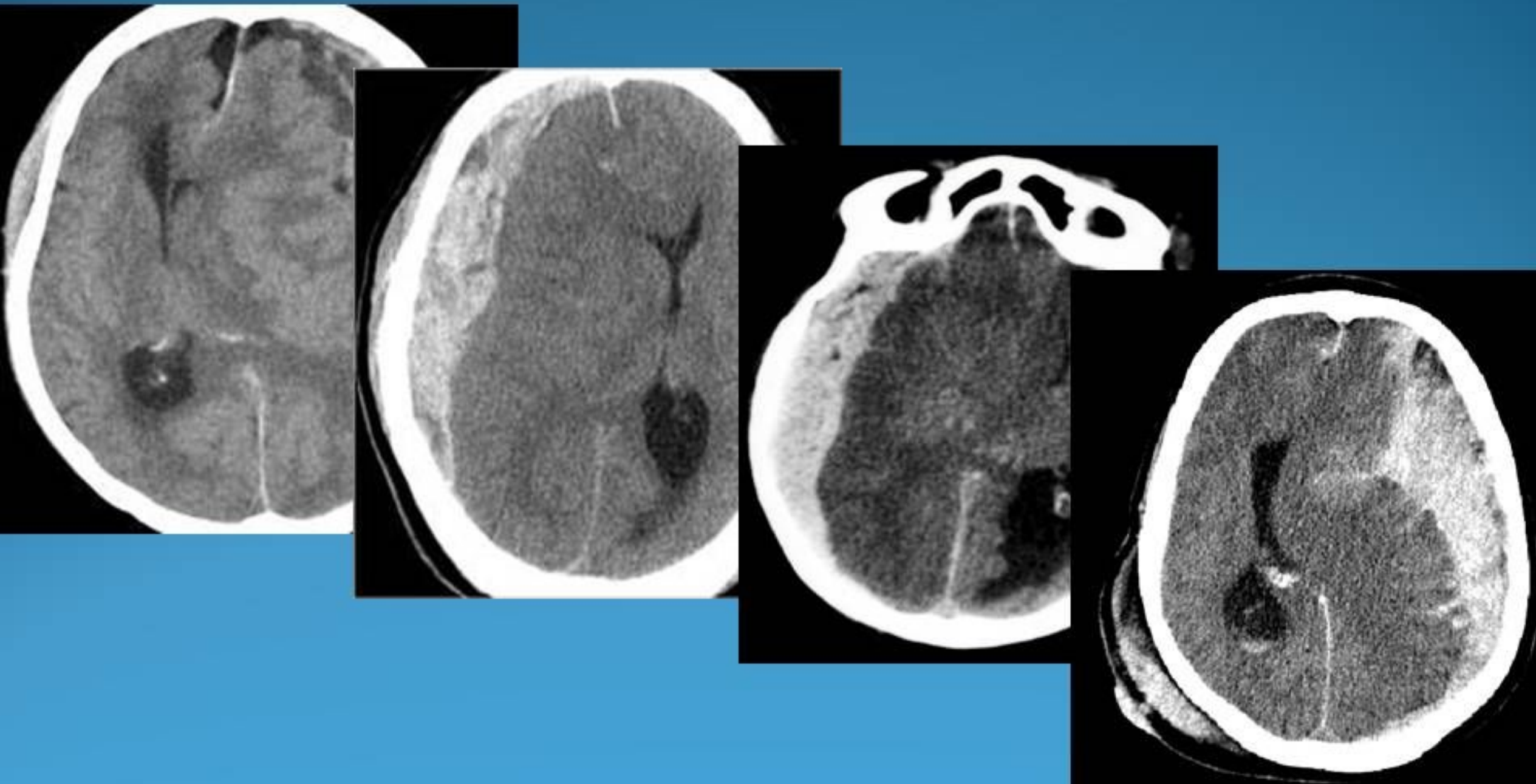


Subduroperitoneal shunts for subdural hematomas in infants

