

EVOLUTION OF A CLINICAL CASE OF PERIMESEENCEPHALIC SUBARACHNOID HEMORRHAGE

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Introduction

Perimezencephalic subarachnoid hemorrhage (SAH) accounts for 5% of all cerebrovascular diseases. This is usually spontaneous and in 15% of cases the etiology remains unknown, but the evolution of the patients is favorable in most cases.

Key words

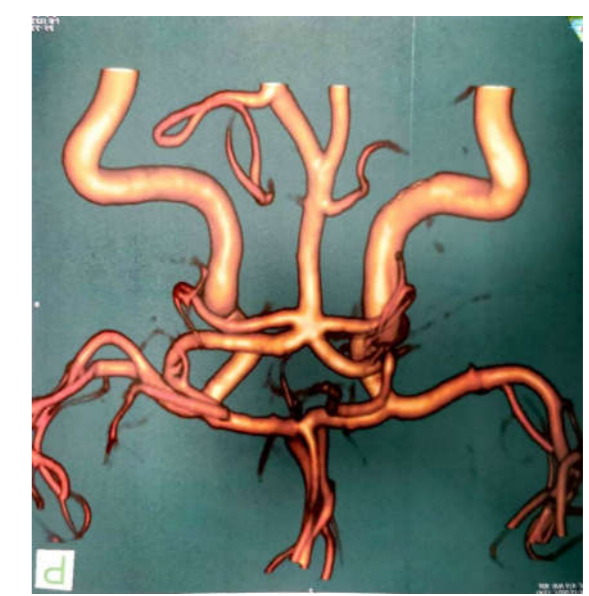
Subarachnoid perimezencephalic hemorrhage, digital subtraction angiography, aneurysm

Purpose

Presentation of a clinical case of spontaneous perimezencephalic SAH in a young patient without cerebrovascular risk factors.

Material and methods

Anamnestic, clinical and laboratory data were taken from the medical history file. The following investigations were performed: computed tomography (CT) of the brain, angioCT of the brain and brachiocephalic vessels, duplex examination of the cerebral and extracerebral vessels, magnetic resonance imaging (MRI) of the brain and digital subtraction angiography. The literature on similar cases has been revised.



Results

Patient, male, 34 years old, employee of special state services, addressed in the Department of Emergency Medicine (DEM) with the most severe headache in his life, VAS 10 p. Following the neurological evaluation of the patient and after performing brain CT scan, the diagnosis of perimezencephalic HSA was established. The patient was examined in detail to determine the source of the bleeding, with no results, confirming the spontaneous etiology of the haemorrhage. Prophylaxis of intracerebral vasospasm with calcium channel blockers was performed and blood pressure was rigorously monitored. The patient was discharged after 20 days of treatment, fully recovered neurologically.

Conclusions

Imaging differentiation between spontaneous perimezencephalic HAS, that is quite rare and that of aneurysmal etiology, which is found in 80%, is essential because the first has a favorable prognosis due to its natural resolution without sequelae.

