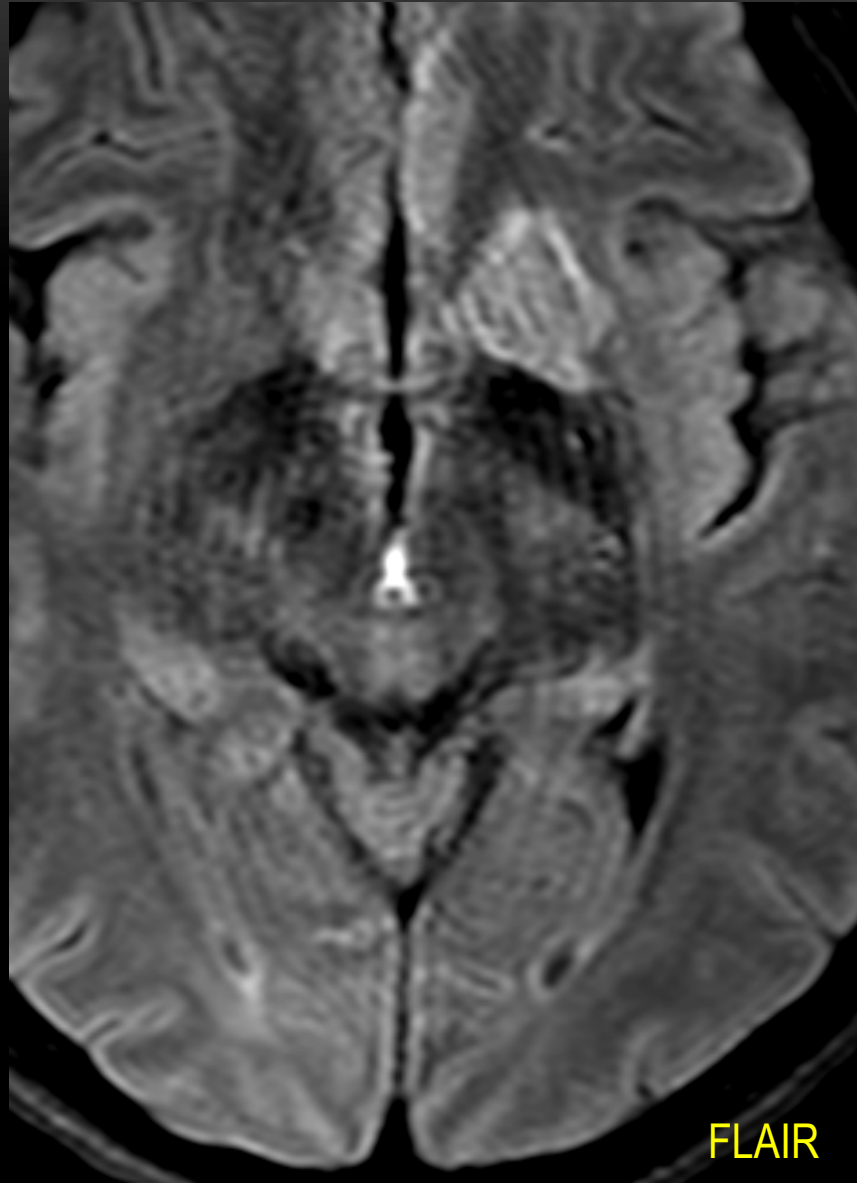


CAS NEURO

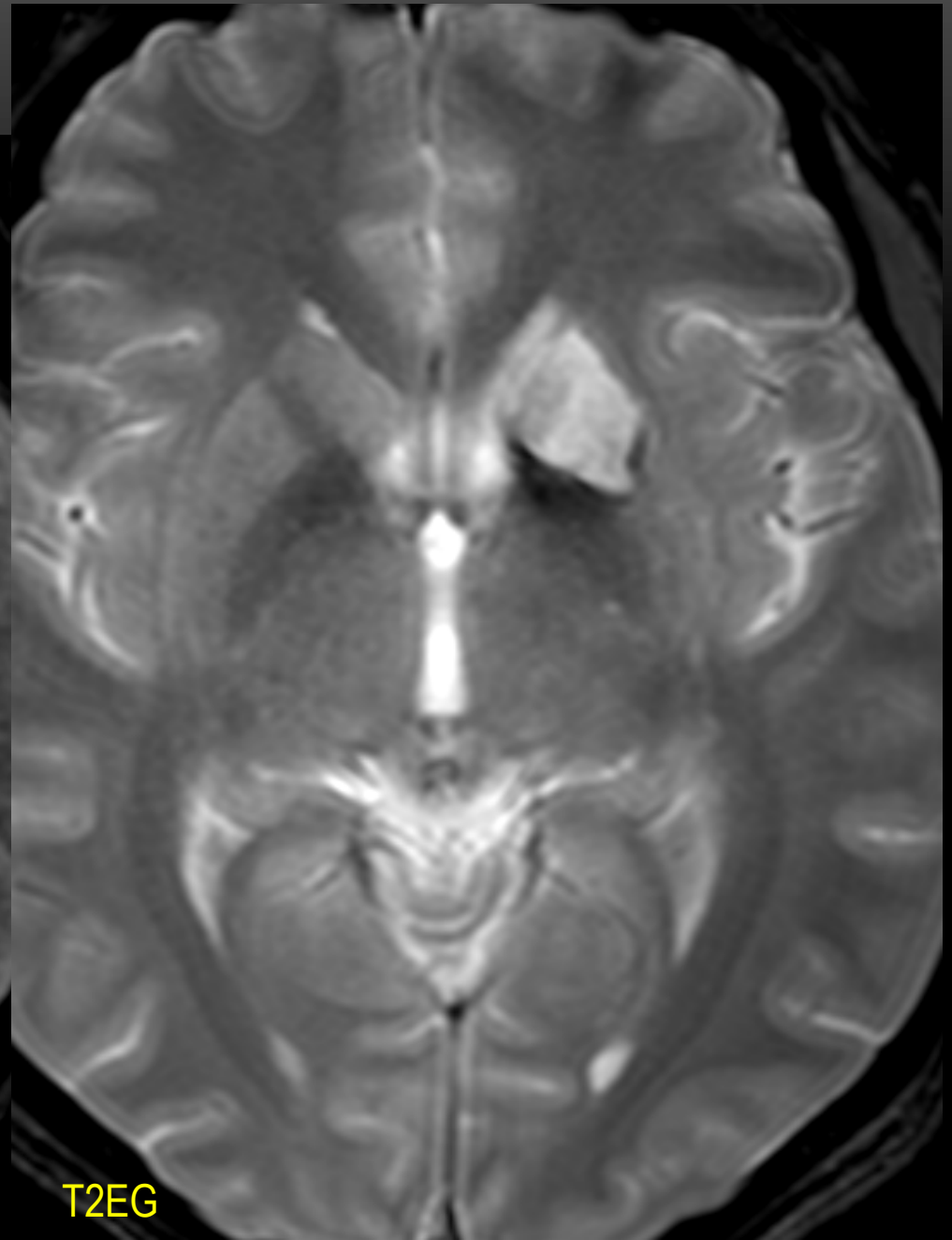
A thin, horizontal orange glow line is positioned below the text, extending across the width of the text.