Bs.Đặng Xuân Vinh

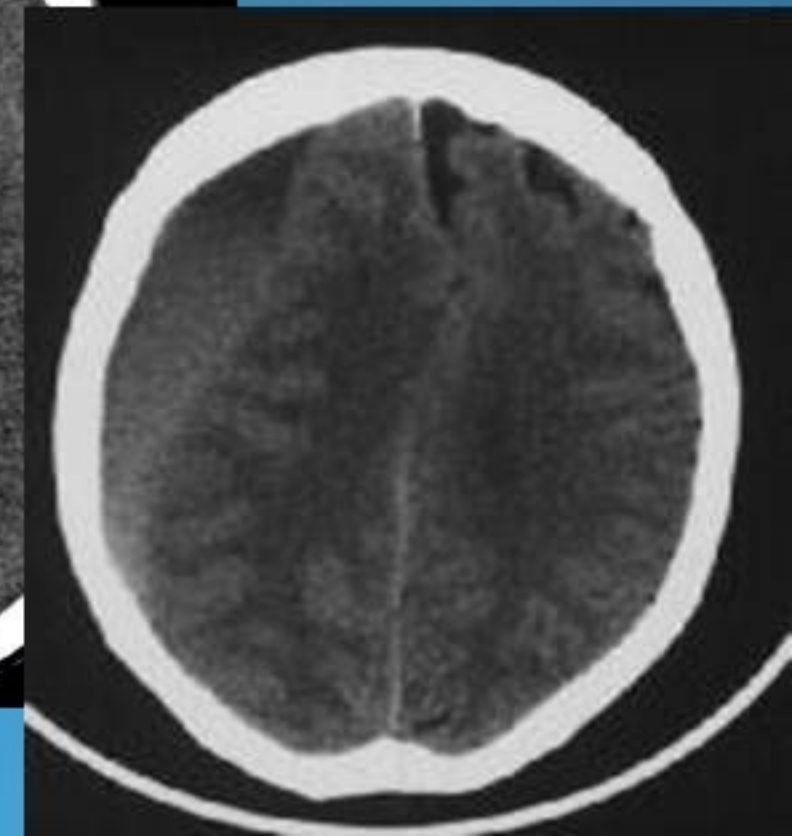
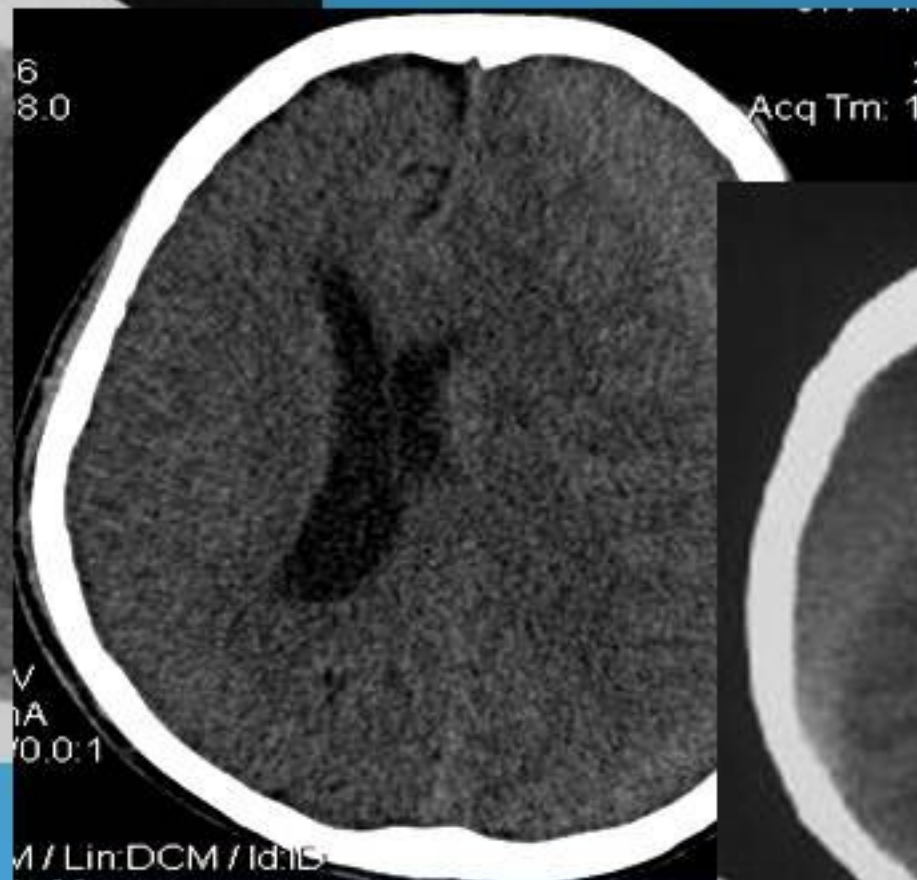
