Figure 1. CT angiography showing direct communication of middle meningeal branches with the dural veins with no nidus.

“Spaghetti in brain”: DAVF

Mathew Alexander, DM; Prakash Balasubramaniam, MD; and Sunithi Elizabeth Mani, MBBS Vellore, India

A man aged 45 years sought treatment for a 5-year history of chronic headache that had worsened in the past month. There was no history of blurring of vision, diplopia, or vomiting. Physical examination revealed bilateral papilledema. There were no bruits or lateralizing or meningeal signs. CT brain scan showed bilateral small frontoparietal subdural hematoma, and CT angiography (figure 1) revealed typical “spaghetti” appearance of multiple intracranial dural arteriovenous fistulae.¹ T2-weighted MRI of the brain (figure 2) revealed dural fistulae, and MR angiography con-

Address correspondence and reprint requests to Dr. Mathew Alexander, Department of Neurological Sciences, Christian Medical College and Hospital, Vellore 63204, India; e-mail: mathew_koleth@hotmail.com

Figure 2. T2-weighted axial MRI of the brain showing direct communication of one branch of the middle meningeal artery with dural vein. Prominent vessels are seen in the region of the left occipital lobe and ambient cistern.

firmed the findings with no evidence of dural sinus thrombosis.² In extensive fistulae, no definitive intervention was possible. The patient subsequently developed a subarachnoid hemorrhage and succumbed to the bleed.

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