- Patient de 35 ans présentant des céphalées depuis quelques jours.
- Le 02 mai: **hémiparésie droite** et **paralysie faciale droite + ataxie**

NOYAU CAUDÉ

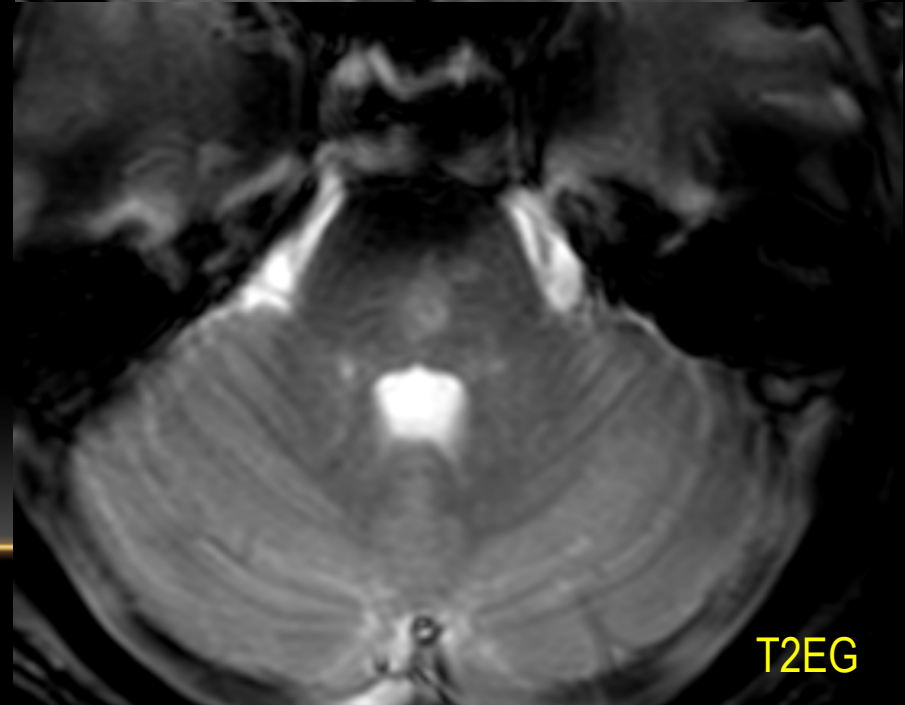
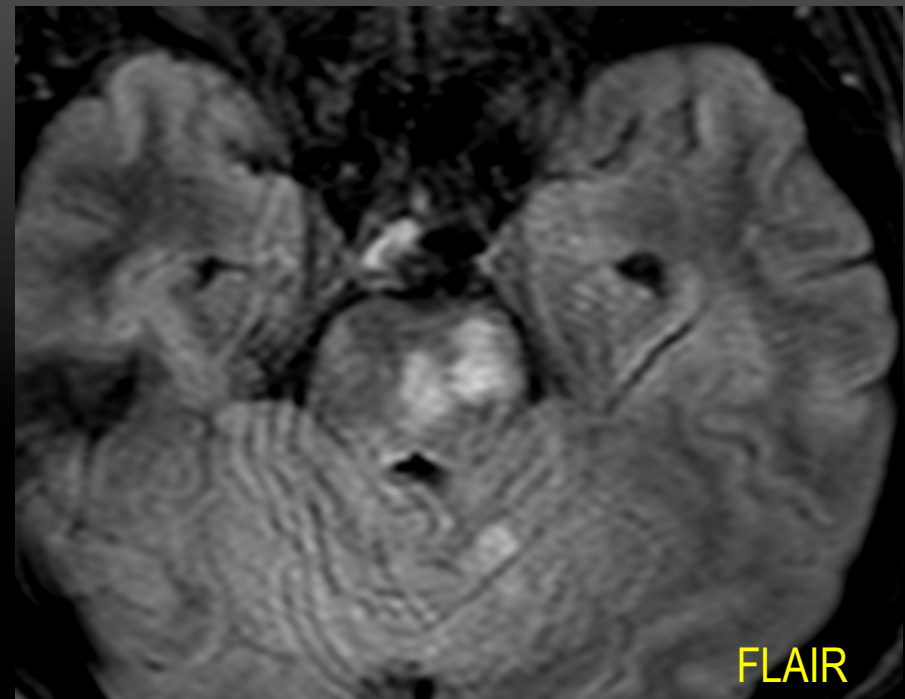
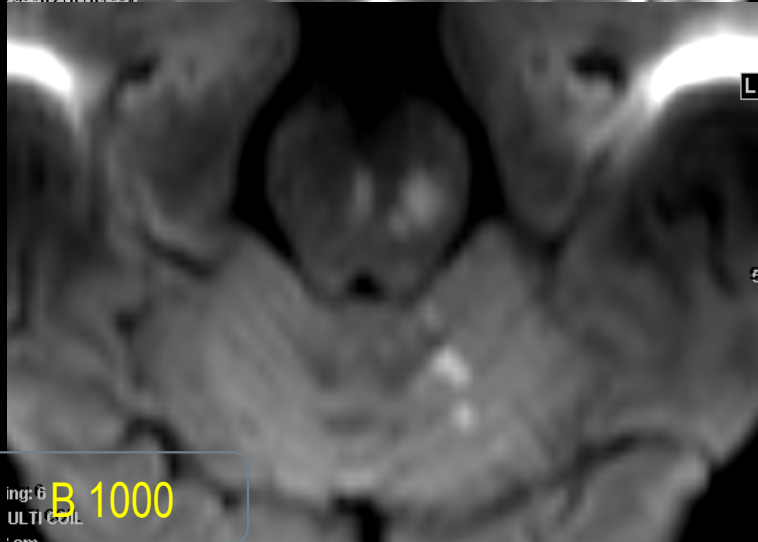
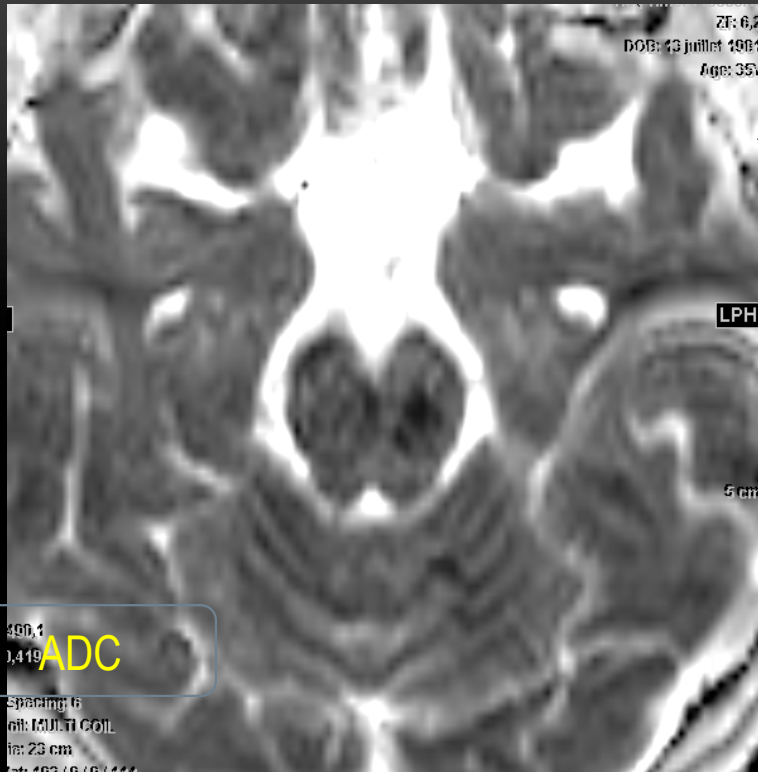


