

Acute interhemispheric hemorrhage manifesting solely as a headache

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Background Interhemispheric subdural hemorrhage (ISH) is a rare and distinct type of subdural hemorrhage because of their unusual location. The patient with ISH usually reported a sudden onset of painful headache with other neurological deficit. We report unusual two cases of ISH presenting headache as the sole complaint. **Case 1)** A 66-year-old man visited to outpatients' clinic of neurology with a five-day history of headache. His headache was continuous, dull-pulsating in quality and located in bilateral occipitotemporal regions. The physical examinations were normal and there was no traumatic lesion. A CT scan revealed a linear high-density lesion in the posterior interhemispheric fissure, suggestive of acute ICH. Gradient Echo MRI revealed low signal intensity in the same region. **Case 2)** An 81-year-old female visited for a gradually worsening headache for two days. The headache was bilaterally located, pulsating in quality but lasting more than 6 hours in a day. The physical examinations were normal and there was no traumatic lesion. A CT scan showed a hyperdense interhemispheric area on the right with no contrast enhancement and with a moderate mass effect. **Conclusions** The most common cause of ISH is by traumatic laceration of bridging veins between the parietooccipital cortex and the superior sagittal sinus. Even though ISH is a rare event, it should be considered among the diagnostic possibilities in elderly patients who present with headache as the sole symptom without other clinical features such as meningeal irritation signs, focal neurological deficit and alteration of consciousness.