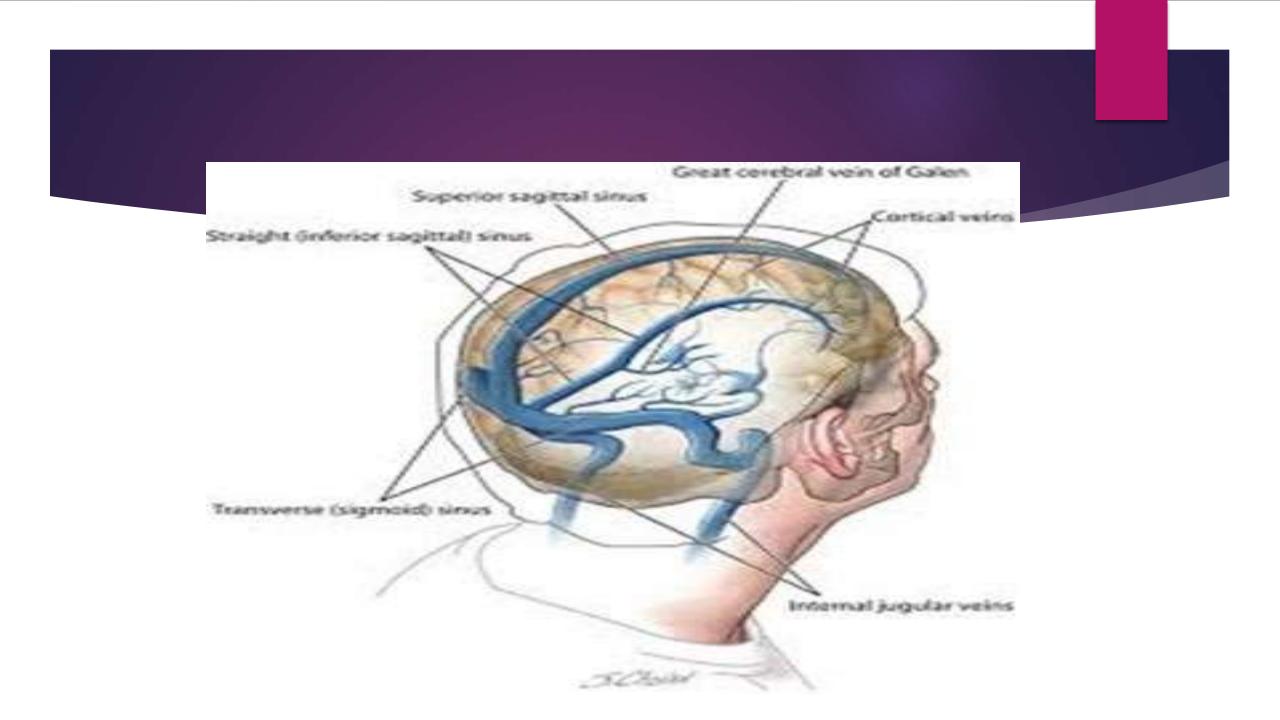
## Cerebral Venous Thrombosis





### WORLD STROKE DAY OCTOBER 29TH

**#1in4** adults will have a stroke, but being active can help decrease your risk.





### less frequent,

- younger patients
- female predominance,
- non-apoplectic onset
- wider spectrum of clinical presentation syndromes,

- more difficult diagnosis,
- multiple risk factors
- vascular risk factors for arterial are not risk factors for CVT
- has a different treatment,
- much more favorable outcome

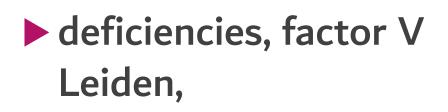
#### Common associated conditions of CVT

#### Women-specific risk factors

- Oral contraceptives
- Pregnancy
- Puerperium
- Hormone replacement therapy

**Genetic thrombophilia** 

Protein S, C and antithrombin



prothrombin mutations

## Acquired prothrombotic diseases

#### Neoplastic diseases

- Myeloproliferative neoplasms
- Leukemia
- Solid neoplasms



Inflammatory diseases

- Antiphospholipid syndrome
- Systemic lupus
- Inflammatory bowel disease
- Nephrotic syndrome