FLAIR

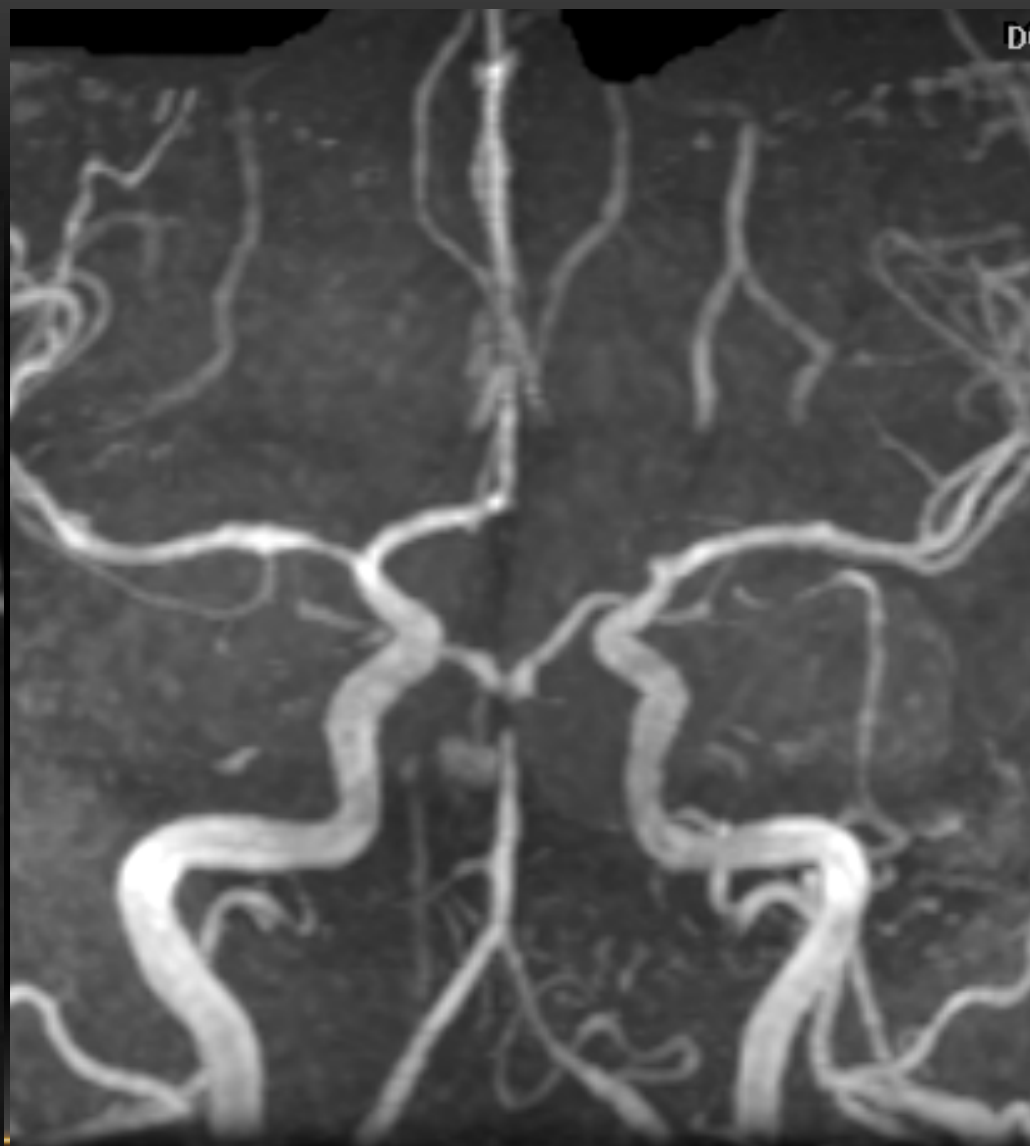
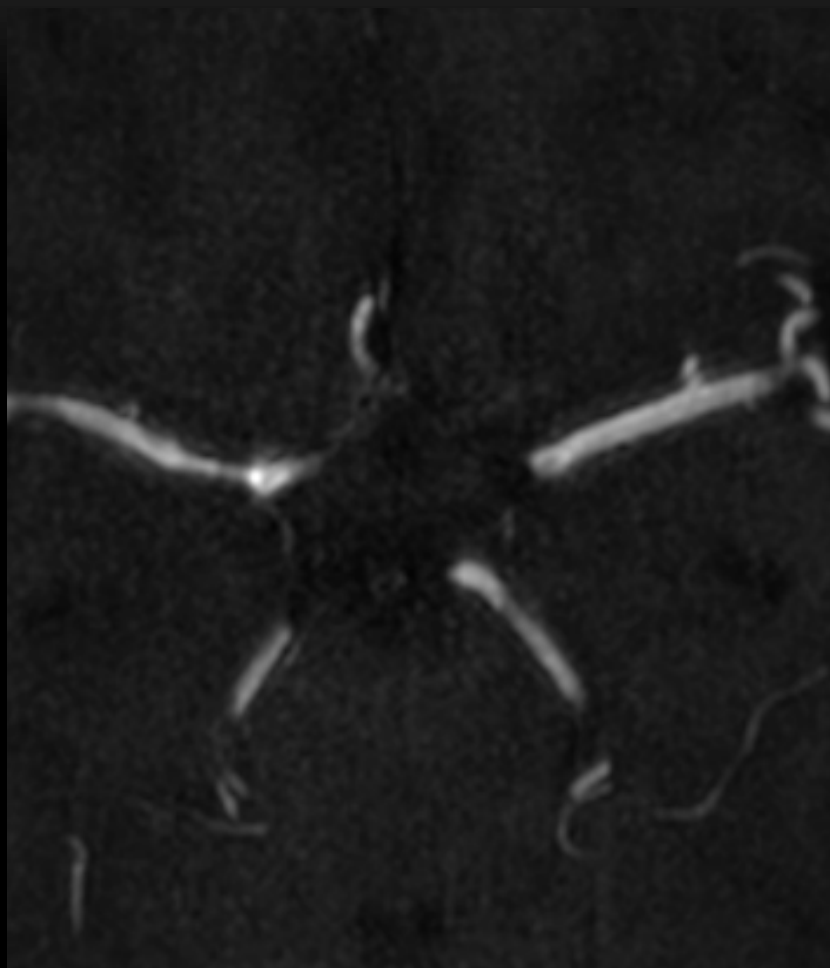


