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 Casea-
rean section, was admitted to our department with a big head and vomiting. The
girl's poor condition 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. Agree-
ment 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.