Midbrain vasculitic aneurysms

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This 16-year-old girl had a muscle biopsy demonstrating vasculitis seven years ago when she presented with weakness and Raynaud's phenomenon (figure, B). Aside from occasional unexplained abdominal pain and chronic anemia, she had been well until one year ago, when she presented with a transient right body numbness and left ptosis. Five days of left body numbness, vertigo, and diplopia prompted readmission. Examination revealed limited upgaze, right internuclear ophthalmoplegia, and a clumsy left upper extremity. Laboratory markers for autoimmune diseases and a transesophageal echocardiogram were normal. Systemic vascular screening confirmed multiple aneurysms in the gastrointestinal and renal arteries.

The opinions or assertions contained herein are the private views of the author (GYC) and are not to be construed as representing the views of the Department of Defense, or the Department of the Army.

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Figure. Bilateral midbrain infarctions. White arrowhead points to the most recent stroke (A). Muscle biopsy shows arteriolar lymphocytic infiltration surrounding the lumen (arrow) and along the vessel wall (arrowhead) (B). Lateral view, (C), Rotational angiography with three-dimensional reconstruction showing cluster of aneurysms near the top of the basilar artery (top white arrow) and two other single aneurysms, (anterio-posterior view) (D).

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Neurology 2004;63;145

DOI 10.1212/01.WNL.0000132960.75111.FF

This information is current as of July 12, 2004

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