# **WARTERINȚA** ȘTIINȚIFICĂ ANUALĂ CERCETAREA ÎN BIOMEDICINĂ ȘI SĂNĂTATE: CALITATE, EXCELENȚĂ ȘI PERFORMANȚĂ

## **BITHALAMIC ACUTE STROKE: ARTERY OF PERCHERON. CLINICAL CASE.**

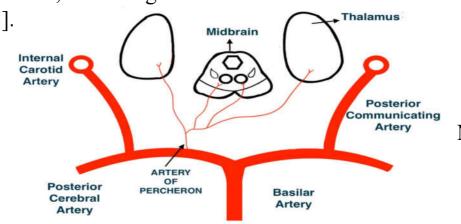
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### **Background**

#### **Purpose**

Artery of Percheron (AOP) is a variant in which a single perforating artery ensure bilateral blood supply to the paramedian thalamic nuclei and rostral midbrain and is described in 4%-12% of the population. Occlusions AOP represent 0.1-2% of total ischemic strokes, indicating that this type of stroke is quite rare [3].

Material and methods: A case of 69-yearold woman, admitted to the Institute of Emergency Medicine with bilateral thalamus stroke due to Percheron artery occlusion will be discussed.



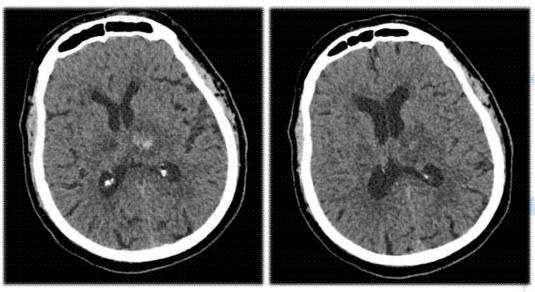
**Results:** On admission, the patient was in a **coma**, tetraparesis was noted during neurological exam and NIHSS score was of 24p. Brain-Computer Tomography (CT) showed bithalamic stroke. CT angiography didn't detect any abnormality.

#### Fig. 1 Variant of perforator supply of thalamus and the rostral midbrain

Cause	Etiology	Features
Vascular	Deep cerebral venouse thrombosis	<u>Clinical aspects</u> - headache, vomiting, papilar edema and seizure [1]. <u>Radiological aspect</u> - On CT images, abnormally hyperdense veins and clots in the sinuses can be observed as T1 hyperintensity on RM scans [2].
	Top basilar syndrome	<u>Clinical aspects</u> - visual field defects, agitated behaviour and amnesia [1]. <u>Radiological aspect</u> - infarcts in the top of the basilar syndrome are, normally, asymmetrical and, generally, affect additional arterial territories [1].

#### Table 1. Differential diagnosis of bilateral thalamic lesions

**Conclusion:** AOP infarcts are quite rare. Differential diagnosis in cases of bitalamic infarction usually include AOP stroke, top basilar syndrome and deep cerebral venous thrombosis.



References

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We report a clinical case of ischemic stroke by occlusion AOP. It is necessary to know this variant of ischemia in view of **differential** diagnosis between deep cerebral venous thrombosis and top basilar syndrome.

> Fig. 2 Head computed tomography (axial) performed on the day of admission was ischemic stroke in the basal ganglia (thalamus) bilaterally, with hemorrhagic transformation on the left.

#### Keywords:

Artery of Percheron, Infarct, Thalamus, Computer tomography.