

Case Conference

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EMORY
UNIVERSITY

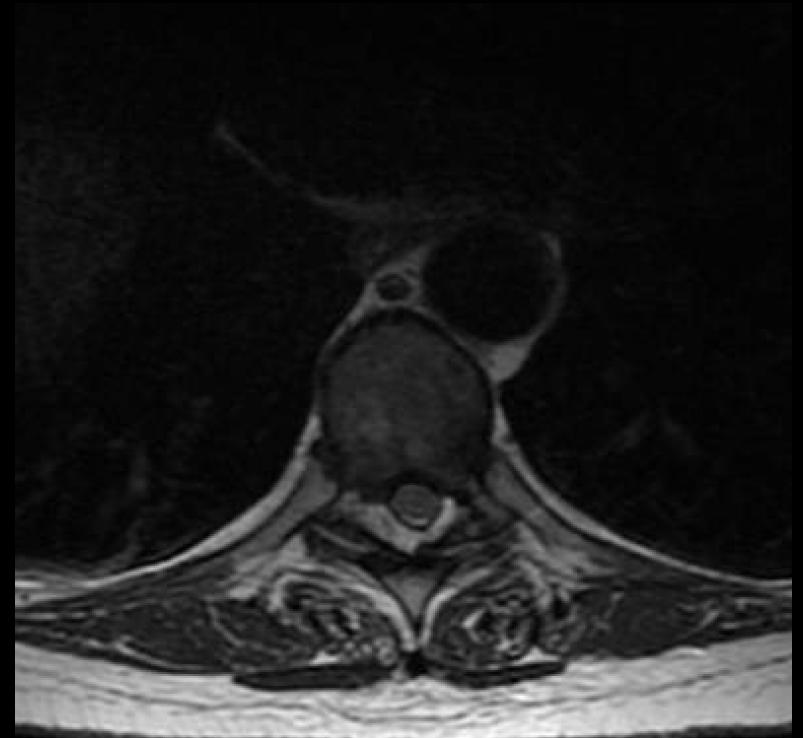
Sag T2



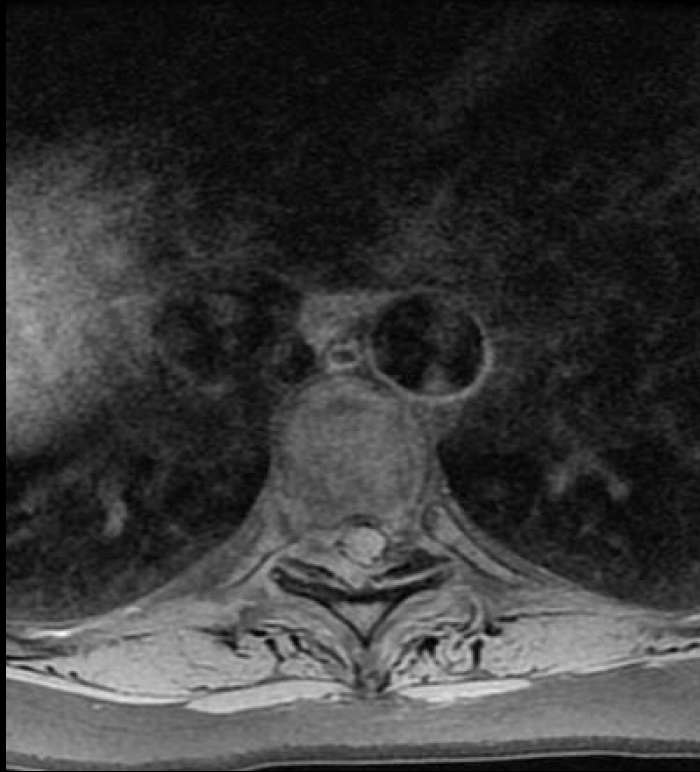
Sag T1



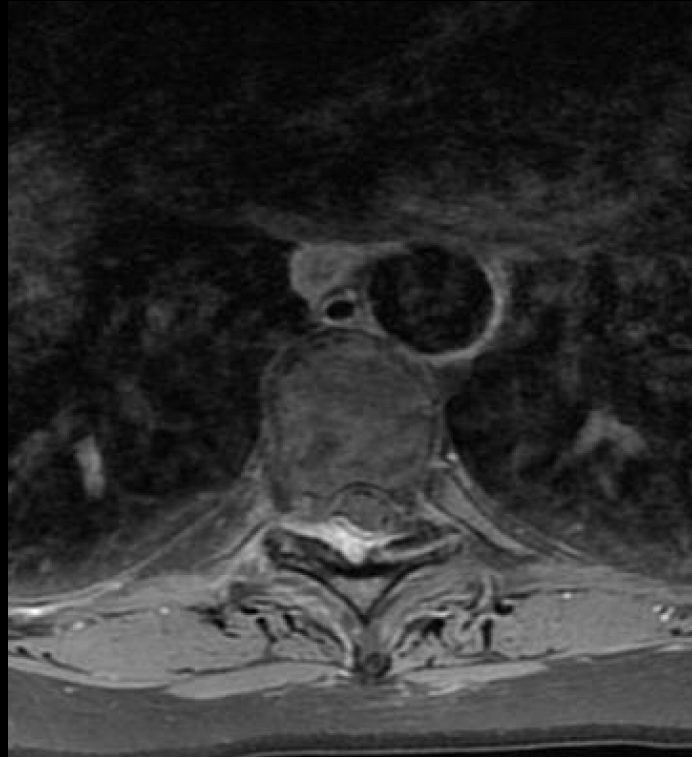
Ax T2



Ax T1FS pre



Ax T1FS post



Sag T1FS post