## Acquired prothrombotic diseases

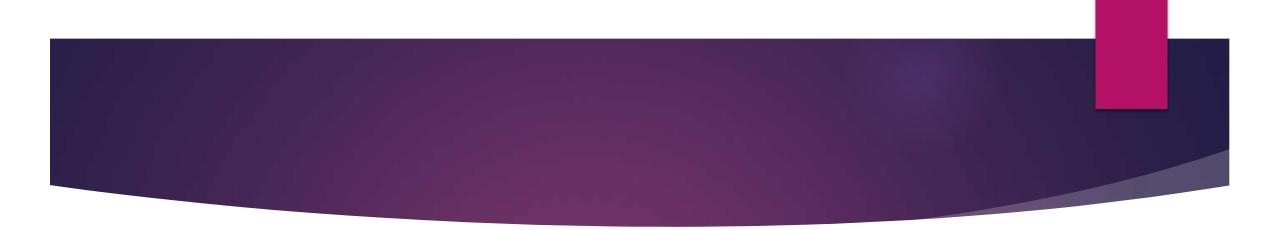
#### Infections

- Head and neck
- Ear, mastoid, sinus, nose, face, skull

Systemic

Diagnostic and treatment procedures

- Chemotherapy, central venous catheter
- Lumbar puncture, neurosurgery
- **Emerging risk factors**
- Anemia
- Obesity









- ► Headache
- ► Seizure
- Blurred vision
- **Faint**
- Focal sing
- Dizziness , vertigo



