A 35-year-old patient with previously diagnosed and currently untreated Takayasu arteritis presented with motor aphasia. The symptom had started 24 hours before presentation and ceased after another 12 hours. Cranial MRI and magnetic resonance angiography were normal. Plasma concentration of C-reactive protein was elevated (9.1 mg/dL). Duplex ultrasonography showed hypoechoic, homogeneous thickening of the intima–media complex of the left common carotid artery (figure). This finding, also referred to as “macaroni sign,” has been reported in Takayasu arteritis. The macaroni sign therefore suggests active arterial vessel inflammation.

Duplex ultrasonography shows thickening of the intima–media complex that results from granulomatous inflammatory changes of the medium- and large-sized arteries mediated by invasion of giant cells and mononuclear cells. The macaroni sign therefore suggests active arterial vessel inflammation.

A 35-year-old patient with previously diagnosed and currently untreated Takayasu arteritis presented with motor aphasia. The symptom had started 24 hours before presentation and ceased after another 12 hours. Cranial MRI and magnetic resonance angiography were normal. Plasma concentration of C-reactive protein was elevated (9.1 mg/dL). Duplex ultrasonography showed hypoechoic, homogeneous thickening of the intima–media complex of the left common carotid artery (figure). This finding, also referred to as “macaroni sign,” has been reported in Takayasu arteritis. The patient was transferred to the rheumatologic department and treatment with prednisolone (80 mg/day orally) and acetylsalicylic acid (100 mg/day orally) was initiated.

AUTHOR CONTRIBUTIONS

Dr. Siepmann made substantial contributions to performance and analysis of the ultrasonographic assessment reported in this article as well as treatment of the patient and drafting the manuscript. Dr. Bodechtel made substantial contributions to supervision of diagnostic testing analyses and treatment as well as critical revision of the article for intellectual content.

STUDY FUNDING

No targeted funding reported.

DISCLOSURE

The authors report no disclosures relevant to the manuscript. Go to Neurology.org for full disclosures.

REFERENCES

Teaching NeuroImages: Macaroni sign
Timo Siepmann and Ulf Bodechtel
Neurology 2014;83:e11
DOI 10.1212/WNL.0000000000000549

This information is current as of June 30, 2014

Updated Information & Services
including high resolution figures, can be found at:
http://n.neurology.org/content/83/1/e11.full

Supplementary Material
Supplementary material can be found at:
http://n.neurology.org/content/suppl/2014/06/29/83.1.e11.DC1

References
This article cites 2 articles, 0 of which you can access for free at:
http://n.neurology.org/content/83/1/e11.full#ref-list-1

Subspecialty Collections
This article, along with others on similar topics, appears in the following collection(s):
All Cerebrovascular disease/Stroke
http://n.neurology.org/cgi/collection/all_cerebrovascular_disease_stroke
Autoimmune diseases
http://n.neurology.org/cgi/collection/autoimmune_diseases
Ultrasound
http://n.neurology.org/cgi/collection/ultrasound
Vasculitis
http://n.neurology.org/cgi/collection/vasculitis

Permissions & Licensing
Information about reproducing this article in parts (figures, tables) or in its entirety can be found online at:
http://www.neurology.org/about/about_the_journal#permissions

Reprints
Information about ordering reprints can be found online:
http://n.neurology.org/subscribers/advertise

Neurology ® is the official journal of the American Academy of Neurology. Published continuously since 1951, it is now a weekly with 48 issues per year. Copyright © 2014 American Academy of Neurology. All rights reserved. Print ISSN: 0028-3878. Online ISSN: 1526-632X.