T2EG

IRM INITIALE: TRONC

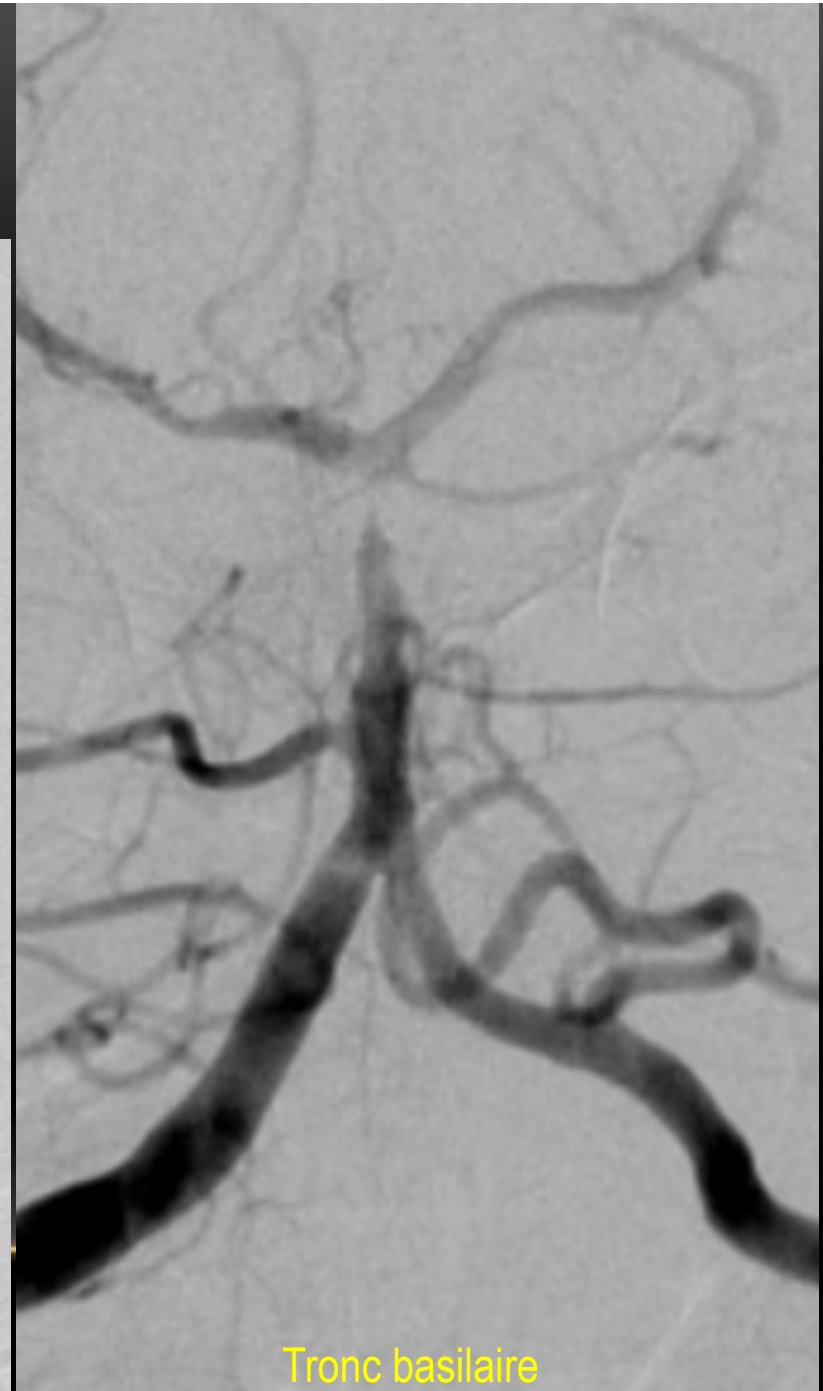
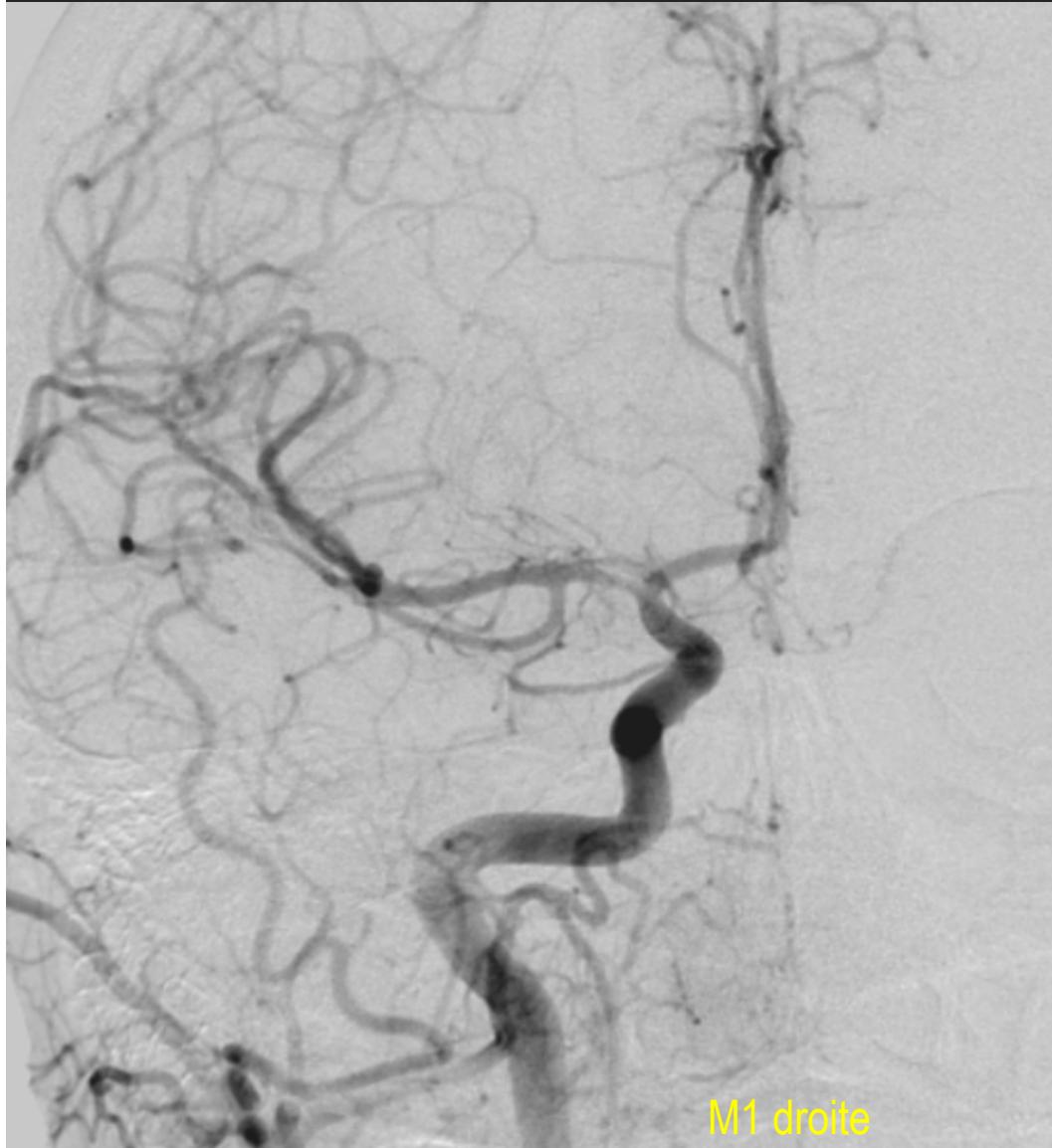


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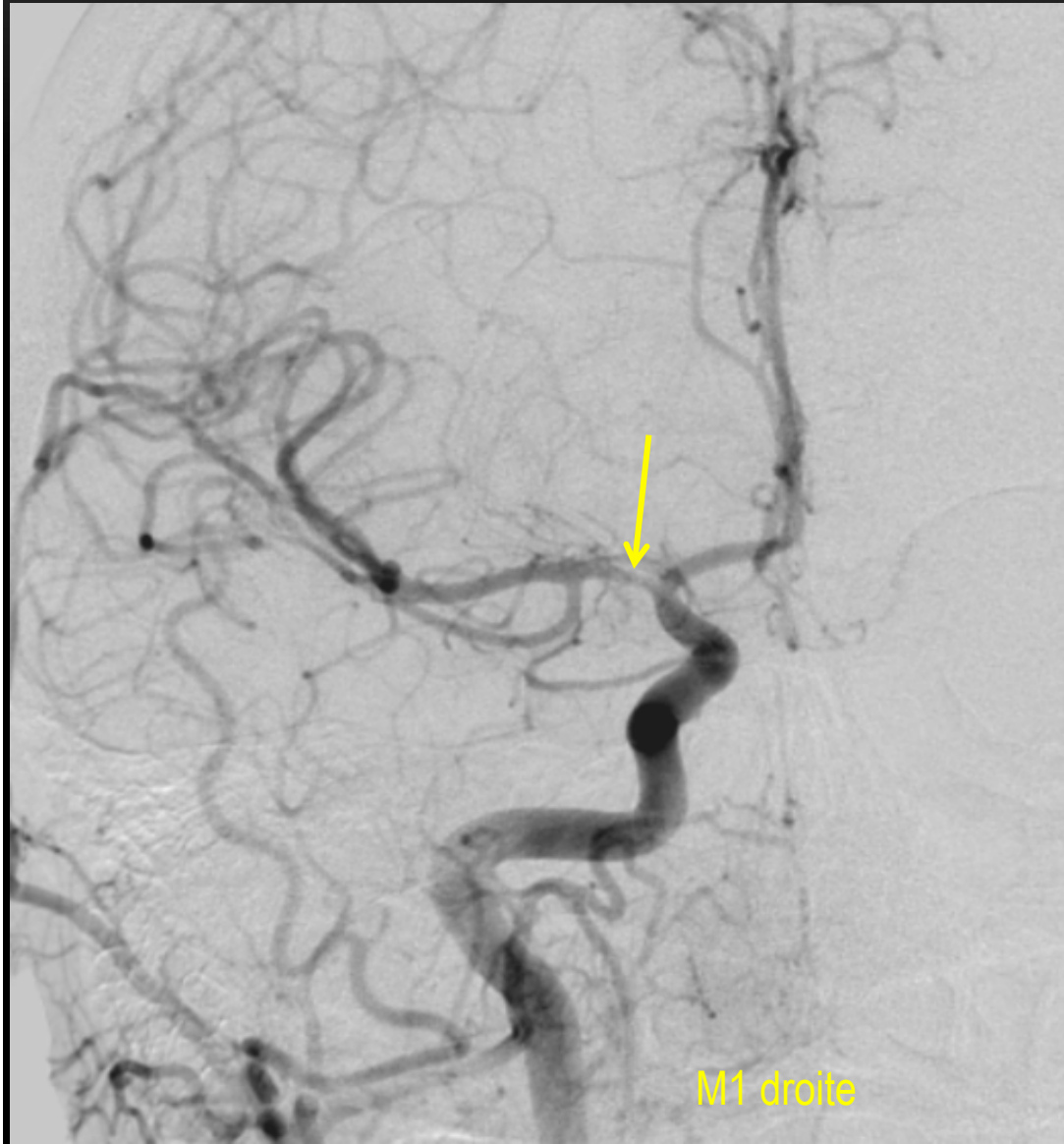