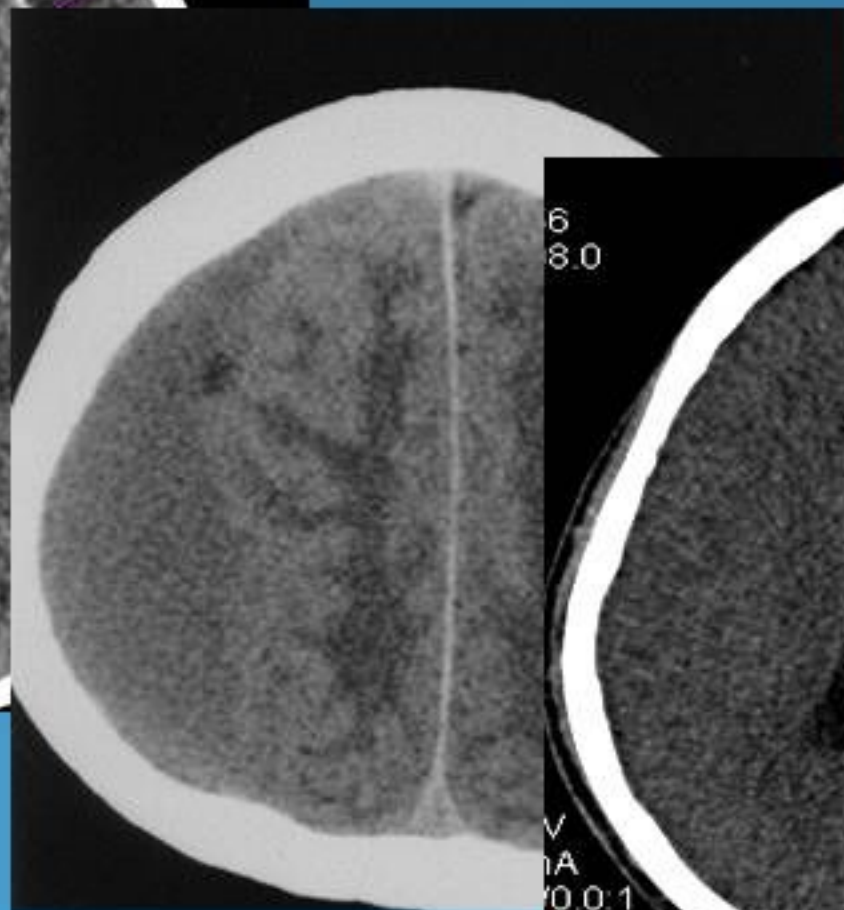
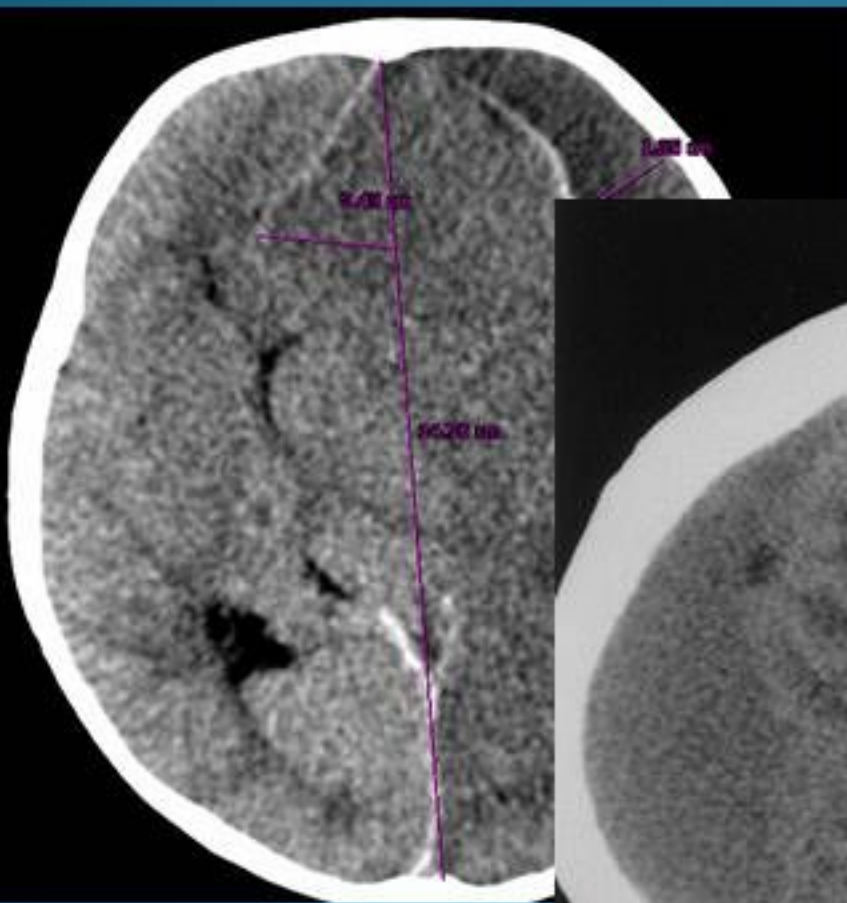
SDP shunts for SDH in infants

