

LETTER TO EDITOR

EDİTÖRE MEKTUP

DEMONSTRATION OF VOCAL CORD PARALYSIS IN CT ANGIOGRAPHY SOURCE IMAGES IN A PATIENT WITH WALLEBERG'S SYNDROME: A CASE VIGNETTE

WALLEBERG SENDROMUNDA CT ANJİOGRAFİ KAYNAK GÖRÜNTÜLERDE VOKAL KORD PARALİZİNİN DEMONSTRASYONU: BİR OLGU RESMİ

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Dear editor,

A 49-year-old woman presented with sudden onset of dizziness, facial and intraoral numbness, hoarseness and dysphagia while having a hair wash. Neurological examination revealed right-sided facial hypoalgesia and thermohypoesthesia, Horner's syndrome, pharyngeal and palatal paresis, slightly depressed gag reflex and dysarthria along with right-sided appendicular ataxia and left upper extremity hypoesthesia.

Brain magnetic resonance (MR) imaging demonstrated acute infarction encompassing the posterolateral part of caudal medulla oblongata on the right side (Figure a-c). Computer tomography angiography (CTA) demonstrated double lumen appearance together with superimposed thrombus in distal V2 segment of right vertebral artery

(Figure d-f). In addition, depression of right palatal arch, dilatation of pyriform sinus and medial positioning of true vocal cord consistent with homolateral vocal cord paralysis was noted on CTA source images (Figure e,f).

This case vignette highlights that CTA source images are not only useful for showing vascular pathologies, but also for documenting clinical findings associated with Wallenberg's syndrome (1).

REFERENCE

1. Fisher CM, Karnes WE, Kubik CS. Lateral medullary infarction-the pattern of vascular occlusion. J Neuropathol Exp Neurol. 1961; 20: 323-379.

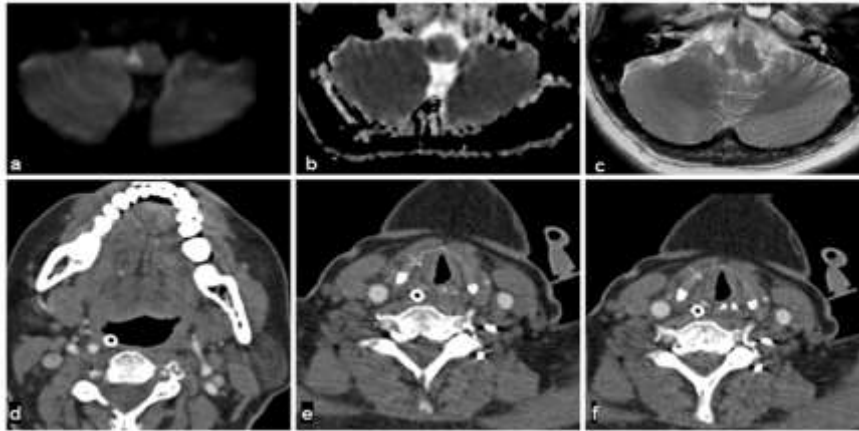


Figure: Diffusion weighted images (a), apparent diffusion coefficient maps (b) and T2-weighted images (c) show acute infarction of posterolateral medulla infarction on the right side. CTA source images show double lumen appearance with superimposed thrombus in the right vertebral artery (black arrow, d,e) along with medialization of right true vocal cord (white arrow, e,f).

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