# Diagnosing CVT in the emergency setting can be challenging

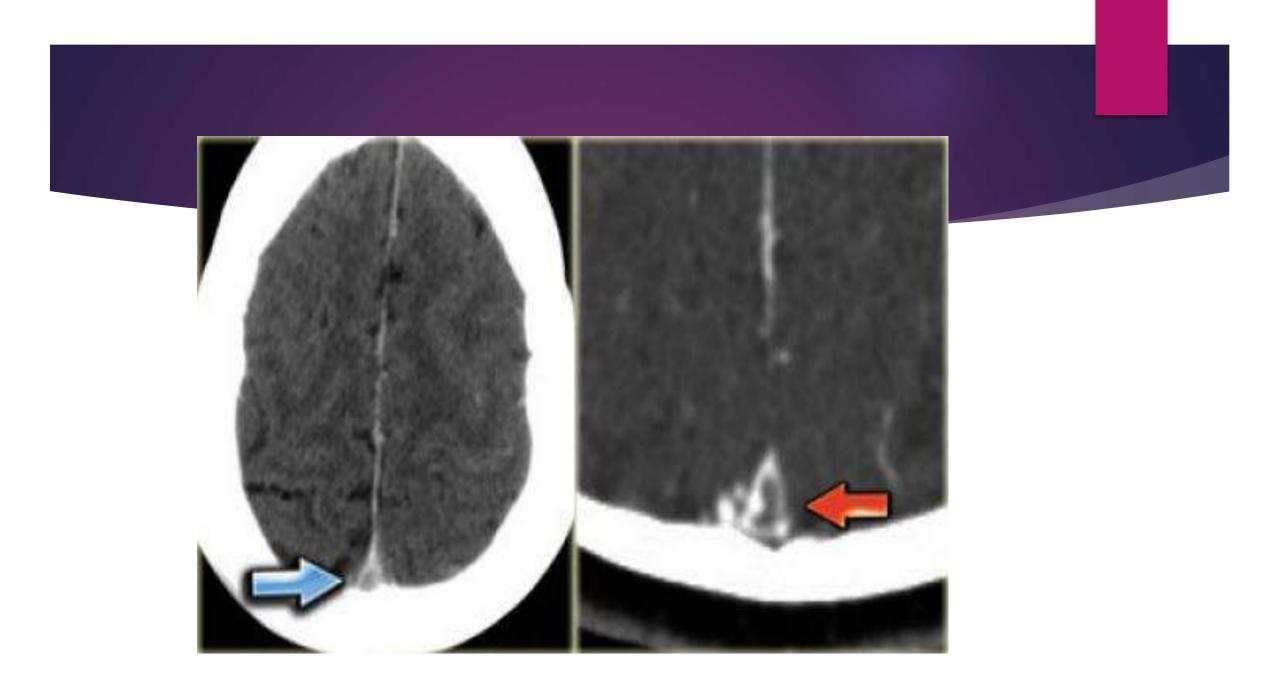
## Spiral brain CT scan

Delta empty sign
Dense triangle
Cord sign

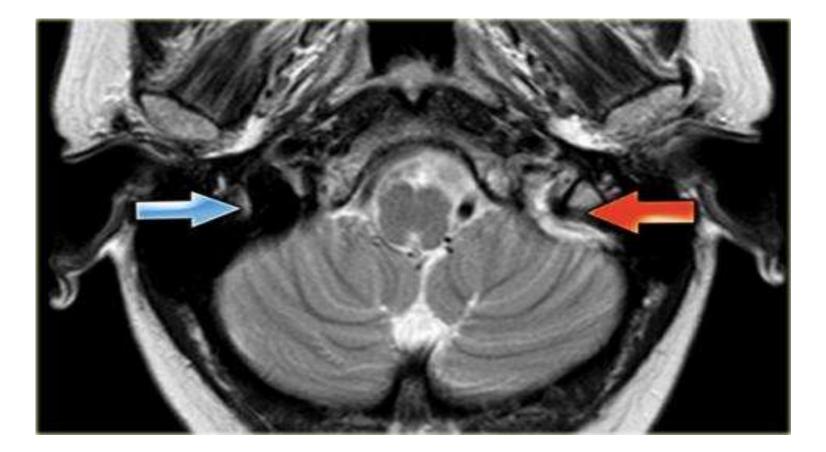


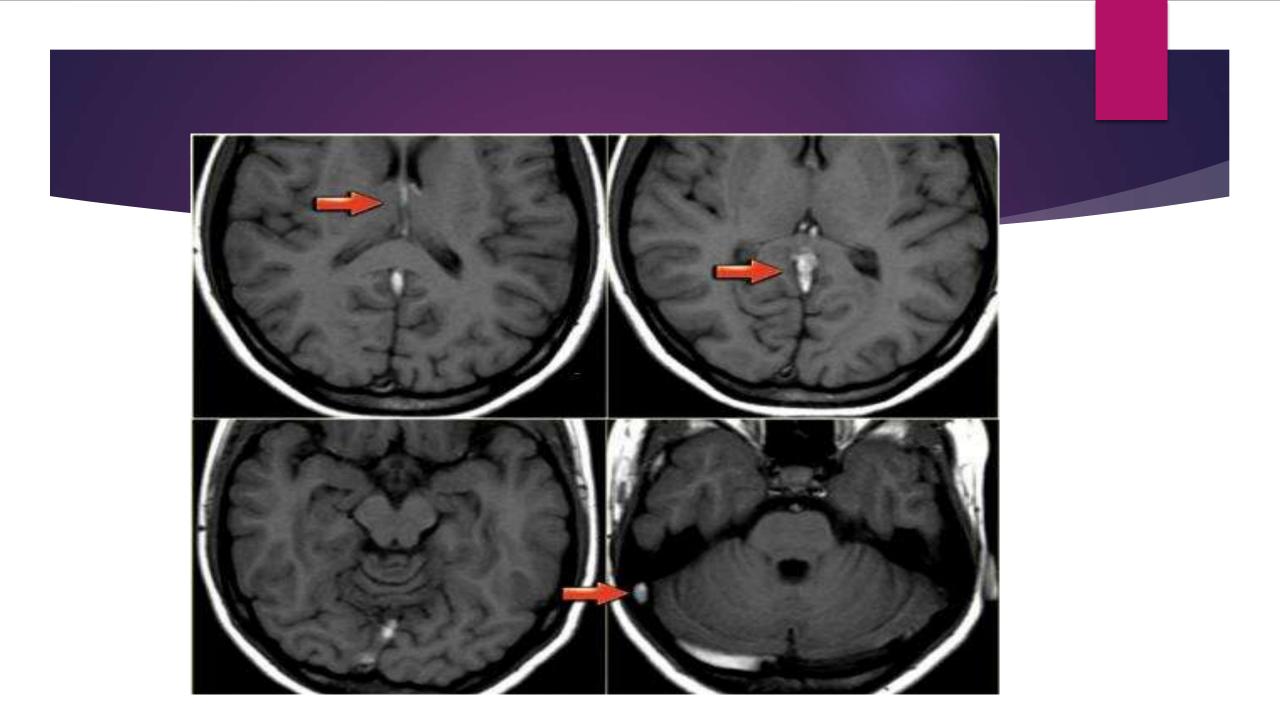


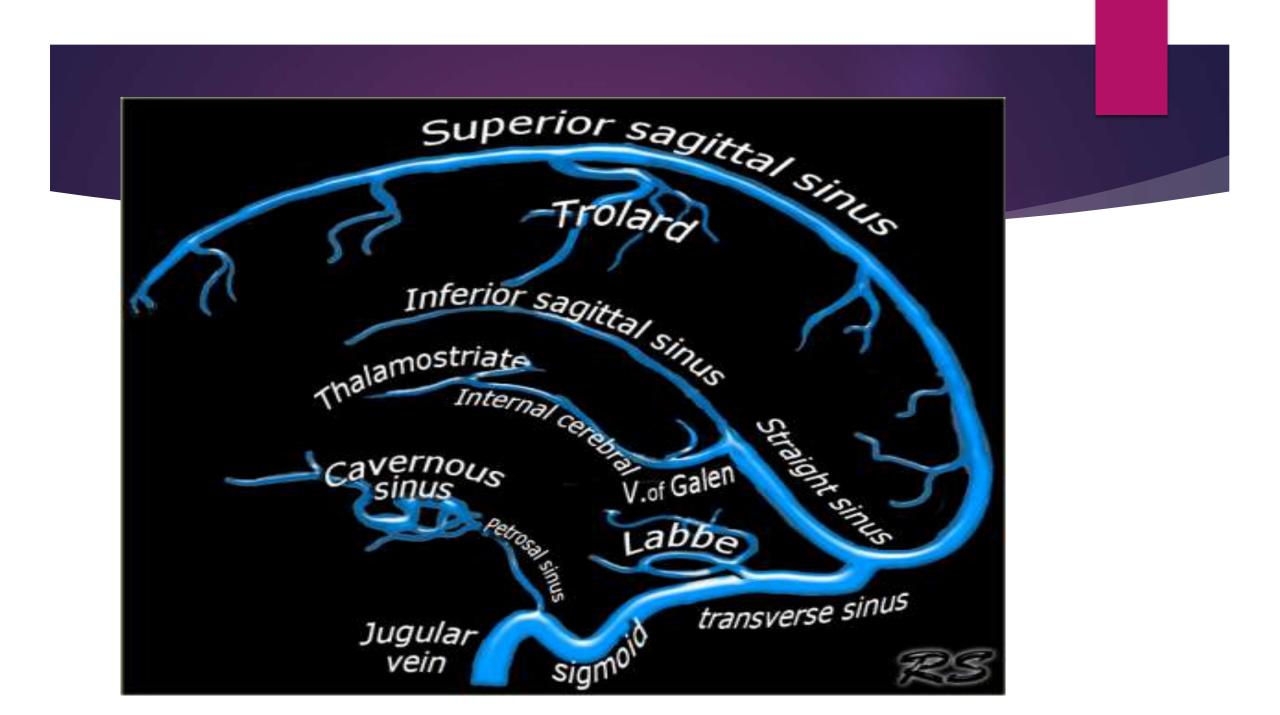




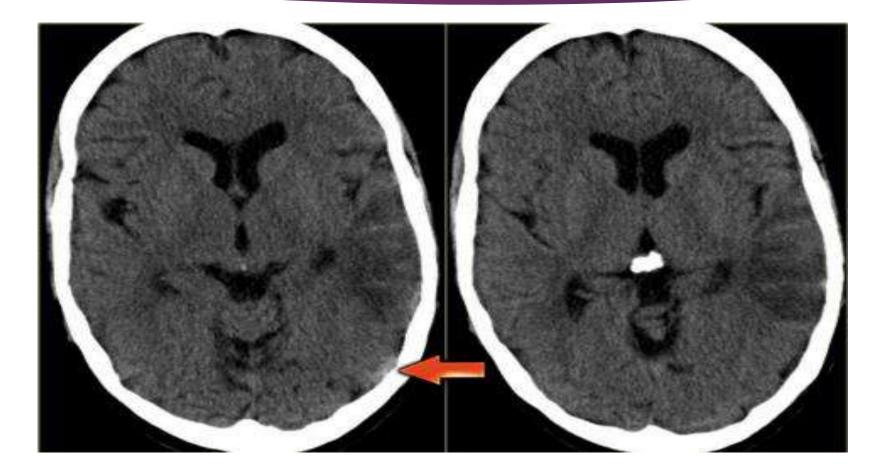
## flow void

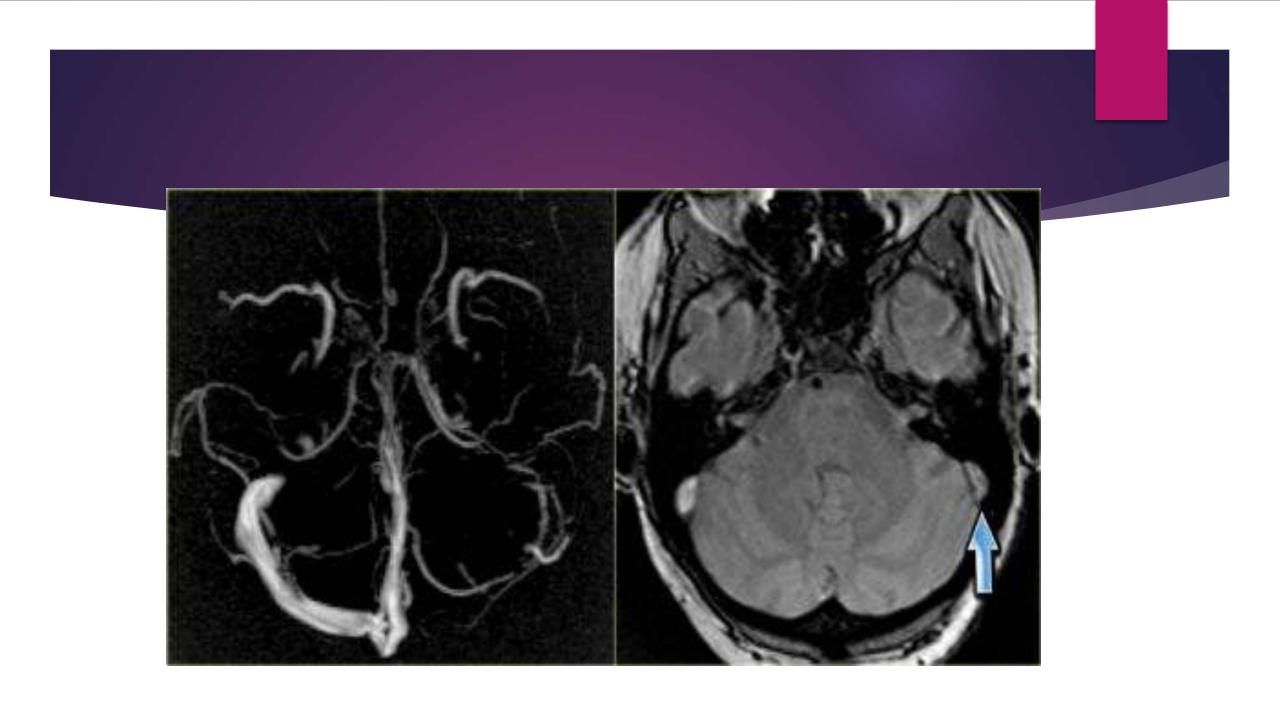