-Acute subdural hematoma :



SDP shunts for SDH in infants

-Chronic subdural hematoma :



SDP shunts for SDH in infants

-Chronic subdural hematoma (treatment):

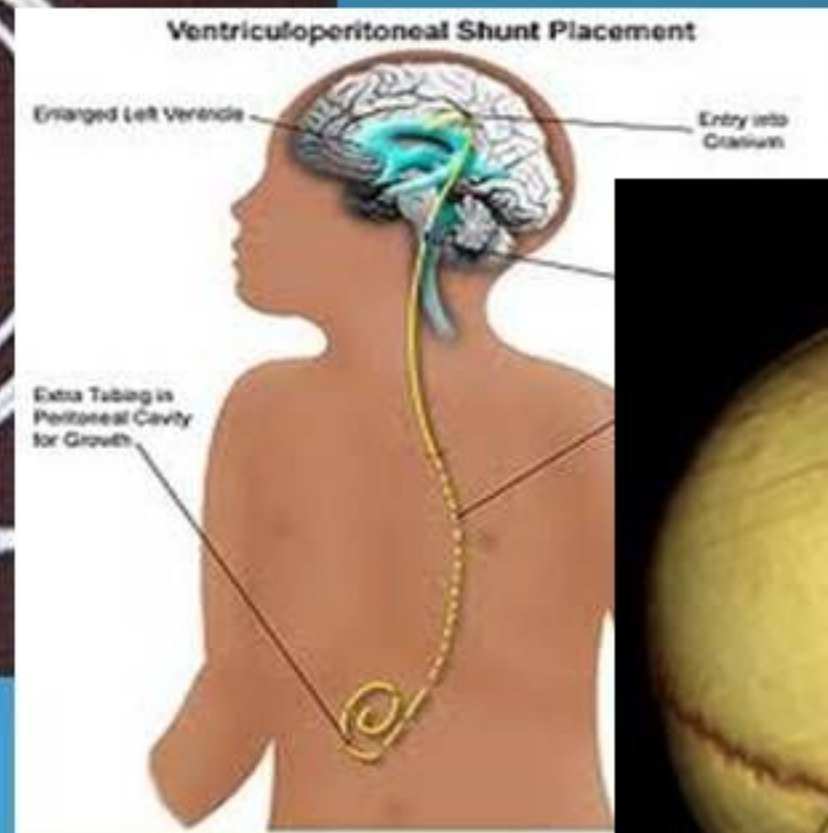
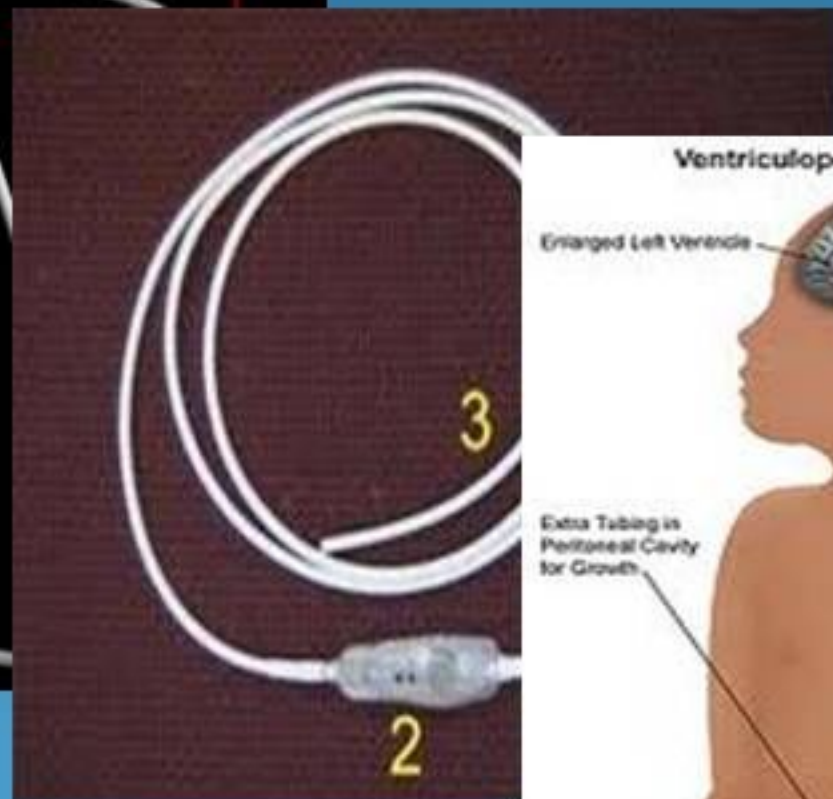
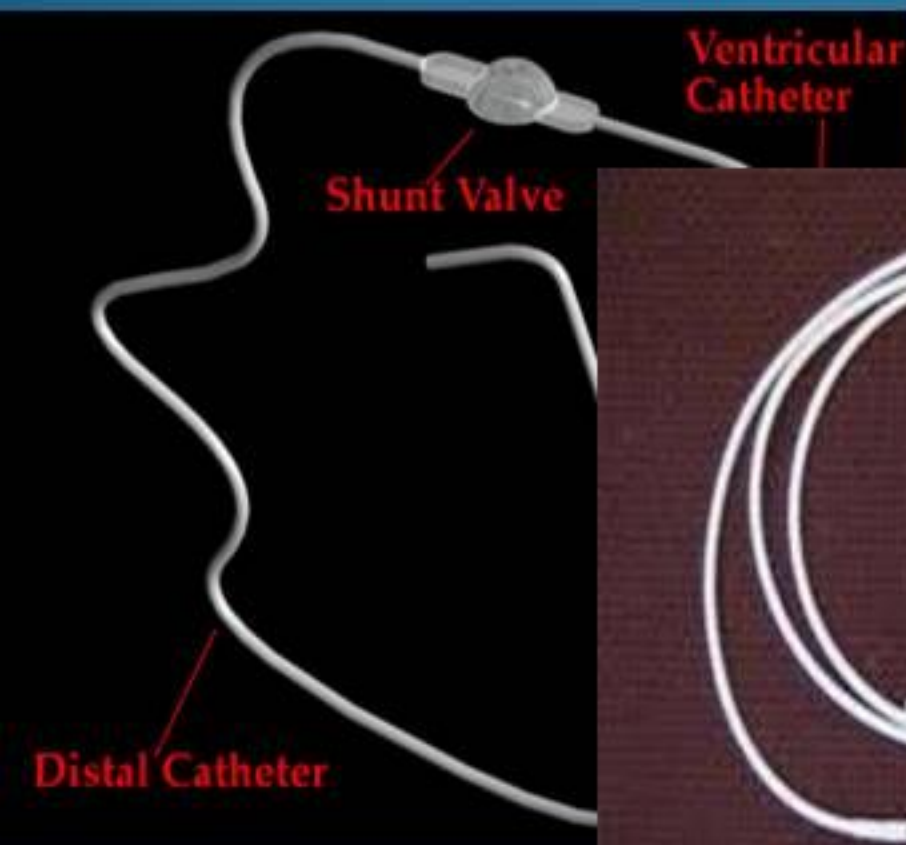
-subdural drain :

-burr holes :

-SDP Shunt :

SDP shunts for SDH in infants

-SDP Shunts:



SDP shunts for SDH in infants

-Complication of SDP Shunt :

- Undershunting
- Infection
- Seizures
- Problems related to the distal catheter
- Skin breakdown over hardware
- Hemorrhage

Factors influencing the complication rate of subduroperitoneal shunt placement for the treatment of subdural hematomas in infants

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MICHEL ZERAH, M.D. PETRA OFNER....

