

Conflicting clinical and radiological management decisions

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Abstract

Gliosis with haemorrhagic transformation is a late reported complication of stroke (1-2), Sometimes there is a big discrepancy between clinical and radiological diagnosis, Clinical decision must be multi-aspects decision and does not depend on a single unusual investigation.

Conflicting clinical and radiological management decisions

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KEY CLINICAL MESSAGE

Gliosis with haemorrhagic transformation is a late reported complication of stroke (1-2), Sometimes there is a big discrepancy between clinical and radiological diagnosis, Clinical decision must be multi-aspects decision and does not depend on a single unusual investigation.

QUESTIONS AND TEXT

Q1 What is your diagnosis for this CT and MRI images?

Q2 What is your plan of management?

A 48-year-old Asian male with history of ischemic cardiomyopathy with low Ejection fraction (EF 15%). Received thrombolysis 2 months ago due to Right middle cerebral artery stroke. Presented with low cardiac output state require vasopressors support. Follow up CT brain after 2 month of thrombolysis show (Fig 1-2) multiple hypodense areas with Haemorrhagic transformation and mass effect, MRI confirm gliosis with secondary haemorrhagic transformation and mass effect (Fig 3-4). Neurosurgeon Decision based on only reviewing CT and MRI images was for urgent dehydrating measures and to be referred to the neurosurgery centre for decompressive craniotomy. Surprising the patient was fully conscious, alert and oriented with left haemiplegia. Even with no dehydrating measures patient remain stable with same conscious level.

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CONFLICT OF INTEREST

Not declared.

AUTHOR CONTRIBUTIONS

Tamer Zaalouk and Osama Maadarani collected the information, drafted the manuscript and Zohier Bitar revised and approve the final manuscript.

CONSENT

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