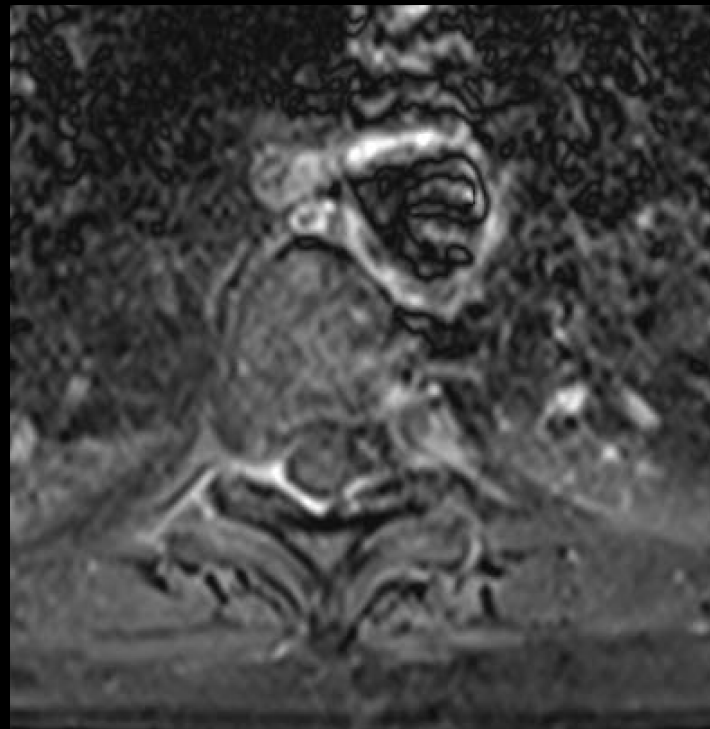


3 WEEKS LATER...

Sag T2



Ax T1FS post



Sag T1FS post



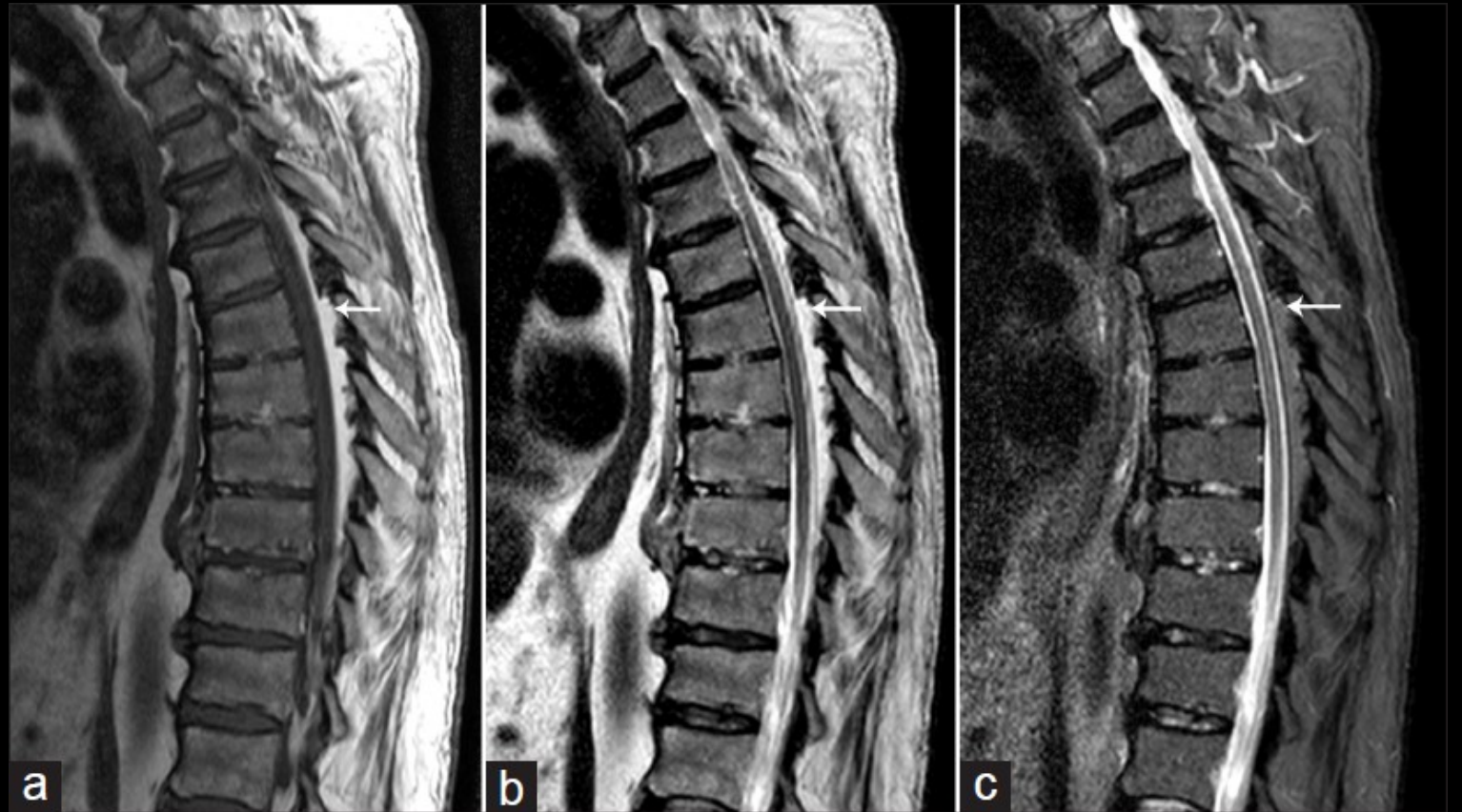
Spontaneous Epidural Hematoma

Spontaneous Epidural Hematoma

- Most occur in males aged 40-60 years
- Predisposing factors
 - Coagulopathy, trauma, instrumentation, vascular malformations, hypertension, pregnancy, infection, advanced age, forceful sneezing, SLE
 - Nearly 50% spontaneous
 - Idiopathic
- Symptoms depend on location and degree of mass effect.
- Considered a surgical emergency
 - Need to be decompressed in < 24 hours