J. Neurosurg: Pediatrics / Volume 106 / March, 2007

Object/Clinical Material and Methods

- 161 infants.
- The Necker–Enfants Malades Hospital in Paris.
- 09/1994 – 01/2003.
- SDP Shunts.

Discussion

- *Causes of SDH.*
- *Presenting Symptoms of SDH: status epilepticus .*
- *Neuroimaging Findings:*
 - *Areas of high density in the subdural fluid collections.*
 - *Ischemic injury.*
 - *Cerebral atrophy and ventricular dilation.*
 - *large- and medium-sized residual SDHs.*
- *Prior Attempts at Drainage.*
- *Surgical Treatment.*
- *Shunt-Related Complications : 22.4%*
- *Duration of Shunt Treatment: 6 ± 4 ms (0-31 ms).*
- *Follow-Up Period : 0-99ms (27 ± 19 , median 25).*

Discussion

- *Shunt-Related Complications :*

obstruction	:27 (16.8)
infection	:8 (5.0)
disconnection	:4 (2.5)
migration	:3 (1.9)
CSF leak/skin ulceration	:2 (1.2)
subdural symptomatic rebleeding	:1 (0.6)

Discussion

- *Other Treatment Measures for SDH :*

- Subdural puncture : other failure rate :6.7-100%.

- bleeding –infection :25%.

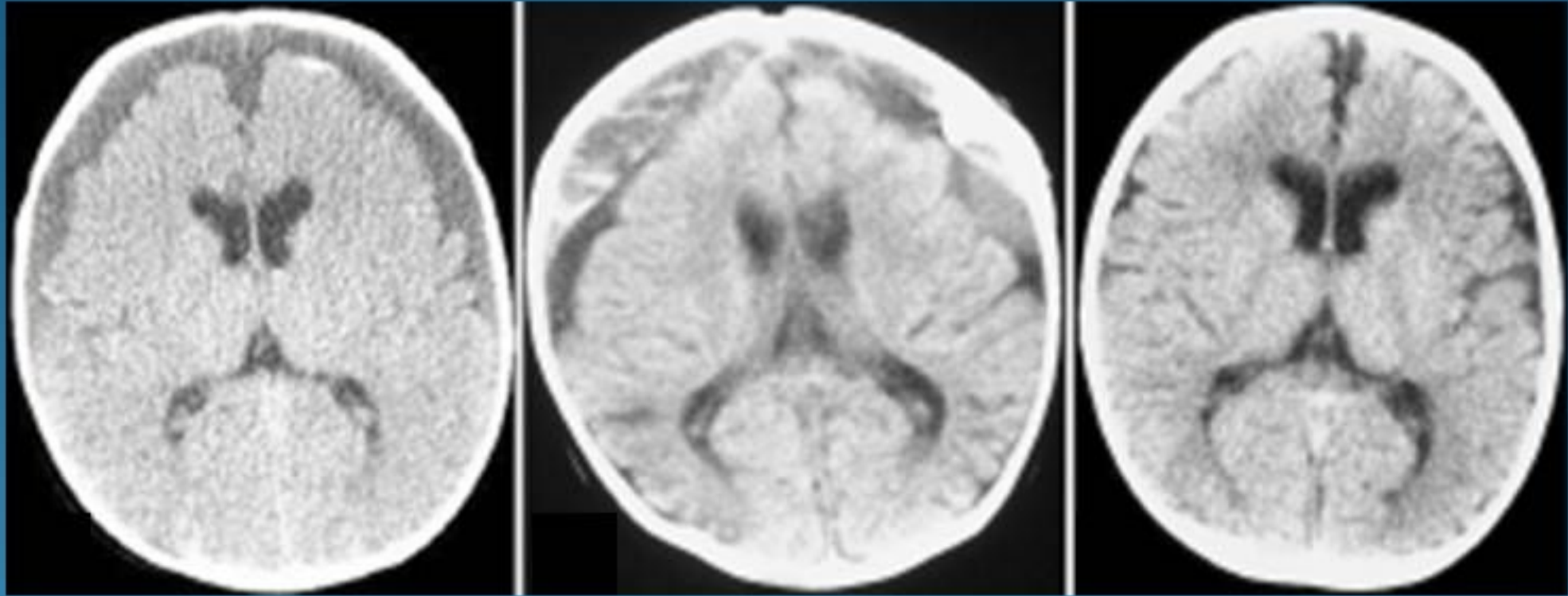
- bur hole drainage .

