



A patient guide to Chronic Subdural Haematoma (CSDH)

What is a CSDH?

- A CSDH is a collection of old (chronic) blood (haematoma) that forms between the brain and the outer covering of the brain (the dura).
- It usually develops slowly over several weeks or months.
- It often occurs after a minor head injury that causes small veins to bleed slowly and can occur on one or both sides of the brain. However, sometimes there may be no obvious cause.
- It can present in some people like a stroke with weakness down one side of the body or difficulties with speech.

CSDH is more common in:

- Older adults.
- People taking blood thinning medication (e.g. warfarin, apixaban, aspirin, clopidogrel).
- People who have had falls or head injuries.
- People with clotting disorders or heavy alcohol use.

Treatment

Treatment depends on the size of the haematoma and the symptoms you are experiencing.

Observation (monitoring):

- Small hematomas may be monitored with repeat scans.
- Medication may be reviewed, especially blood thinners.

Surgery:

- Burr hole drainage – small holes drilled in the skull to drain blood.
- A temporary drain may be left for 24–48 hours.
- Craniotomy – a small section of skull temporarily removed to remove clot.

Common symptoms after a CSDH

- Headaches
- Dizziness
- Sleep disturbance
- Feeling more tired than usual
- Difficulty concentrating
- Problems with memory
- Balance or mobility problems

Recovery after a CSDH

Recovery varies for each person. Some symptoms improve quickly, while others may take several weeks or months.

- It is important to try and slowly resume your normal daily routine after discharge. If, however, any symptoms you may have get worse it may be because you are doing too much.
- Increase activities like exercising gradually, depending on how you are feeling.
- Make sure you get plenty of sleep during the night; you may need more sleep than usual as you recover.
- Resting during the day is important as it may help reduce any symptoms and aid your recovery.
- Return to work when you feel well enough and after discussion with your employer. We recommend a phased return to normal work duties.

Wound care

- The burr holes/dents created in your head will remain as they are.
- Keep the wound clean and dry.
- Dressings are usually removed after about 3 days.
- Stitches or clips are normally removed after 7–10 days by your GP or practice nurse.
- It is ok to wash your hair after your sutures/clips have been removed and your wound is healed.

Contact your GP or hospital if you notice:

- Redness or swelling
- Increasing pain
- Fluid leaking from the wound
- Fever or feeling unwell

Medication advice:

- If you are taking blood thinning medication you will need a period of time off medication following your CSDH.
- Depending on why you are on blood thinners will depend on when/if you can resume taking them.
- Recommencing blood thinning medication will often involve a risk versus benefits discussion with your doctors and specifically the medical team that prescribed them in the first instance.
- We will aim to get a plan in place regarding your medication before you are discharged as you may need further CT scans.

Driving:

- You must stop driving and inform the DVLA of your CSDH via the QR code below, the DVLA website: [Check if a health condition affects your driving: Find your condition online - GOV.UK](#) or by calling them on: 0300 790 6806.
- It is up to the DVLA when you may resume driving again.



If you experience any of the following symptoms immediately attend your local Emergency Department:

- Loss of consciousness/ Unable to be woken from sleep.
- Any weakness in one or both arms or legs.
- Loss of balance or problems walking, foot drop or drag.
- Constant vomiting with no cause.
- Increasing disorientation.
- Problems speaking or understanding what others are saying.
- Persistent blurred or double vision.
- Severe headaches that persist after taking pain killers.
- If you experience fits (collapsing, passing out suddenly, seizures).

Follow up

You will be followed up in the nurse-led Head Injury Clinical Nurse Specialist clinic, usually by telephone. You will receive an appointment for this in due course. Medical Secretary contact details: **0121 371 6855**

Contact numbers

Non - acute: Head Injury Clinical Nurse Specialists: **0121 371 4243**

Acute: GP or local A&E department

Accessibility

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