Differential Diagnosis

- Lipomatosis
- Abscess
- Phlegmon
- Angiolipoma
- Tumor (lymphoma)
- Metastasis



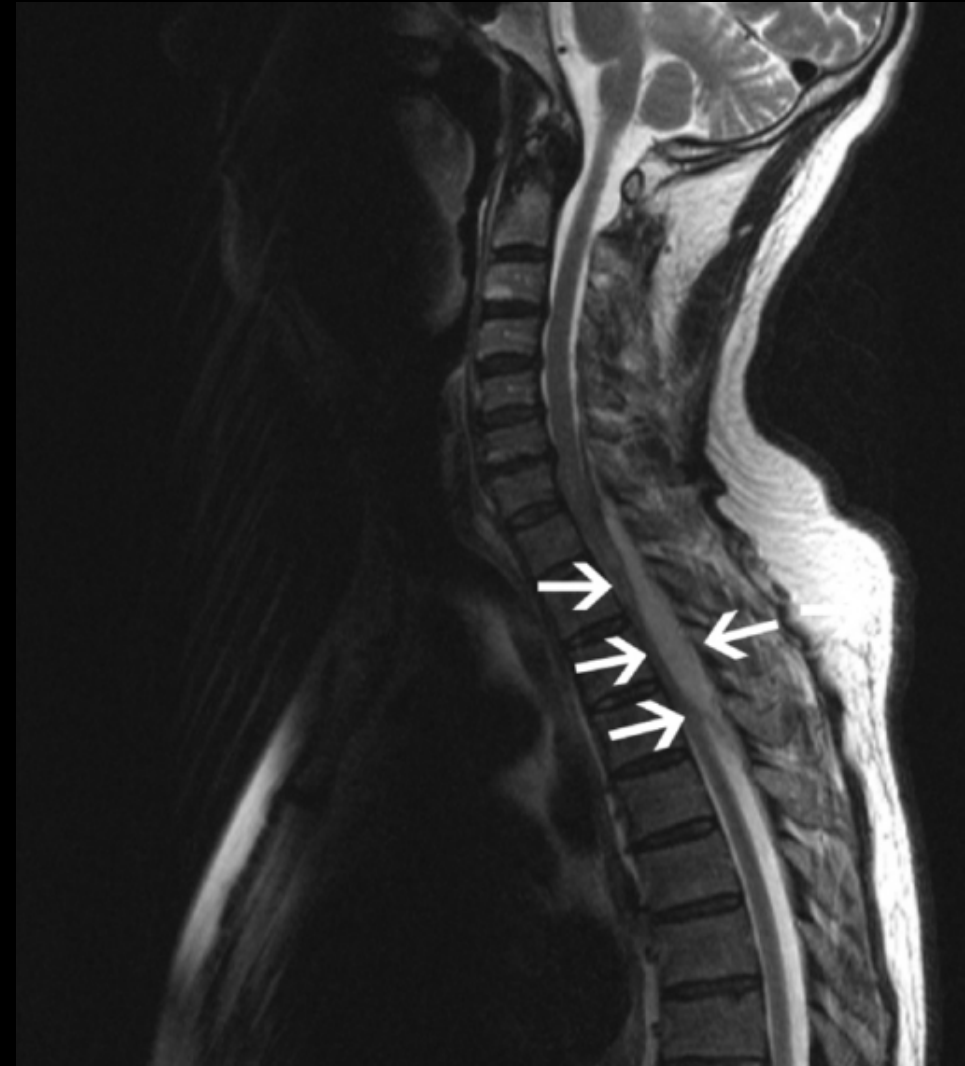
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- Rare benign tumors composed of mature adipocytes and abnormal vessels.
- More frequently encountered in women and typically in middle age
- Can be infiltrating and non-infiltrating

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Differential Diagnosis

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- Abscess
- Phlegmon
- Angiolipoma
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- **Metastasis**



References

- Neuroradiology Companion, Mauricio Castillo
- Radiopaedia.org
- Baek BS, Hur JW, Kwon KY, Lee HK. Spontaneous Spinal Epidural Hematoma. *Journal of Korean Neurosurgical Society*. 2008;44(1):40-42. doi:10.3340/jkns.2008.44.1.40.