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Headache and Cerebral venous thrombosis

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Introduction: Cerebral venous thrombosis is a rare condition that is potentially life-threatening that can be easily overlooked in the setting of vague symptoms in a young patient without known risk factors. Patients often present with vague headache, AMS, focal motor deficits, visual symptoms and/or dysarthria and most frequent presentations are isolated headache. The confirmation of CVT relies on the findings of thrombi in the cerebral veins and sinuses by MR venography or veno CT. Pro-thrombotic conditions such as infections, trauma, malignancy, lupus, anti-phospholipid syndrome, or usage of OCP are associated with the condition. Standard care involves immediate anticoagulation often yielding good functional outcomes.

Case Discussion/Results: 35-year-old Dominican female with a PMH of sinusitis and HTN who presented with a left sided headache for the past seven days without focal neurologic deficit. The patient denied photophobia, phonophobia, vertigo, eye pain, seizures, weakness, numbnessortingling or visual changes, aura and was found to only have nystagmus on admission. Cranial nerves were grossly intact and vitals hemodynamically stable. MRI venography of the brain revealed a left transverse sinus thrombosis and a sigmoid sinus thrombosis and patient was placed on therapeutic lovenox. Clinically patient improved within three days of lovenox without focal neurologic deficit.

Conclusion: A high level of suspicion for a rare disorder like CVT should be considered as part of the differential diagnosis of a headache especially with known risk factors and immediate anti-coagulation treatment can prevent fatal complications. The infrequency with which it is diagnosed/ occurs makes CVT a diagnostic challenge and important in hospital medicine.

Speaker Biography

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