A 43-year-old man presented with a nontraumatic orthostatic headache, spatial disorientation, and visual hallucinations ("colored flames"). General and neurologic examination were normal. Turbo spin echo T2-weighted MRI showed bilateral subdural fluid collection and venous sinus engorgement (figure, A), suggesting spontaneous intracranial hypotension (SIH). Two subdural hematomas were also found, the biggest (2.5 cm) with mass effect in the left hemisphere (figure, B). Spine MRI identified a small radicular cyst emerging from the left T1-T2 foramen as the putative cause of CSF leakage (figure, C and D). The patient underwent drainage of the largest hematoma with benefit. Though initially planned, epidural blood patch and surgical treatment of the radicular cyst were not performed because clinical and radiologic findings improved with hematoma drainage, bed rest, and hydration. At a 3-month follow-up, MRI documented complete resolution of the subdural collection and dimensional stability of the radicular cyst. SIH is often considered benign and treated conservatively, but it can rarely manifest with serious complications requiring rapid surgical evaluation.

AUTHOR CONTRIBUTIONS
Claudio Tana: designed the manuscript, acquired the data, prepared the images, and wrote the clinical summary. Massimo Caulo: assisted in the collection and preparation of images. Emmanuele Tafuri: assisted in clinical summary and prepared images. Angelo Di Vincenzo: obtained and prepared images. Marco Tana: obtained images. Maria Vittoria De Angelis: assisted in clinical summary. Andrea Mezzetti: supervised the manuscript. Maria Adele Giamberardino: supervised, revised, and edited the manuscript.
STUDY FUNDING
No targeted funding reported.

DISCLOSURE
The authors report no disclosures relevant to the manuscript. Go to Neurology.org for full disclosures.

REFERENCES
Teaching NeuroImages: A dangerous complication of spontaneous intracranial hypotension
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Neurology 2014;82:e94-e95
DOI 10.1212/WNL.0000000000000213

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