TOF axial et MIP

ARTERIOGRAPHIE

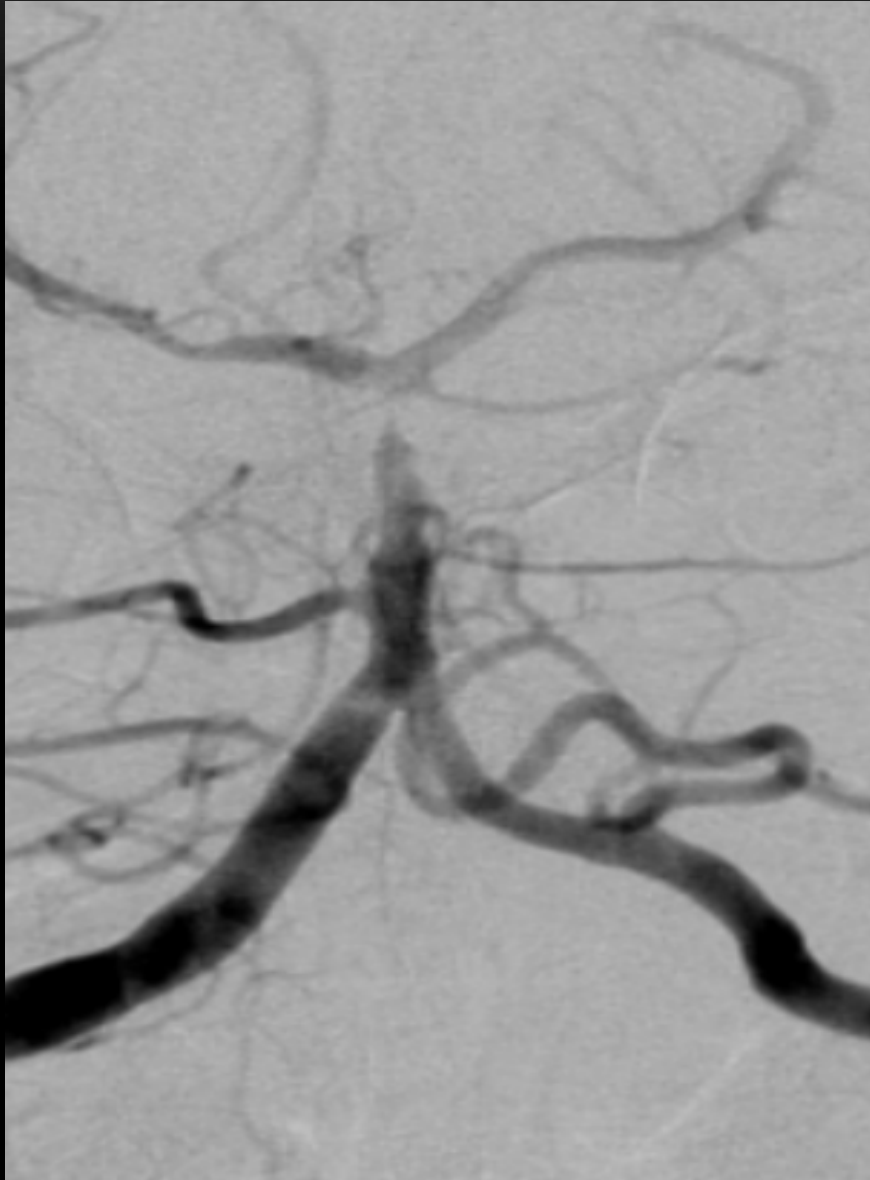


ARTERIOGRAPHIE



THROMBECTOMIE

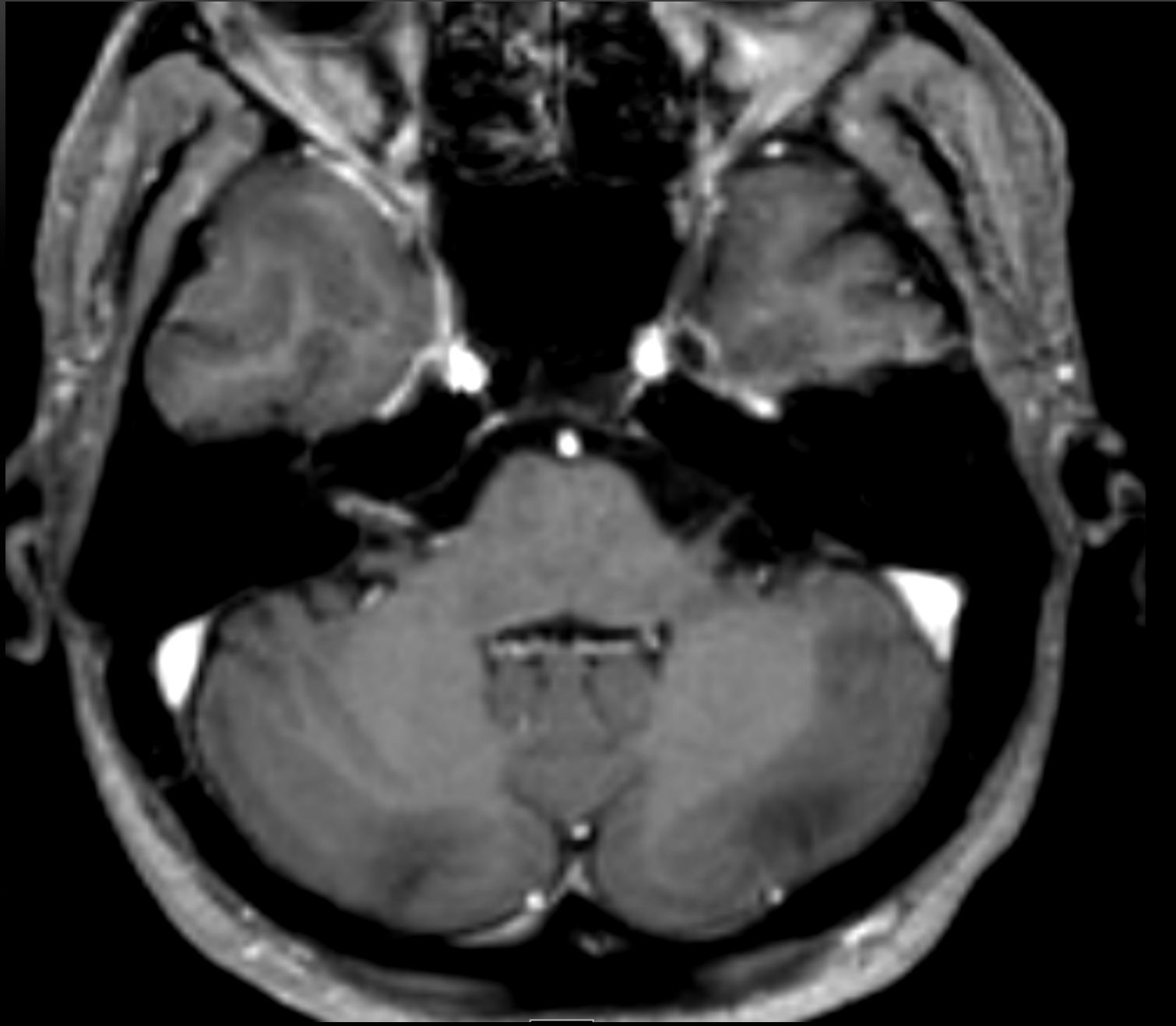
AVANT THROMBOASPIRATION



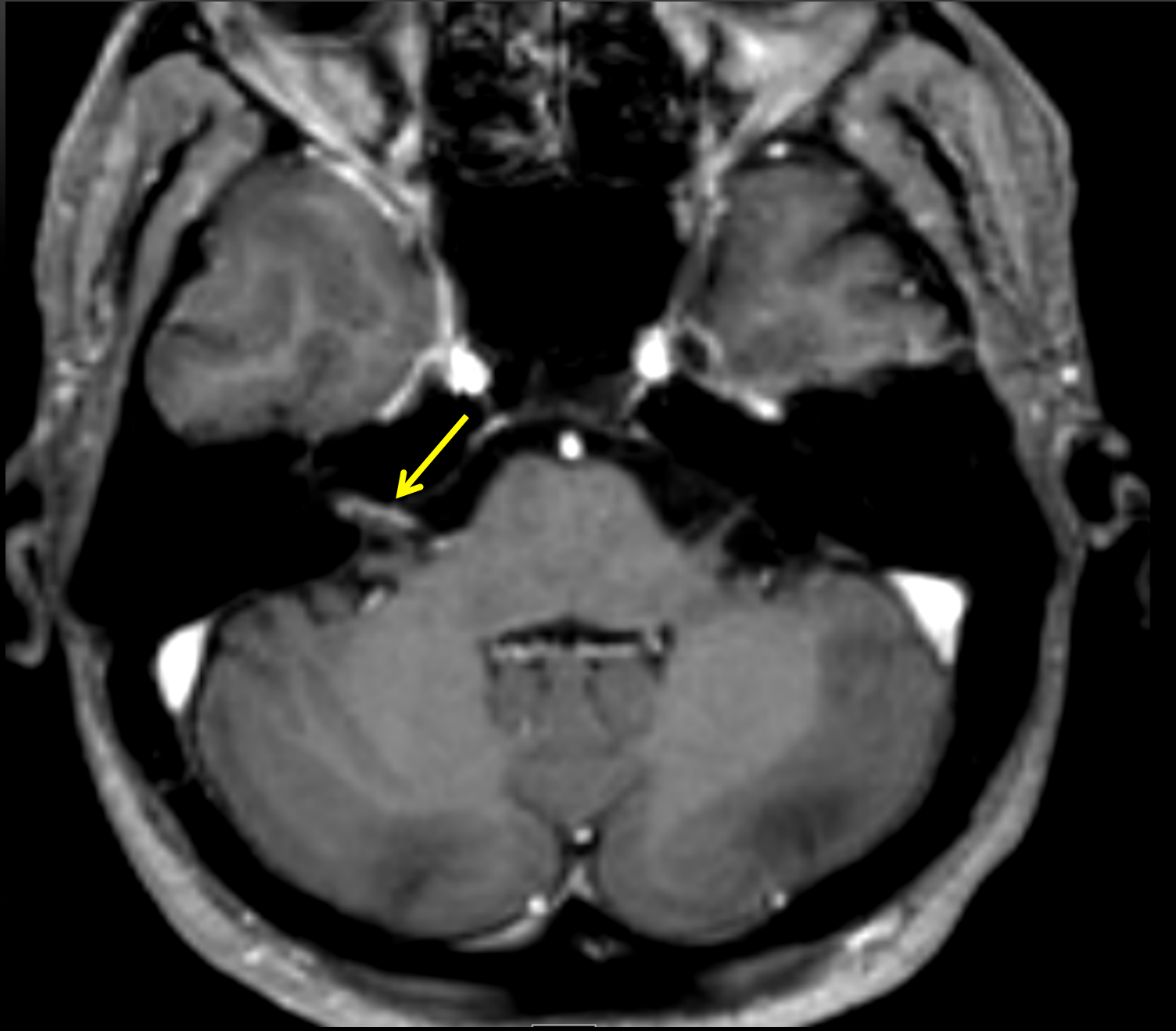
APRES RECANALISATION



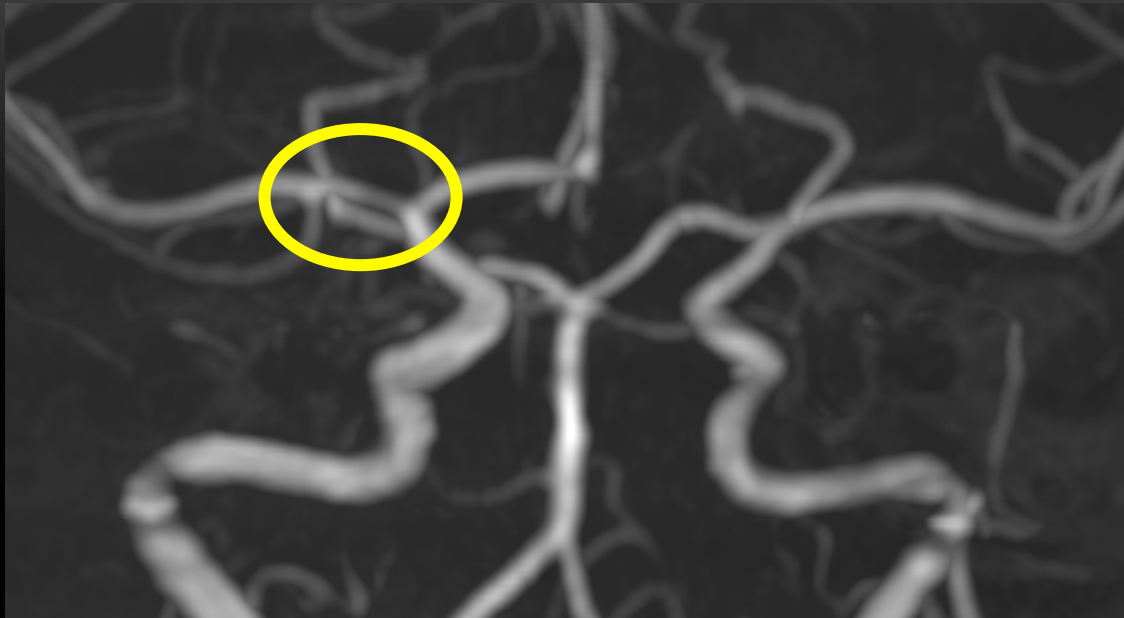
IRM À J10: T1 INJECTÉ



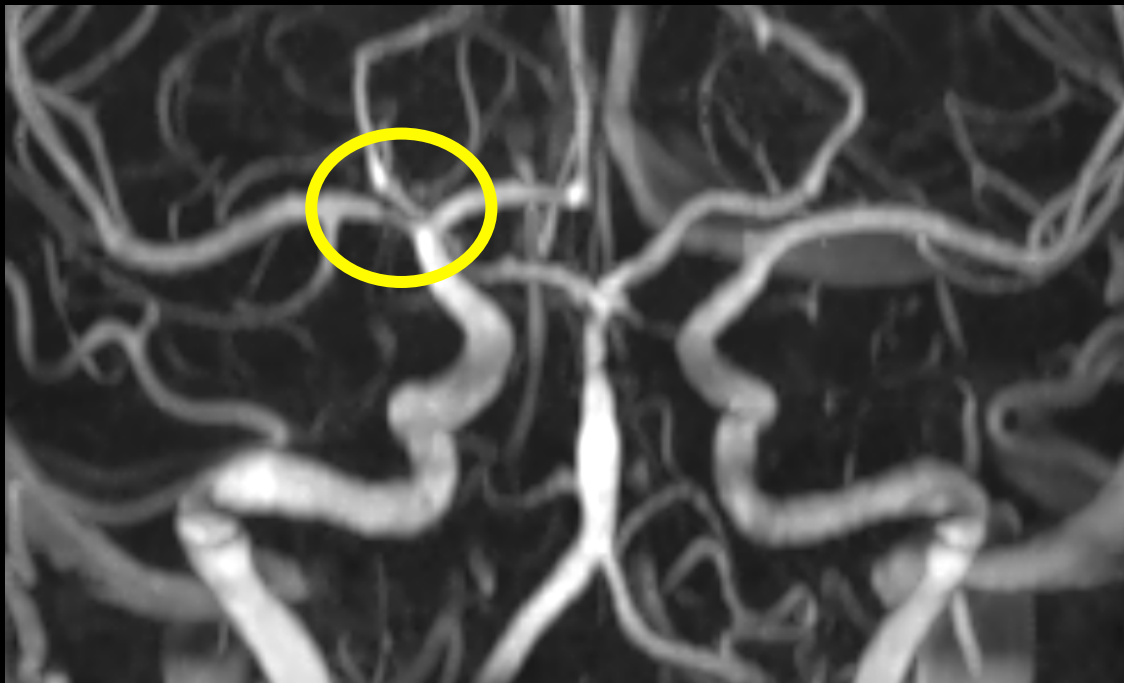
IRM À J10: PDC DU PAQUET ACOUSTICO-FACIAL DROIT



IRM À J15: RÉGRESSION DE LA STÉNOSE M1



TOF A J15



TOF APRES RECANALISATION

AU TOTAL

Patient de 35 ans, sans antécédent, présentant 1 tableau de sténose vasculaire plurifocale et régressive (ACM droite et tronc basilaire) compliquée d'ischémie ponto-cérébelleuse et de leptoméningite (paquet acoustico-facial droit)

VOTRE DIAGNOSTIC?

A/ Syndrome de Vasoconstriction Cérébrale Réversible. (SVCR).

B/ Syndrome de Gougerot-sjögren.

C/ Vascularite syphilitique.

D/ Méningo-encéphalite et vascularite du VIH.

E/ Vascularite à VZV.

