

Cerebral venous sinus thrombosis diagnosis

Cerebral venous sinus thrombosis should be considered in any young patient who presents with an unexplained headache in combination with known hypercoagulable state, focal neurologic deficits, seizure, lobar hemorrhage, or bilateral thalamic or basal ganglionic edema.

The diagnosis is usually by computed tomography (CT/CAT scan) or magnetic resonance imaging (MRI) employing radiocontrast to demonstrate obstruction of the venous sinuses by thrombus.

Computed tomography (CT) and magnetic resonance imaging (MRI) are the most commonly used image modalities for patients with non-specific neurologic symptoms.

Xu et al., present a metaanalysis to assess the accuracy of CT and MRI in the differential diagnosis of CVT and cerebral venous sinus thrombosis (CVST).

This meta-analysis indicates that both CT and MRI have a high level of diagnostic accuracy in the differential diagnosis of CVT and CVST, independent of stage, target for analysis or analysis methods. They could be chosen as alternative sub-optimal gold standards for diagnosing CVT and CVST, especially in emergency ¹⁾.

¹⁾
Xu W, Gao L, Li T, Ramdoyal ND, Zhang J, Shao A. The Performance of CT versus MRI in the Differential Diagnosis of Cerebral Venous Thrombosis. Thromb Haemost. 2018 Apr 25. doi: 10.1055/s-0038-1642636. [Epub ahead of print] PubMed PMID: 29695023.

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Last update: **2024/06/07 02:59**