- ESD:failure rate :5.6-49%→SDP shunt

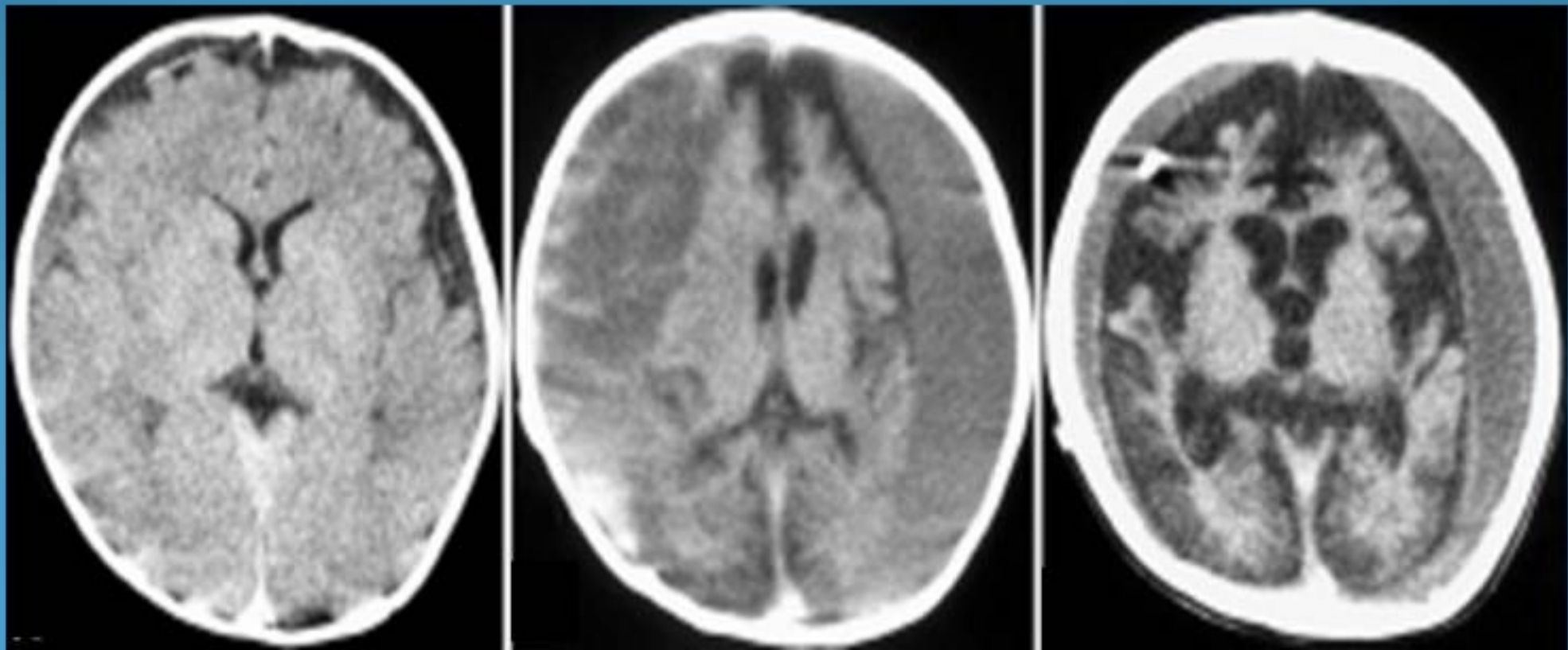
- Complication corresponding to treatment:0-35

Case report

1



2



Conclusions

The early placement of an SDP shunt is in our opinion the best treatment option to control chronic SDH



Tôn trọng và chăm sóc sức khỏe cộng đồng

LỄ KHÁNH THÀNH KHOA NGOẠI THẦN KINH & MỪNG NGÀY QUỐC TẾ THIẾU NHI

01/06/2011

