

Massachusetts Neurologic Association

March 25, 2017

CALL FOR ABSTRACTS

Deadline for submission: January 31st, 2017

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The Poster Presentation Session at the MNA Spring Meeting aspires to allow residents and fellows in training to present their research or interesting cases in a poster session. Please follow the following abstract guidelines:

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Title: Cerebral Venous Thrombosis in the Absence of Headache and Focal Neurological Deficits

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Abstract:

Cerebral venous thrombosis (CVT) is an uncommon cerebrovascular disorder caused by the formation of a blood clot in the venous sinuses of the brain. Although the presentation of CVT remains highly variable, headaches and focal neurological deficits are frequently reported findings. The diversity of clinical findings present in CVT continues to be a diagnostic challenge. We report a case of CVT in a patient with an atypical initial presentation with loss of consciousness in the absence of headache or focal neurological deficits.

37 year old female with history of anemia was found unresponsive on the floor at home with urinary and fecal incontinence. In the ER patient was encephalopathic, anxious, and dyspneic. She was admitted on suspicion of seizure activity. Patient appeared confused and slightly disoriented with decreased speed of cognition and poor concentration. She had no focal neurological deficits and the patient denied headache or any other neurological complaints. Workup included: normal lab findings, negative pregnancy, unremarkable CT head and normal routine EEG. MRI brain however demonstrated CVT including the straight sinus, vein of Galen, and possibly the internal cerebral veins with subsequent venous infarction of the basal ganglia, thalami and central portion of the splenium. Patient was started on a continuous Heparin infusion on day 2 of admission and Lacosamide for suspicion of seizure at presentation. Hypercoagulable panel was ordered and on Day 3 of admission patient reported occipital headaches and was transferred to a tertiary care center for possible clot thrombolysis given risk of hemorrhagic conversion. Patient continued to improve on the heparin infusion and was discharged on Day 7 of admission.

Discussion:

Cerebral Venous Thrombosis is a rare cerebrovascular disorder and accounts for roughly 0.5%-1% of strokes common in the younger female population. The timely diagnosis of the CVT remains challenging due to its diverse presentations however 90% of patients present with symptoms of headache. CVT is a life threatening condition best managed with early diagnoses and intervention. Our case highlights an atypical presentation of CVT in a patient with unidentified risk factors and demonstrates the importance of including CVT as a possible differential in young encephalopathic patients.

(There is a limit of **350** words for your abstract submission).