

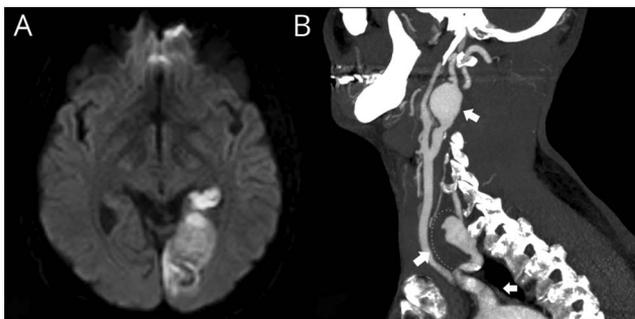
Teaching NeuroImages: A cutaneous vascular malformation hides giant cerebral aneurysms

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Figure 1 Brain diffusion-weighted MRI and angio-CT scan



(A) Diffusion-weighted MRI, in the axial plane, shows a hyperintense lesion in the left occipital lobe (acute ischemic stroke). (B) Angio-CT scan (sagittal view). A giant aneurysm (35 × 45 mm) of the left vertebral artery is visible, largely thrombosed. A giant aneurysm (22 × 30 mm) is also present in the left internal carotid artery. White arrows indicate the aneurysmic lesions in the carotid and in the vertebral arteries and the abnormal dilation at the origin of the subclavian artery. Dotted line: profile of the aneurysm of the vertebral artery.

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Figure 2 Cutaneous hemangioma



A large hemangioma is visible on the left side of the neck on the cutaneous surface corresponding to the internal arterial malformation.

A 64-year-old man acutely developed right hemianopsia. Brain MRI showed an ischemic stroke in the left occipital lobe (figure 1A). Angio-CT revealed giant aneurysms of the left vertebral and internal carotid arteries (figure 1B); the left subclavian artery and the left jugular vein presented abnormal dilation. On the same side of the neck, he presented a cutaneous lesion

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consistent with hemangioma (figure 2). The stroke was most likely due to embolization from the vertebral aneurysm.

Cutaneous vascular malformations in the face or neck areas can be associated with cerebrovascular malformations and should prompt an evaluation of the cerebral circulation.^{1,2}

Author contributions

Dr. Brunetti: study concept and design, drafting the manuscript, accepts responsibility for conduct of research, acquisition of data. Drs. Ferilli and Morosetti: analysis or interpretation of data, accepts responsibility for conduct of research, acquisition of data. Dr. Della Marca: interpretation of data, accepts

responsibility for conduct of research, study supervision, revising the manuscript, final approval.

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Disclosure

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