Recanalization of cerebral venous thrombosis within 24 hours

A case report

Figure Brain CT angiography

A (axial), B (coronal): Brain CT angiography at D0: absence of opacification (delta sign; white arrows) of the left lateral sinus corresponding to venous thrombosis. C (axial), D (coronal): Recanalization of cerebral venous sinuses at D1, in MRI with gadolinium-enhanced T1-weighted sequences.

Cerebral venous thrombosis represents 1% of acute strokes. Its recanalization rate is variable according to the series but averages around the 4 first months.¹ We report a 22-year-old woman with sudden headache and vomiting due to cerebral thrombophlebitis documented by cerebral CT angiography (figure, A and B)² recanalized within 24 hours owing to IV heparin therapy with amendment of clinical signs and recanalization of cerebral venous sinuses demonstrated by MRI (figure, C and D).

This case illustrates the need for early positive diagnosis of cerebral thrombophlebitis to avoid false negatives and allow treatment with anticoagulation therapy as soon as possible, to prevent recurrences.

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