Cerebral venous thrombosis and its clinical diversity

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From the Porto University Center of Medicine Stroke Update Course, Porto, Portugal. 26–27 June 2018.

Abstract

Introduction: Cerebral venous thrombosis (CVT) is a serious medical condition, difficult to diagnose because of its wide range of clinical presentations. The symptoms can vary from isolated headache to coma, or even mimic a stroke.

Case Report: The authors present a case report of a 76-year-old female patient, with a personal history of immune thrombocytopenic purpura, arterial hypertension, and pulmonary embolism. The diagnosis of CVT was challenging because the initial form of presentation of the disease mimicked a transient ischaemic attack (transient aphasia and right hemiparesis). Therapeutic decisions were also a challenge because, at the time of the diagnosis, the patient was suffering from severe thrombocytopenia (29 x 10⁹ platelets/L), which had to be considered. After multidisciplinary discussion, it was decided to administer full-dose enoxaparin, resulting in a progressive and significant neurological recovery.

Conclusion: In presenting this case, the authors’ primary goal is to point out that CVT can be difficult to diagnose because of its wide range of clinical presentations. Headache (a symptom that was never present in this case) is the most frequent complaint, occurring in 90% of cases. Following diagnosis, an aetiological study is required.