G-7. Infantile Subdural Hematoma

Long-term Follow up of 49 Patients

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Acute subdural hematoma—Of the 16 cases in this study, 50% died in hospital and 1 case after discharge. From the follow-up study, five living patients, 27% of the entire group, were classified as being socially acceptable, although one of them showed some degree of mental retardation (IQ 60).

Chronic subdural hematoma—The prognosis was very poor. The 30 patients were grouped according to the probable etiology of the lesion. In the first group (prenatal brain lesion), there were 7 patients. Four of them died soon or later. The second group consisted of eleven patients having birth injury. Two of them died, and the remainders were psychosomatically retarded in various degree. The third group consisted of 5 patients with unknown origin. All were dead, 3 in hospital and 2 after discharge. The fourth group was post-natal head injury, in which 2 died and 5 survived. Two were normal, 3 had neurological deficits and developmental retardation.

In our entire series, there were 49 patients (including both acute and chronic), 47% died, 59% retarded at the time of follow up. We discussed about the choice and the result of the treatment, with special emphasis of IQ of 16 patients.

We felt that the most significant factor in determining the prognosis might be the extent of cortical atrophy visualized at angiography and operation. Many children with large hematoma and atrophic cortex were dead or severely retarded in our series.

G-8. Acute Subdural Hematoma in Infancy

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Acute subdural hematoma in infant has several peculiar characteristics compared with adult case. From our 10 cases experience in the past, the correlations between the onset and interval up to the operation and prognosis were evaluated.