



Neurocirugía

<https://www.revistaneurocirugia.com>



P0290 - INTRACRANIAL HYPOTENSION FOLLOWING IMPLANTATION OF DRUG DELIVERY DEVICE

L. Torres Brunet, M.C. Joly Torta, M. Castellví Juan, J.L. Caro Cardera and J. de Manuel-Rimbau Muñoz

Hospital Universitari Dr. Josep Trueta, Girona, Spain.

Resumen

Objectives: Report a case of bilateral subacute subdural hematoma following implantation of intrathecal baclofen pump and review the literature related to this topic.

Methods: Medical records and imaging of a patient with intracranial hypotension due to implantation of drug delivery device was reviewed. For the literature review, Cochrane Database and PubMed were used, with the following terms: intracranial hypotension and drug delivery device, intracranial hypotension and baclofen pump, subdural hematoma and drug delivery device.

Results: We present a case of a 50-year-old woman with multiple sclerosis and refractory spasticity that developed orthostatic headache, somnolence and gait impairment one month after the placement of intrathecal baclofen pump. CT revealed bilateral subacute hematoma and signs of herniation. MRI showed signs of intracranial hypotension. The patient underwent surgery to withdraw the intrathecal lumbar catheter of the pump and perform an epidural blood patch. Nevertheless, the size of subdural hematoma did not decrease and patient didn't improve, deciding to drain the hematoma with bilateral craniotomy. The patient then improved back to her normal neurological baseline.

Conclusions: Although it has been rarely reported, this potentially severe complication in patients who underwent intrathecal device placement should be taken into account if intracranial hypotension symptoms occur. In these cases, epidural blood patch can be effective to treat the cause, but it may be not enough to solve the consequences of intracranial hypotension, as subdural hematoma.