

### CLINICAL PRESENTATION

75-year-old presents with chronic confusion & cognitive decline. PHx recurrent falls.

What are the findings on the CT brain?

What is the pathophysiology of this presentation?

### IMAGES

CT BRAIN NON-CONTRAST – AXIAL SLICE, BRAIN WINDOW



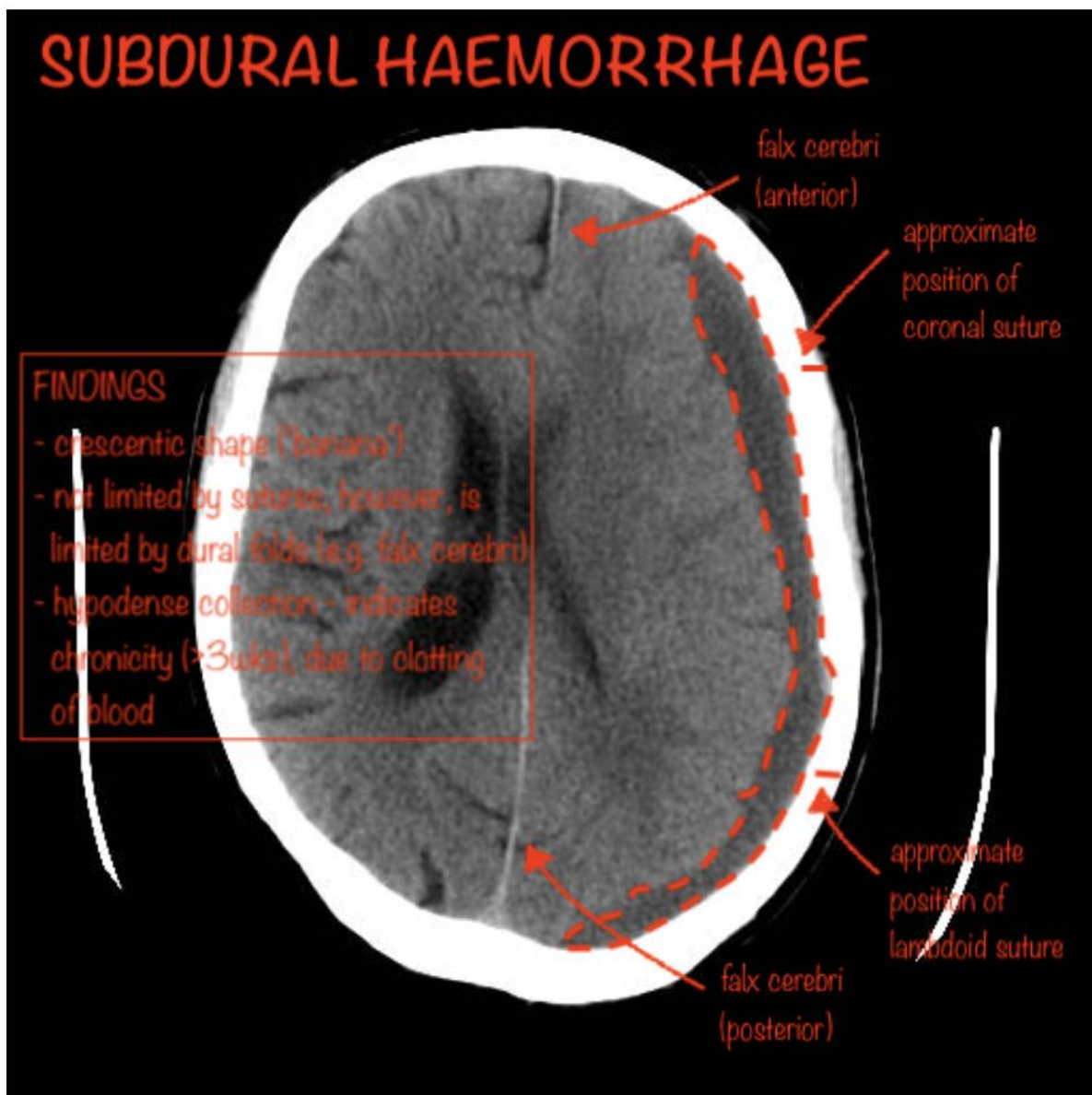
Case courtesy of Dr Jeremy Jones

Radiopaedia.org <https://radiopaedia.org/>

From the case <https://radiopaedia.org/cases/6136> rID: 6136

## ANNOTATE IMAGES – CHRONIC SUBDURAL HAEMORRHAGE

CT BRAIN NON-CONTRAST – AXIAL SLICE, BRAIN WINDOW

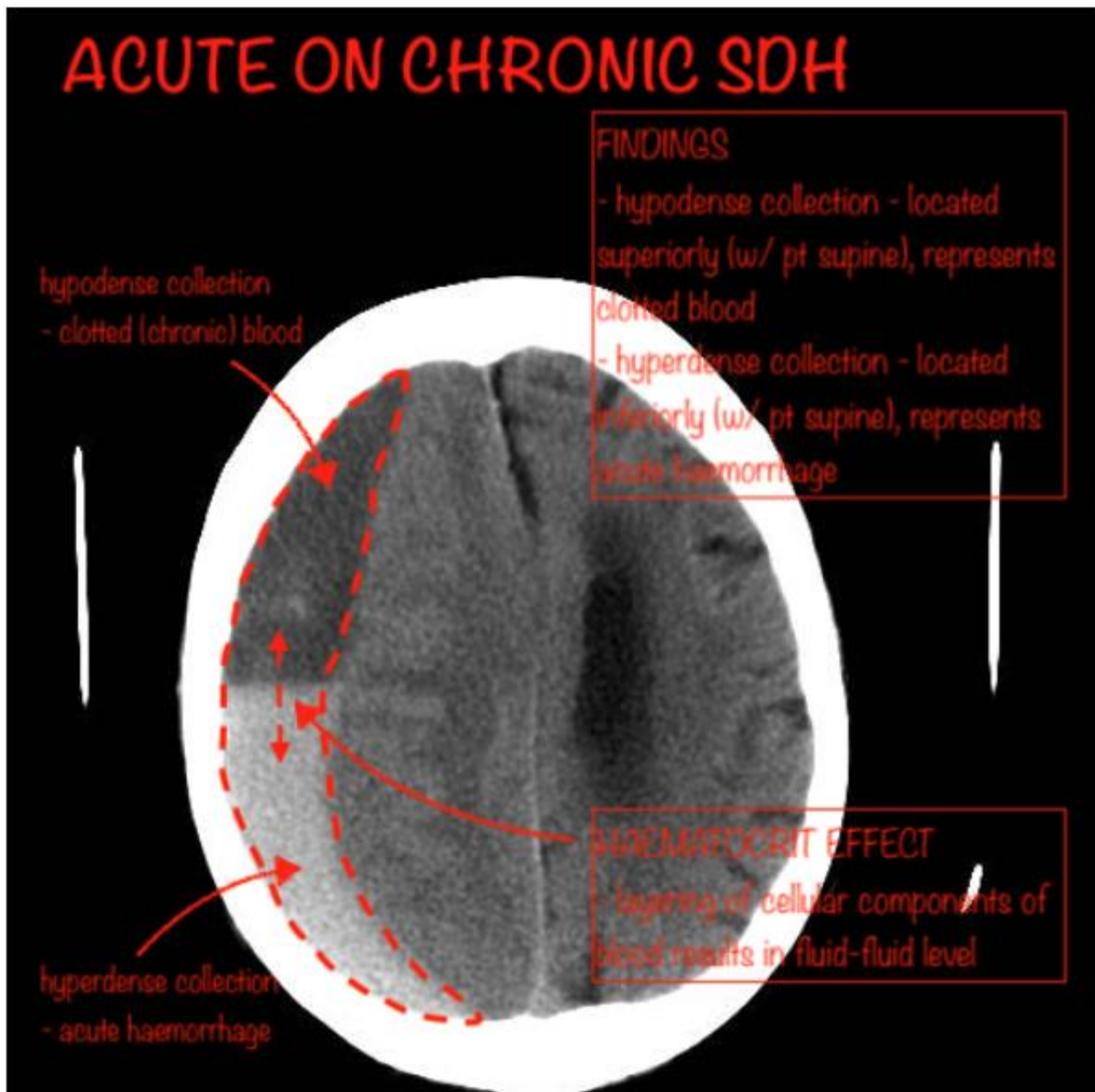


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- Haemorrhage via injury to bridging cortical veins as they drain into dural sinuses.
- Cerebral atrophy with increasing age results in increasing distance such veins have to bridge, as the dura remains adherent to the internal surface of the cranium.
- Clinical presentation:
  - Young patient – often setting of head trauma, more likely acute presentation w/ depressed conscious state & pupillary changes on neuro Ex.
  - Elderly patient – PHx head trauma minor or absent, more likely chronic presentation w/ 'pseudodementia'



Case courtesy of Dr Jeremy Jones

Radiopaedia.org <https://radiopaedia.org/>

From the case <https://radiopaedia.org/cases/6440> rID: 6440

## REFERENCES

<https://radiopaedia.org/articles/haematocrit-effect?lang=gb>

<https://radiopaedia.org/articles/subdural-haemorrhage?lang=gb>

<https://radiologyassistant.nl/neuroradiology/hemorrhage/traumatic-intracranial-haemorrhage>