



Good Recovery after Delayed Surgery of Large Epidural Hematoma with Falcine Herniation

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ABSTRACT. Untreated EDH can progress to coma and eventually death. Here, we describe a case that has been **delayed a couple days** for an operation and still be able to go home with **good outcome**. 14 years-old boy came to emergency department with a decrease of consciousness 2 day before. His GCS was 10 and CT showed large left frontal epidural hematoma with falcine herniation. The hematoma removal done the next day after admission. The patient went home without neurological deficit. Conclusion. Delay in treatment has been shown to increase the mortality rate especially with large epidural haematoma. But, this young patient recovered fully after several days brain herniation. Keywords. **Delayed Surgery, Epidural Hematoma, Falcine Herniation, Young Patient**

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Large Epidural Hematoma on Left Frontal Region. There was mass effect, effacement of the left ventricular system, and 1 cm of left-to-right midline shift

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14 years-old boy came to emergency department with a decrease of consciousness. He had motor vehicle collicion 2 days before. He was alert when he fell off; then somebody brought him to the public health center. The doctor there examined him and sent him home. The boy vomited twice and after that he was unconscious and his family brought him to the hospital.

General examination : GCS was 10 and he was able to move all 4 limbs. His pulse was 56x/min and BP 130/80 mmHg. Imaging examination with CT scan had been done within 6 hours in the emergency ward

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Delay in operation of epidural hematoma has been shown to increase their mortality and morbidity.

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This case describes a patient with large frontal epidural hematoma that herniated, but still this patient recovered without neurological deficit.

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This case warrants further study that investigate factors that influence good recovery of young patient after brain herniation due to epidural hematoma.