

EFFORT HEADACHE AS THE ONLY SYMPTOM OF CEREBRAL VENOUS THROMBOSIS: A CASE REPORT WITH REVIEW OF LITERATURE

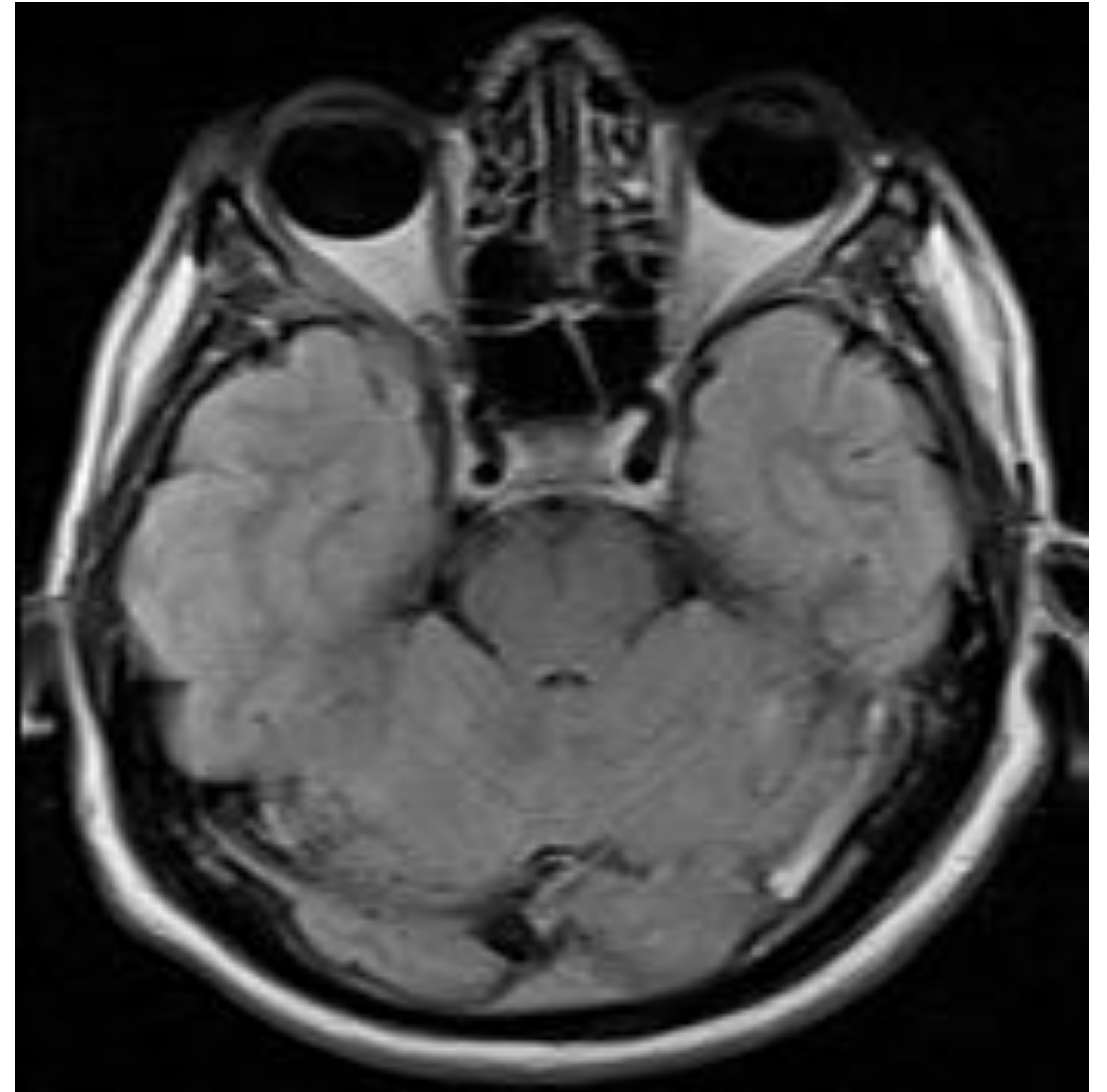
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Background

Cerebral venous thrombosis (CVT) is a rare form of cerebrovascular disease presenting with a large spectrum of manifestations. Headache occurs in the majority of patients. It is often the first symptom without specific characteristics but it is generally diffuse, progressive and severe. Here we report a case of CVT in a 41-year-old male presenting with a short lasting effort headache.

Case-Report

A 41-year-old male referred to our headache center complaining of recurrent severe episodes of headache lasting five-fifteen minutes. Headache attacks began two years before and were triggered by cough, sneezing, laugh, etc i.e. by Valsalva maneuvers. A brain computed tomography performed two years before was normal. His remote pathological history was negative except for hypercholesterolemia, gallstone calculus and a minor head trauma five previous months. The general and neurological examination were normal. Blood chemistry analysis was normal, too. Brain MRI with venography (MRV) showed the thrombosis of the left lateral sinus and the ipsilateral jugular vein, so a diagnosis of CVT was formulated. Acquired and genetic prothrombotic conditions including drugs, cancer, infections, hyperhomocysteinemia, antiphospholipid syndrome, hematological disorders, antithrombin III, protein C and S deficiency, factor V Leiden gene mutation and resistance to APC, prothrombin G20210A mutation were all negative. Serial MRI/MRV two and four months later showed unchanged findings. Similarly the features of headache were unchanged. Initially the patient was treated with iv heparin followed by oral anticoagulants. The follow up is ongoing.



T2 Axial fluid-attenuated inversion recovery MRI image showing the hyperintensity at the level of the left lateral sinus, and MRV evidence of its occlusion.

Discussion and conclusions

Isolated headache in CVT has been described in literature. A French study identified 17 of 123 patients in whom headache was the only manifestation of CVT, and in two of them the headache had an intermittent evolution. Another Italian study described 8 of 25 patients presented CVT with isolated headache, whose 3 with intermittent features. In most of cases the headache is bilateral, continuous or throbbing and associated with neurovegetative symptoms and only rarely intermittent and short lasting. Our case is one of the few cases characterized by isolated headache with an intermittent trend in CVT. Moreover, the time from onset to diagnosis was significantly delayed. Therefore in patients with a recurrent effort headache even in the absence of papilloedema or focal neurological signs or normal CT scan it's necessary to collect detailed data on the headache features and to perform an MRI completed with MRV.

Bibliography

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Cerebral Venous Thrombosis and Headache – A Case-Series
Marco Sparaco, MD; Michele Feleppa, MD; Marcelo E. Bigal, MD, PhD (Headache 2015;55:806-8)