

# EPIDURAL HEMORRHAGE



## ■ ■ ■ Description

Epidural hemorrhage is bleeding between the skull and the outermost three membranes (meninges) that cover the brain. This is caused by injury to an artery that courses along the skull. This condition may be confused with meningitis (inflammation of the brain lining). A hematoma (a collection of clotted blood) forms and rapidly enlarges, increasing pressure within the skull and causing symptoms and occasionally death.

## ■ ■ ■ Common Signs and Symptoms

These symptoms develop within 1 to 96 hours after a head injury:

- Headache that steadily worsens, drowsiness or unconsciousness, and nausea or vomiting
- Inability to move arms or legs
- Change in the size of the pupils

## ■ ■ ■ Causes

- Laceration of an artery (middle meningeal artery) that courses along the skull; often associated with skull fracture

## ■ ■ ■ Risk Increases With

- Use of anticoagulant drugs (blood thinners), including aspirin and anti-inflammatory medications
- Bleeding disorders (hemophilia or aplastic anemia)
- Sports such as boxing, football, rugby, hockey, auto racing, motorcycle riding, bicycle racing (road and mountain), and horseback riding

## ■ ■ ■ Preventive Measures

- Avoid head injury.
- Wear proper protective head gear.

## ■ ■ ■ Expected Outcome

The degree of recovery depends on the general health and age of the patient, severity of the injury, rapidity of the treatment, and extensiveness of the bleeding or clot. After the clot is removed, brain tissue that has been compressed usually expands to fill its original space. Quick diagnosis and prompt surgical intervention can often result in complete recovery.

## ■ ■ ■ Possible Complications

- Fatal compression of the brain if bleeding lasts longer than 24 hours
- Permanent brain damage, including partial or complete paralysis, behavioral and personality changes, and speech problems
- Convulsions

## ■ ■ ■ General Treatment Considerations

Extradural bleeding is an emergency that requires rapid treatment to prevent permanent brain damage or death.

Surgical treatment consists of drilling a hole in the skull, draining the blood clot, and clipping or tying off the injured blood vessel (artery). If speech or muscle control has been damaged, you may need physical, occupational, or speech therapy.

Once you have had an epidural hemorrhage, do not participate in contact sports.

## ■ ■ ■ Medication

- Steroid medications and diuretics may be used to reduce swelling inside the skull.
- Anticonvulsant medication to prevent seizures may be prescribed.

## ■ ■ ■ Notify Our Office If

- You develop any symptoms of epidural hematoma or hemorrhage. **This is an emergency.**
- Any of the following occur during treatment:
  - Fever develops
  - Surgical wound becomes red, swollen, or tender
  - Headache worsens
  - Drowsiness increases or unconsciousness develops
  - Nausea or vomiting begin
  - Confusion increases or mental changes develop

Seek medical advice for even a moderate blow to the head.

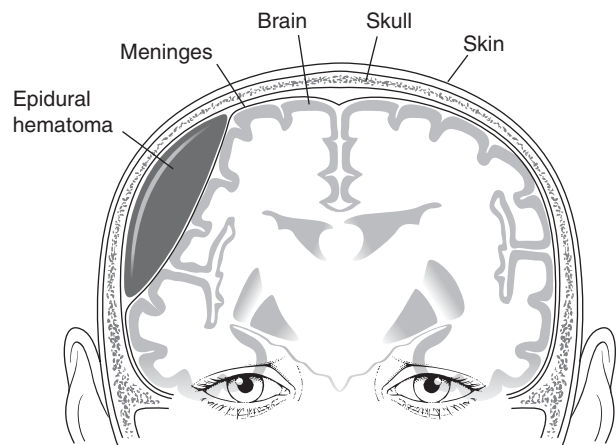


Figure 1

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Notes and suggestions