Teaching NeuroImages: Sulcal artery syndrome

A hemicord infarct presenting with incomplete Brown-Sequard syndrome

Jie Ming Nigel Fong, MBBS, Gee Jin Ng, MBBS, MRCP, MMEd, and Nigel C.K. Tan, MBBS, FRCP, FAMS, MHPEd

Neurology® 2018;90:e1177-e1178. doi:10.1212/WNL.0000000000005218

Correspondence
Dr. Fong
nigelfong@gmail.com

Figure 1 MRI shows C5 hemicord T2 hyperintensity

A 59-year-old man with a history of smoking presented with acute right hemiparesis, pain, and temperature loss on the left below T4 and impaired left-sided abdominal reflexes. Proprioception and vibration were normal. MRI (day 3) showed a short segment of T2 hyperintensity at the right half of C5 spinal cord (figure 1); diffusion-weighted MRI (day 5) demonstrated restricted diffusion (figure 2), confirming hemicord infarct. Sulcal artery occlusion presents with incomplete Brown-Sequard syndrome and is uncommon, unlike the more common anterior spinal artery syndrome.1 It preferentially involves the cervical cord.2 With physiotherapy, aspirin, and statins, this patient recovered well.

Author contributions
J.M.N. Fong: writing of manuscript. G.J. Ng: writing of manuscript. N.C.K. Tan: study concept and design, critical revision of manuscript.

Acknowledgment
The authors thank Dr. Yu Wai-Yung (National Neuroscience Institute) for providing the MRI.

From the Division of Medicine (J.M.N.F.), Singapore Health Services; and Department of Neurology (G.J.N. and N.C.K.T.), National Neuroscience Institute, Singapore.

Go to Neurology.org/N for full disclosures. Funding information and disclosures deemed relevant by the authors, if any, are provided at the end of the article.
Study funding
No targeted funding reported.

Disclosure
J.M.N. Fong and G.J. Ng report no disclosures relevant to the manuscript. N.C.K. Tan owns stock in Novartis, Pfizer, and Johnson & Johnson. Go to Neurology.org/N for full disclosures.

References
Teaching NeuroImages: Sulcal artery syndrome: A hemicord infarct presenting with incomplete Brown-Sequard syndrome
Jie Ming Nigel Fong, Gee Jin Ng and Nigel C.K. Tan
Neurology 2018;90;e1177-e1178
DOI 10.1212/WNL.0000000000005218

This information is current as of March 26, 2018

Updated Information & Services
including high resolution figures, can be found at:
http://n.neurology.org/content/90/13/e1177.full

References
This article cites 2 articles, 0 of which you can access for free at:
http://n.neurology.org/content/90/13/e1177.full#ref-list-1

Subspecialty Collections
This article, along with others on similar topics, appears in the following collection(s):
DWI
http://n.neurology.org/cgi/collection/dwi
MRI
http://n.neurology.org/cgi/collection/mri
Spinal cord infarction
http://n.neurology.org/cgi/collection/spinal_cord_infarction

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