AU TOTAL

Patient de 35 ans, sans antécédent, présentant 1 tableau de sténose vasculaire plurifocale et régressive (ACM droite et tronc basilaire) compliquée d'ischémie ponto-cérébelleuse et de leptoméningite (paquet acoustico-facial droit)

VOTRE DIAGNOSTIC?

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B/ Syndrome de Gougerot-sjögren.

C/ Vascularite syphilitique.

D/ Méningo-encéphalite et vascularite du VIH.

E/ Vascularite à VZV.

DIAGNOSTIC FINAL

- PL initiale (04/05): tableau de méningite lymphocytaire avec PCR à syphilis positive.
- CD4<1%

Découverte d'une infection VIH au stade SIDA compliquée d'une neuro-syphilis

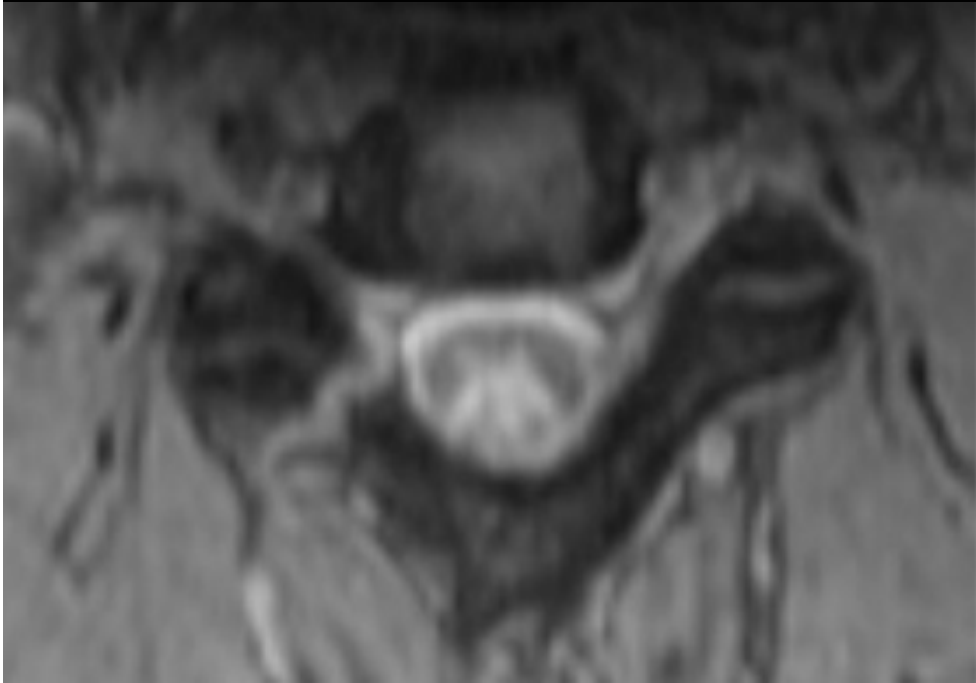
NEURO SYPHILIS

- Prévalence en augmentation ces dernières années.
- Neurosyphilis = syphilis tertiaire
- Co-infection VIH dans 40% des cas de syphilis
- Cette présentation clinique est la forme typique de découverte de neuro syphilis via l'imagerie:

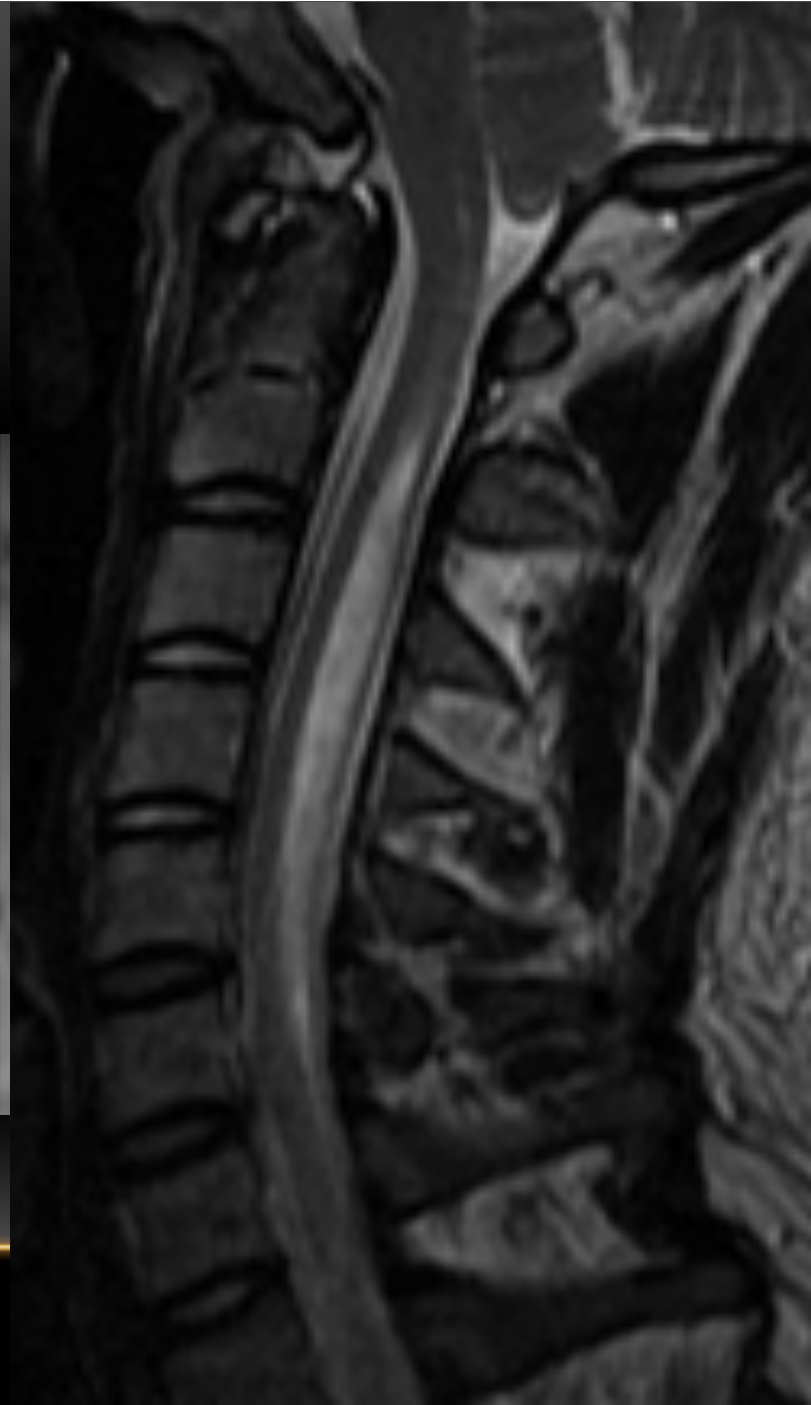
→ **Vascularite du tronc basilaire avec AVC ischémique d'aval.**

TABÉS DORSALIS

(Démýélinisation cordonale postérieure)



radiopaedia



ETIOLOGIES DES VASCULARITES (6)

PATHOLOGIES AVEC L'ASSOCIATION VASCULARITE ET LEPTOMENINGITE

Table 1: Classification of Vasculitis according to the 2012 Revised International Chapel Hill Consensus Conference on the Nomenclature of Systemic Vasculitides

Type of Vasculitis	Disease Entities
Large-vessel vasculitis	Takayasu arteritis Giant cell arteritis
Medium-sized vessel vasculitis	Polyarteritis nodosa Kawasaki disease
Small-vessel vasculitis	IgA vasculitis Microscopic polyangiitis <u>Granulomatosis with polyangiitis</u> <u>Eosinophilic granulomatosis with polyangiitis</u>
Variable-sized vessel vasculitis	Behçet disease Cogan syndrome
Single-organ vasculitis	PACNS
Vasculitis associated with systemic disease	SLE <u>Sjögren syndrome</u> Rheumatoid arthritis APLA syndrome Scleroderma
Vasculitis associated with probable etiology	Infection-induced vasculitis <u>Acute septic meningitis</u> <u>Mycobacterium tuberculosis</u> <u>Neurosyphilis</u> <u>Viral (HIV-related vasculitis, varicella-zoster vasculopathy)</u> Fungal (mucormycosis, aspergillosis) Parasitic (cysticercosis) Malignancy-induced vasculitis Drug-induced vasculitis Radiation-induced vasculitis

Note.—APLA = antiphospholipid antibody, HIV = human immunodeficiency virus, IgA = immunoglobulin A, PACNS = primary angiitis of the CNS, SLE = systemic lupus erythematosus.

