Eur Neurol 2009;62:127
DOI: 10.1159/000222788**Exertional Acute Epidural Cervical Hematoma**Antonio Carota^a, Duccio Boscherini^b^aNeurology Service, Hildebrand Clinic, Rehabilitation Center, Brissago, and ^bNeurosurgery Service, Civico Hospital, EOC, Lugano, Switzerland**Key Words**

Epidural hematoma · Spinal cord · Cervical pain

After physical exercise (fig. 1C), a 72-year-old man presented with neck pain and right-sided Brown-Séquard syndrome with a left C3 spinothalamic level. MRI showed a cervical epidural hematoma (fig. 1A, B).

Stretching of the internal epidural venous plexus, enhanced by spondylarthrosis, may contribute to the pathogenesis of cervical epidural hematoma.

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Fig. 1. Neck MRI sagittal T₂W (A) and transverse T₁W (B) images show the voluminous acute right posterior epidural hematoma (extending from C3 to C6) compressing the spinal cord from the right and behind. Note the signs of spondylarthrosis and the accentuation of cervical lordosis. Sequence of exercises as drafted by the patient himself (C). It includes forced stretching positions. Note the last exercise (No. 5, 'the killer one', as the patient defined it) during which he experienced excruciating neck pain. In that position, the cervical region, constrained by a hard synthetic rubber roll, sustained forced and prolonged extension.