

EDİTÖRE MEKTUP

LETTER TO THE EDITOR

THE CACTUS SHAPED BİFRONTAL HEMATOMA

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To the Editor:

We present a rare of bifrontal hematoma of cactus shape.

A 77 year-old man suffering from hypertension was admitted to emergency service with the complaint of unconsciousness. He had an apneic and irregular respiration. His Glasgow coma scale was 3 (E₁M₁V₁). Pupils were middilated with sluggish reaction to light. Tendon reflexes were decreased in all extremite with bilateral upgoing toe. He needed ventilatory assist after development of respiratory arrest. Computerized tomography revealed a cactus shaped bifrontal hematoma with ventricles fully occupied by blood (Figure). Since his neurologic status had been too poor, cerebral angiography could not be performed. The patient died on the third day of admission.



Figure: CT scan shows cactus shaped bifrontal hematoma and intraventricular hemorrhage.

Bilateral frontal hematomas are less common than unilateral hematomas and they are bilobed, in the shape of butterfly or crescent. The mostly known cause is ruptured anterior communicating artery aneurysm (1,2). Unilateral or bilateral frontal hematoma extending inward from the pericallosal cistern, caval-septal region or interhemispheric fissure is most characteristic of anterior communicating artery aneurysm rupture (3). The hematoma in this case was bifrontally located and was opening to the ventricle. The shape of it was cactus.

In conclusion, bilateral frontal hematoma may also be in cactus shape as they are in butterfly and thick crescent shape.

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