

### **151. Traumatic Acute Intracranial Hematoma of the Posterior Fossa**

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### **152. A Case of Traumatic Pituitary Apoplexy**

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Pituitary apoplexy is a term that has been applied to the acute progression of the signs and symptoms of a pituitary adenoma. In several patients symptoms of pituitary apoplexy began after a head injury.

A 37 year old man without sign of endocrinological abnormality sustained bruises on his forehead and concussion by automobile accident. Four days later he noticed visual loss of his left eye and severe headach. When first seen seven days later, the patient's left pupil was larger than the right and did not react to light, accompanied by left sixth nerve palsy. Lumbar puncture showed xanthochromic fluid with slightly increased pressure (220 mmH<sub>2</sub>O). X-ray of the skull showed slightly enlargement of the sella turcica and carotid angiography showed some widening of the syphon and upward displacement of proximal part of anterior cerebral artery.

Craniotomy twelve days later revealed a bulging of diaphragm sellae and upward compression of optic chiasma and both optic nerves. About 10 ml of dark red to chocolate colored fluid was aspirated from this lesion but no tumor cells were demonstrated under the microscopy. Postoperative course was uneventful and his visual acuity recovered rapidly from 0 to 0.01.

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### **153. Relationship Between Post-traumatic Headache and Cerebral Ultrasonic Attenuation**

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We find out that cerebral ultrasonic attenuation (CUSA) changes in accord-