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Post Partum Subarachnoid Haemorrhage

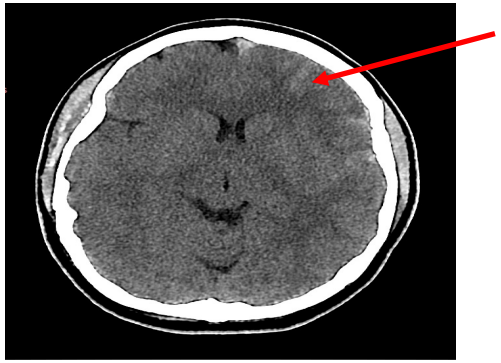
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Introduction

Peri partum intracranial haemorrhage can occur due to a wide range of pathologies. Maternal outcomes vary from mild to catastrophic, depending on aetiology and clinical course of the event. Despite the aforementioned differences, it is always a serious occurrence requiring meticulous management and thorough investigation. Subarachnoid haemorrhage is one of several types of intracranial bleeds and may be due to a ruptured aneurysm, arterio-venous malformations, hypertension-induced vessel rupture and many others.

Case report

A 26 year old healthy primigravida presented with spontaneous onset of labour at 39 weeks following a normal , uncomplicated pregnancy. She requested an epidural early, the insertion of which was successful and resulted in excellent labour analgesia. Due to prolonged second stage of labour, she required forceps delivery in theatre, for which her epidural was successfully toped up. After a quick and uncomplicated instrumental delivery, a healthy baby girl was born. The parturient's observations remained stable throughout the process. 15 minutes after the delivery, the parturient started complaining of headache and vomited once. This was initially thought to be due to administration of uterotonics and simple analgesia was offered but declined. After another 5 minutes a tonic-clonic seizure followed, lasting 3 minutes. This was initially assumed to be eclamptic in origin and was treated with magnesium. Full recovery ensued within a few minutes. Due to lack of any history of pre-eclampsia, normal laboratory tests throughout pregnancy and normal blood pressure throughout pregnancy and labour, CT head was urgently arranged. This showed an acute subarachnoid haemorrhage in the left frontal lobe and within the left sylvian fissure. The patient was transferred to neurosurgical centre and CT angiogram was performed. This did not demonstrate any aneurysms or any other sources of bleeding. She was commenced on Keppra and has remained seizure free as well as free from any neurological sequelae to date.



Discussion

This case demonstrates a postpartum subarachnoid haemorrhage of unknown aetiology. A follow up MRI revealed a small cavernoma in the let motor gyrus, however, it is not clear whether that it was the cause of the bleed. In this case , the outcome was favourable however on literature review it becomes evident that it can carry a very poor maternal and foetal outcome. It is therefore important to remember that not every seizure during pregnancy or peri-partum period is due to eclampsia and a high index of suspicion for other aetiologies must exist among clinicians.

References

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