Case Report

Chronic Hydrocephalus of Adults: Prospective Study Regarding 50 cases from January 2011 to January 2018 in the Department of Neurosurgery CHU Mustapha Algiers

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Abstract
From January 2011 to January 2018, 50 adult patients (average age of 68,5 year) with chronic hydrocephalus were followed in the department of neurosurgery of Mustapha PACHA's hospital. Our long-term follow-up revealed that male's gender predominated and the clinic were dominated by gait disorders more mental disorders and urinary incontinence.The management of adult's chronic hydrocephalus is mainly based on early diagnosis, ventricular- peritoneal shunt (VPS) and the clinical and radiological following.

Keywords: Adult's Chronic Hydrocephalus, VPS, Management

Introduction
The adult's chronic hydrocephalus is suffering from an amazing ignorance. Its under-diagnosis decreases the opportunity to save patients, while a support exists.

Described in 1965 by Adams and Hakims, it is developed after 60 years old, and specific symptoms are often confused with those of other neurodegenerative diseases, particularly Alzheimer's disease [1,2].

Pathogenesis - Causes
It is the result of a lifelong disorder intracranial circulation of cerebrospinal fluid [1]. This condition is responsible for a distension of the ventricles without intracranial hypertension. The cause of adult's chronic hydrocephalus is unknown but may be secondary to head traumatism, subarachnoid hemorrhage, meningitis and tumor or sequelae surgery [3].

Materials and Methods
We collected 50 patients between January 2011 and January 2018, the average age is 68.5 years. Male predominance, the clinic is dominated by gait disorders more mental disorders and urinary incontinence. The brain MRI is the modality of choice for diagnosis [figure 1], all patients have benefited from 3 consecutive PL resulting improved gait disorders and received ventricular- peritoneal shunt (VPS).
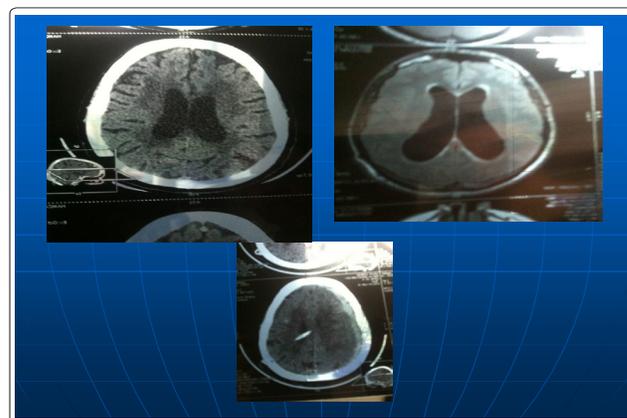

Figure 1: Brain MRI of Chronical hydrocephalus

Results
In our serie, we obtain the following results:
There is 75% improvement, 25% stabilization, no increase. We report a decline of 3 years.

Discussion
The management of adults chronic hydrocephalus is mainly based on:
1. Early diagnosis [4].
2. The ventricular- peritoneal shunt (VPS) [5].
3. The clinical and radiological following [2, 3].
4. awareness of general practitioners

Conclusion

The diagnosis of the normal pressure hydrocephalus is easy but it is often confused with Alzheimer's disease. Both are not a differential diagnosis, but an associated diagnosis, a therapeutic solution exists [6].

References

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