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THE ARTERY OF PERCHERON: AN UNUSUAL STROKE PRESENTATION

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An 86-year-old woman was admitted with multiple episodes of transient loss of consciousness. She was initially treated for seizures and stroke was not considered likely. Magnetic resonance imaging (MRI) on the same day of admission showed acute bilateral medial thalamic infarcts in keeping with artery of Percheron (AOP) territory infarcts. Investigation for polycythaemia and thrombocytosis showed JAK2 positive myeloproliferative neoplasm. A diagnosis of AOP infarction is often missed or delayed because it is rare and presents with variable neurological symptoms. Initial imaging in the form of computed tomography (CT) is often negative, and some report that initial MRI findings may also be normal. An awareness of a wide range of differential diagnoses alongside a multi-modality imaging approach is required to reach a diagnosis. Although there are several other case reports of AOP infarction in the literature, this is the first to present with transient symptoms initially mistaken for seizure activity.

Biography

Toby Pitts Tucker BMBS, BA (Oxon) is a core Surgical Trainee at Southampton General Hospital, UK. He graduated from the University of Southampton in 2015 before undertaking his foundation training at the Royal Bournemouth Hospital

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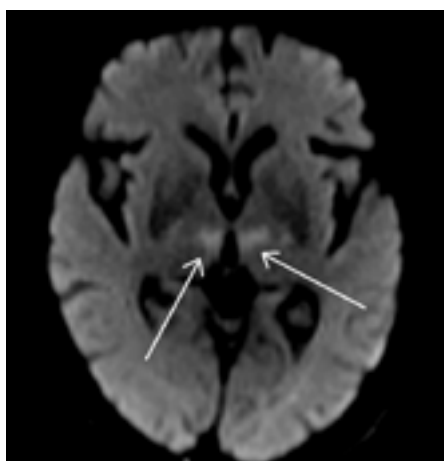


Figure1: Axial MRI B1000 diffusion weighted image with arrows indicating increased signal affecting the medial thalami bilaterally