68 y/o unresponsive male

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Hypertensive intracerebral hemorrhage
Axial NECT of the head demonstrates intraparenchymal hemorrhage (yellow arrows)
Axial NECT of the head demonstrates intraparenchymal hemorrhage (yellow arrows) with extension of blood into the ventricular system (white arrows).
Axial NECT of the head demonstrates intraparenchymal hemorrhage (yellow arrows) with extension of blood into the ventricular system (white arrows). There is subfalcine herniation to the right due to mass effect (blue arrow).
Intraventricular hemorrhage with extension into the fourth ventricle (yellow arrow). Subarachnoid hemorrhage is also present (blue arrows).
Hypertensive intracerebral hemorrhage

**Intracranial hemorrhage:**
Hypertension: Basal Ganglia, Thalamus, Cerebellum, Pons
Amyloid Angiopathy: Lobar, Elderly
Trauma: Cortical Contusions, Diffuse Axonal Injury
Arteriovenous Malformation
Hemorrhagic Transformation of Arterial Ischemic Infarct
Venous Infarct
Tumor: Glioblastoma, Mets
Hypertensive intracranial hemorrhage

Imaging features
NECT: round or oval hyperdense parenchymal mass
Heterogeneous density if coagulopathy or active bleeding
Intraventricular extension of hemorrhage common
Mass effect, hydrocephalus, herniation common

Pathology
HTN can lead to chronic changes within the vessel wall
– Charcot Bourchard aneurysm (0.3-0.9mm)
- thrombosis, leak (microhemorrhage), rupture
References

