

Chronic subdural haematoma: Case series of operated patients from a tertiary care center

Prashant Kumar, Viraat Harsh, Hemant Alda, Chandra B Sahay and Anil Kumar
Rajendra Institute of Medical Sciences, India

Objective: In this article we attempt to highlight the clinical, epidemiological profile and surgical outcomes of chronic subdural haematoma in our institute, Rajendra Institute of Medical Sciences, Ranchi, Jharkhand.

Materials and Methods: A retrospective review of data obtained from patients admitted in the Department of Neurosurgery of our institute with CT diagnosis of CSDH and operated between 1st January 2015 to 30th August 2017 was done and pre-op, post-op data analyzed. Burr hole craniotomy was the operative technique of choice. For all patients two burr holes were done on the side of lesion and minivacuum drain was applied for 2 days.

Results: Of 320 patients operated in the study duration, 253 (79.07%) were male and male to female ratio was 4:1. 251(78.43%) patients were >50 years old. Mean age was

found to be 59 with range from 4 years to 98 years. Clear history of trauma was found in 246(76.88%) patients. In those presenting with a history of trauma, mean duration of presentation after trauma was 44 days. Most common features of presentation were headache(86%), altered consciousness (54%) and weakness(56%). 28(8.75%) patients had bilateral CSDH. Reoperation was required in 27(8.43%) patients. Average presentation with symptoms was after 3 days after the first operation. 9 patients had to be operated thrice.

Conclusion: CSDH is a mainly a disease of elderly (>50 years). Any adult patient presenting with headache, dementia and focal neurological deficit should be suspected of and investigated for CSDH.

e: prk3396@gmail.com