

NCCT NEGATIVE INTRAVENTRICULAR HEMORRHAGE

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CASE PRESENTATION

A 60 year old male with underlying hypertension visited to emergency department with sudden onset mild to moderate intensity headache. On physical examination patient had HR of 90 b/m, BP of 130/90 with no focal neurological deficit and normal systemic examination. Lab parameters were normal. CT head (fig-1) was done which was normal and patient was managed with simple analgesics. However headache did not subside and headache increased in severity after 2-3 hours. Repeat NCCT head was done which is suggestive of intraventricular hemorrhage (fig-2).



Fig. 1.



Fig. 2.

Non-contrast brain CT is the most useful mode of brain imaging for hemorrhagic stroke. Hence guidelines recommend NCCT for initial brain imaging for stroke patients and patients presenting with severe headache. However There are case reports of CT negative intracranial hemorrhage. In 1 case, a hypertensive thalamic hemorrhage was not detected by NCCT, but was observed by brain MRI taken 12 hours later.

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