INTRODUCTION

- Spontaneous subdural hematoma (SDH) is an extremely rare condition with a high mortality rate of 60% to 80%.
- Cirrhotic patients are particularly at higher risk of developing SDH due to underlying thrombocytopenia and coagulation cascade defects.
- Additional contributing factors include cerebral atrophy, anticoagulants use, and vascular malformations commonly seen in cirrhotic patients.

CASE SUMMARY

- A 64-year-old male was admitted to ICU with hemorrhagic shock secondary to bleeding from the urostomy site.
- His past medical history included cryptogenic cirrhosis, esophageal varices, and urinary bladder cancer status post cystectomy.
- He was hypotensive initially due to hemorrhagic shock that responded well to resuscitation and hemostasis of bleeding vessel at the urostomy site.
- The patient was alert and oriented with a GCS of 15 on presentation. His initial laboratory studies revealed Hb 5.2 g/dl, platelet count 62 x 10^3/μL, INR 2.5, and serum albumin 2.1 g/dl.
- Disseminated intravascular coagulation was ruled out based on near-normal thromboelastography and high factor VIII levels.
- The patient’s subsequent hospital course was complicated by a gradual drop in his GCS, and intubation for airway protection, ultimately resulting in coma.
- The initial CT head and MRI brain were unremarkable. EEG showed a diffuse slowing of cortical activity. The patient was treated for presumed hepatic encephalopathy, and spontaneous bacterial peritonitis was ruled out by ascitic fluid analysis.

DISCUSSION

- Due to persistent coma despite lack of sedative medications, MRI brain was repeated post-admit day seven that showed new subacute bilateral subdural hematomas.
- Given the overall dismal prognosis, the patient was not deemed fit for any surgical interventions, and he was placed on comfort measures by the family. He died shortly after.

REFERENCES


Figure 1. Brain MRI showing bilateral frontal SDH abutting the frontal lobes.

Figure 2. Cumulative incidence of subdural hematoma between subjects with and without liver cirrhosis. (Lin YT et al., 2017)