

Teaching NeuroImages:

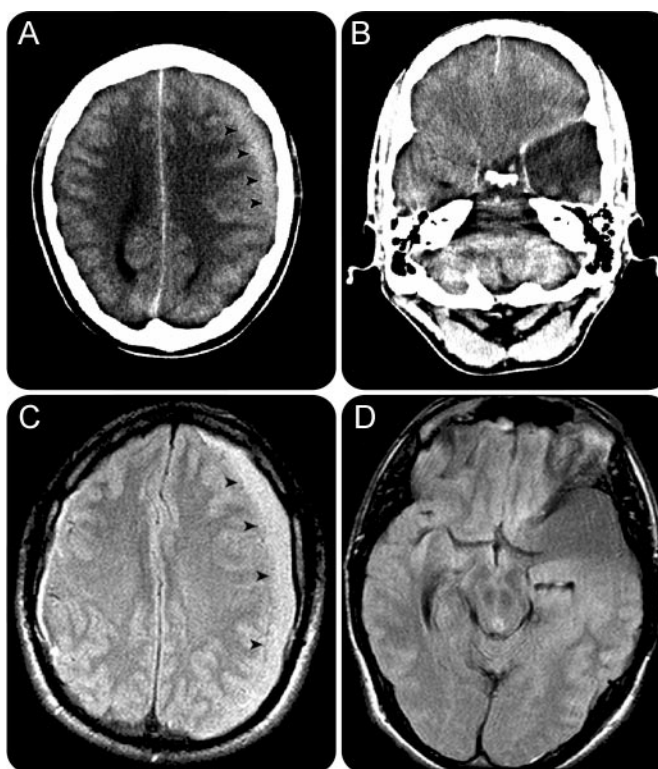
Head banging without head trauma

Subdural hemorrhage in association with arachnoid cysts

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Figure Brain imaging



Nonenhanced CT (A, B) and axial fluid-attenuated inversion recovery MRI (C, D) scans showing the subdural hemorrhage (A, C) and the arachnoid cyst at the left temporal pole (B, D).

A 24-year-old hard rock enthusiast presented with a left-sided, intense headache. He denied head trauma, but reported “head banging” intensively during a rock concert 2 days before admission. There were no neurologic deficits. CT and MRI revealed a left-sided subdural hemorrhage (SDH) and an arachnoid cyst at the left temporal pole (figure). The patient underwent surgical evacuation of the SDH with excellent outcome. Head banging with its brisk forward and backward acceleration and deceleration likely caused the SDH in our patient. Arachnoid cysts as a predi-

posing factor for SDH have been reported previously.^{1,2}

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