz's shunt was performed. (Case 2): A boy aged 5 months showed too raised intracranial pressure to perform a bubbling air study. PVG and fractional PEG disclosed Dandy-Walker syndrome. A third ventriculostomy resulted in ineffective, so Pudenz's shunt was used. (Case 3): A girl aged one year and 8 months developed gait-disturbance, convulsion, somnolence and a big head. CAG did not help on localizing diagnosis. A bubbling air study showed a failure of the third ventricle to be filled up. Upon the her family's request for shunt operation, Pudenz's shunt was performed. Agreement on a craniotomy made it possible to use MVG which revealed an obstruction of the foramen Monro. The craniotomy showed a septum pellucidum tumor, which was subtotally removed. (Case 4): A boy aged 9 months, born by forceps delivery, developed a big head and vomiting. CGA revealed bilateral subdural hematomas, which were treated surgically. (Case 5): An one year-old boy fell down 50 cm., and two weeks later developed status epilepticus. PVG and CAG disclosed bilateral subdural hematomas, for which Flemming's operation was employed. Such cases have been reported.