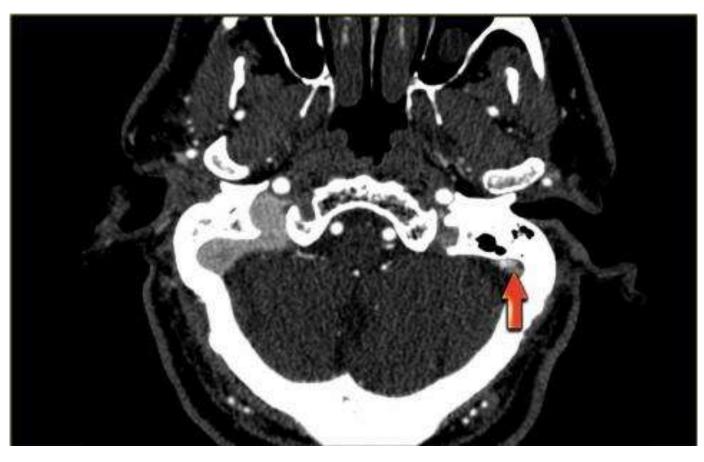


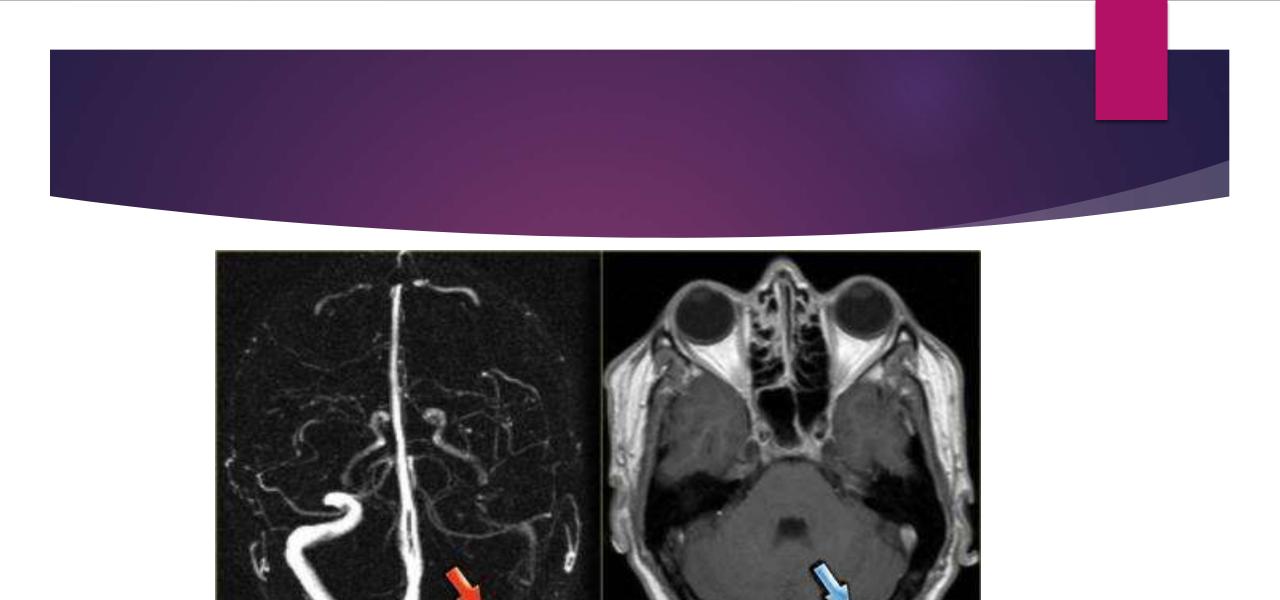
## Vein of Labbe





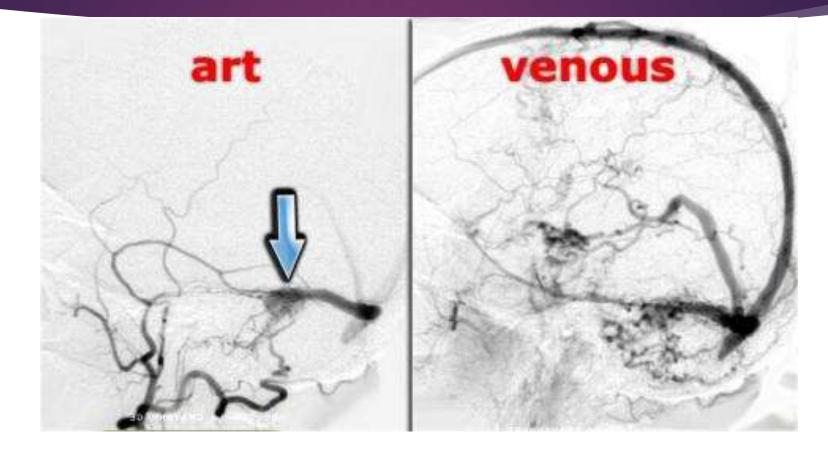


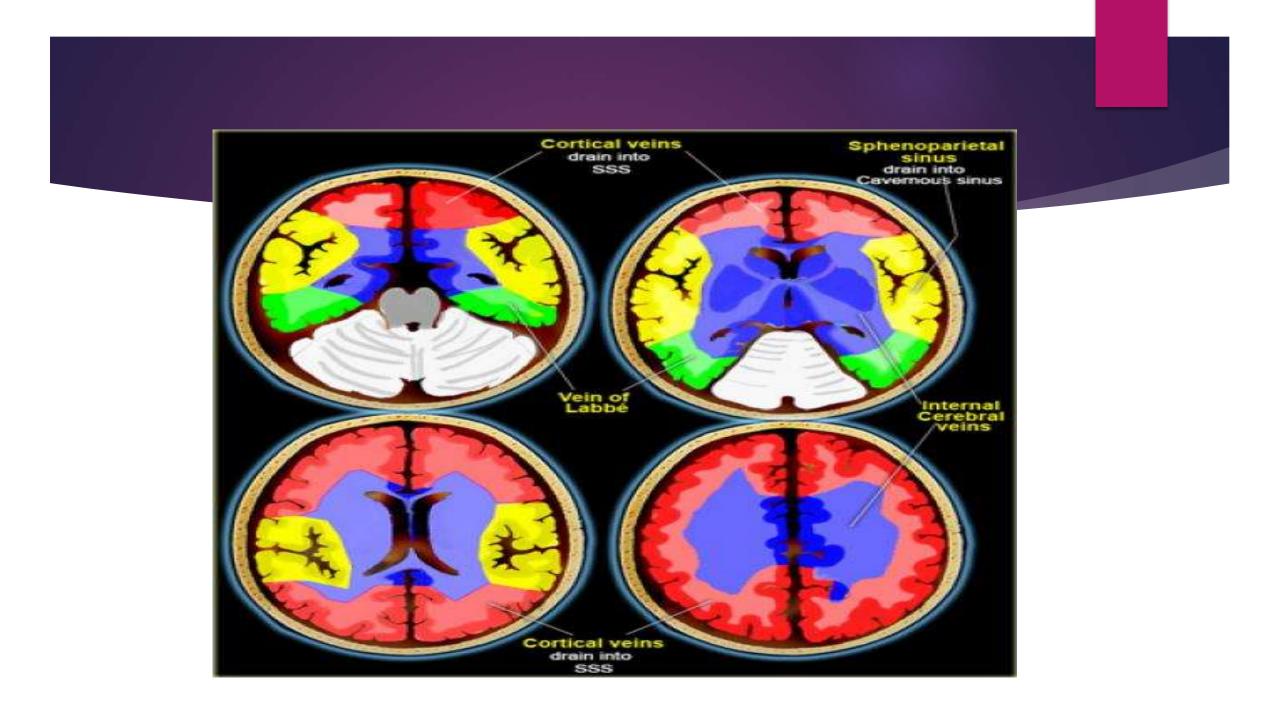




PCA

## Dural Venous Fistula





#### When to think of venous thrombosis

Direct sign of thrombus	Dense clot sign Cord sign Empty delta Loss of normal flow void on MR
