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## 05 P\HORJUDSK\ IRU SRVWRSHUDWLYH RUWKRVWDWLF KHDGDFKH

Chih-Jen Hung, Mu-Jung Lee and Gou-Rong Chiang Taichung Veterans General Hospital, Taiwan

We report the case of a man who presented with orthostatic headache postoperatively. e procedure of mid-thoracic epidural catheterization for posthoracotomy pain management was performed before induction of anesthesia. Unfortunately, the procedure was abandoned due to some uid aspirated from the epidural catheter. A er operation, the patient complained of a severe headache for the rst time when he was in the upright position. However, the ndings of magnetic resonance (MR) myelography were characteristic of spontaneous intracranial hypotension (SIH), and the patient was successfully treated by an epidural blood patch at T1 level. Some reports implied that epidural anesthesia/analgesia might be a possible triggering factor of SIH in patient