Venous infarction	Bilateral - parasagittal bithalamic Temporal lobe infarction Cortical edema or hemorrhage Peripheral lobar hemorrhage
Clinically	Seizures Headache Loss of consiousness

## Treatment

#### Acute phase : IV Heparin / LMWH

Consider : hematoma enlargement

## Treatment

#### Maintenance : warfarin (vitamin K antagonists) NOAC or DOA

#### 3-12 months

If genetic causes / active cancer / antiphospholipid syndrome



## Pregnancy and CVT

#### Journal of Stroke and Cerebrovascular Diseases, Vol. 28, No. 10 (October), 2019

#### Asian Study of Cerebral Venous Thrombosis

Mohammad Wasay, MD, FRCP, FAAN,\* Subash Kaul, MD,† Bindu Menon, MD, DM,‡ Alper I. Dai, MD,§ Mohammad Saadatnia, MD,¶ Abdul Malik, MD,∥ Ahmed Khalifa, FRCP,# Afshin Borhani-Haghighi, MD,\*\* Manmohan Mehndiratta, MD, FRCP,†† Maria Khan, FCPS,‡‡ Nimalendu Bikash Bhowmik, MD,§§ and Safia Awan, MSc\*

Background/Objective: Most of the studies and registries related to cerebral venous thrombosis (CVT) are reported from European countries and the United States. The objective of the present study is to identify risk factors, presentation, and outcome of