SYMPTÔMES DES VASCULARITES (6)

Table 3: Imaging Findings of Vasculitis associated with Systemic Disease or Probable Cause

Cause	Imaging Findings
SLE	Subcortical and periventricular white matter hyperintensity (60% of cases), cerebral atrophy (30%), and intracranial hemorrhage (3%)
Sjögren syndrome	Extensive white and gray matter lesions and microbleeding, enlarged lacrimal and salivary glands
Rheumatoid arthritis	Pachymeningitis with leptomenigeal enhancement, dural nodules, and, rarely, cerebral vasculitis
APLA syndrome	Arterial or venous thrombosis, thrombocytopenia, and frequent miscarriages
Scleroderma	Nonspecific infarctions, macro- and microhemorrhages, and extensive calcification
Acute septic meningitis	Cerebral infarcts in 5%–15% of adults and up to 30% of neonates with bacterial meningitis
Tuberculous vasculopathy	Vasculitis of smaller cerebral arteries leading to small infarctions in the basal ganglia and enhanced basal cisterns
Neurosyphilis	Strokes in young adults (most often affecting the middle cerebral artery)
VZV	MR imaging: unilateral or bilateral basal ganglia infarction in children DSA: beaded appearance of anterior and middle cerebral arteries
HIV	Aneurysms, vessel occlusion, embolic disease, and venous thrombosis in children
Fungus	Paranasal sinus lesion with narrowed cavernous sinus and infarction in immunocompromised or diabetic patients
Cysticercosis	MR imaging: subarachnoid cysticercosis DSA: beaded appearance or tapered area of vascular obstruction
Malignancy	Associated lymphoma and hematologic malignancy
Cocaine	Vasculitis, vasospasm, infarction, and moyamoya-like vasculitis
Heroin	Spongiform leukoencephalopathy
Radiation	Wall thickening and prominent wall enhancement in affected large cerebral arteries

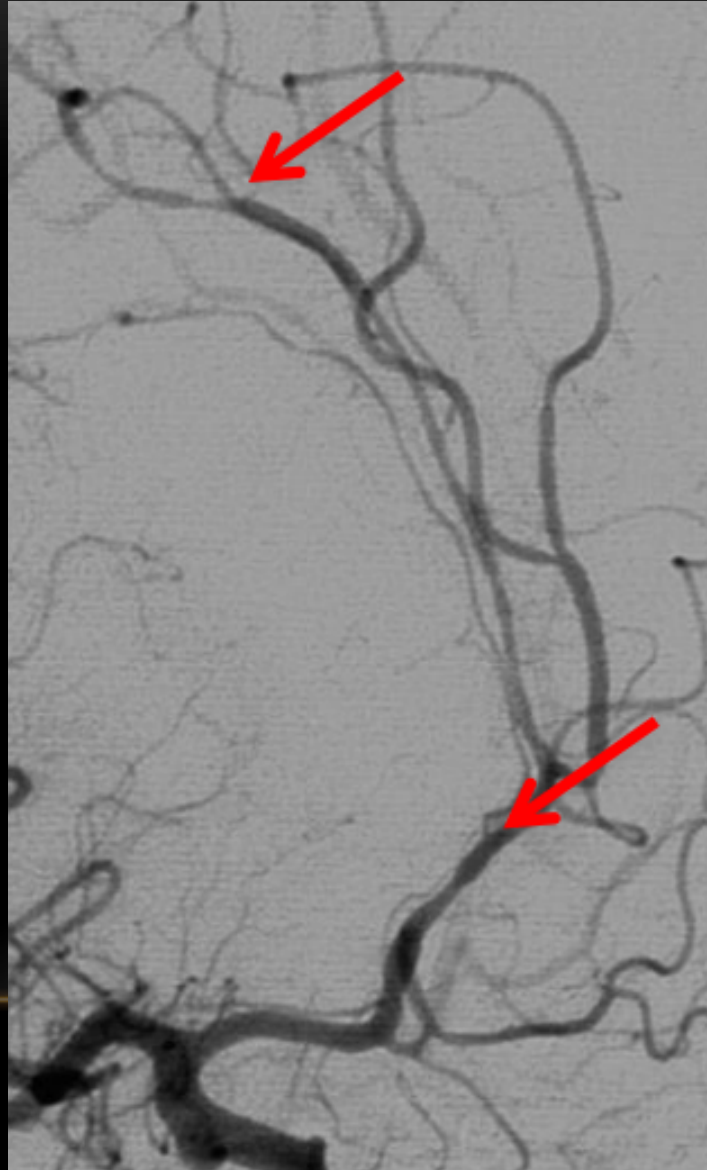
LES DIAGNOSTICS DIFFERENTIELS DE LA NEURO SYPHILIS

SYNDROME DE VASOCONSTRICTION CÉRÉBRAL RÉVERSIBLE (SVCR)

Irrégularité moniliforme plurifocale des artères cérébrales

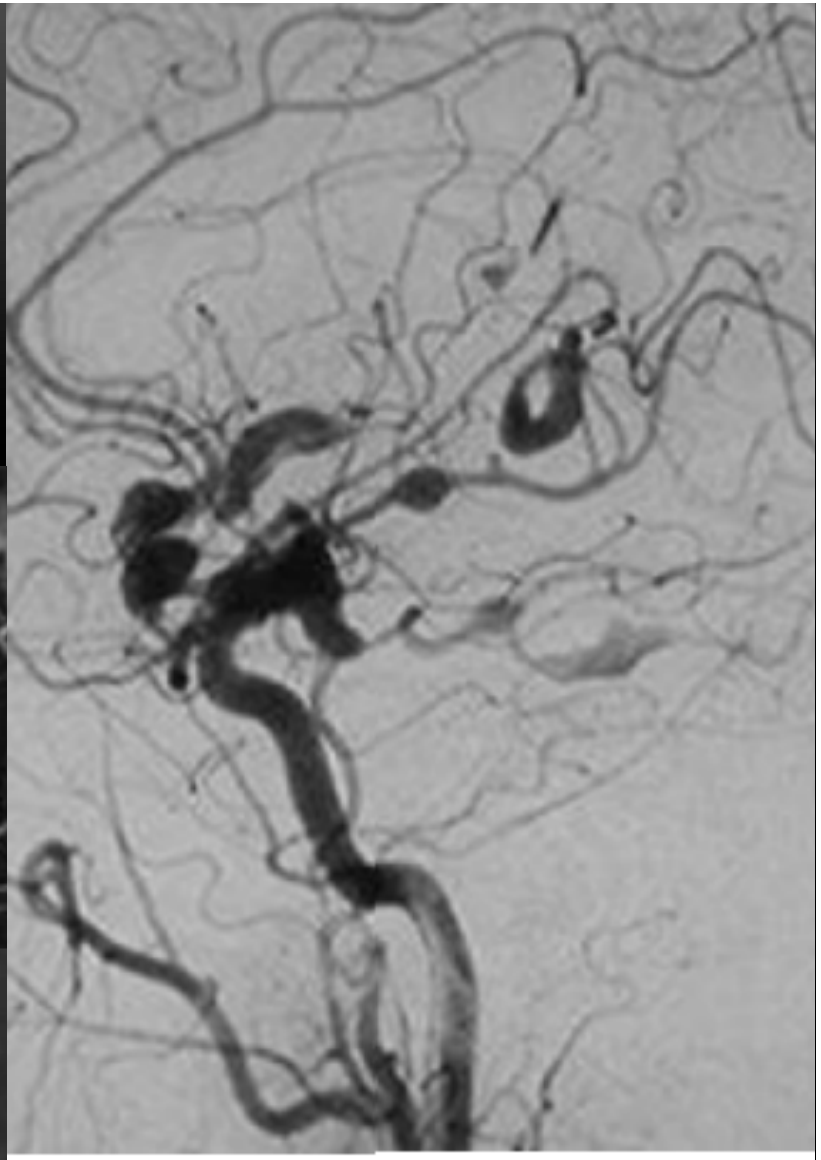
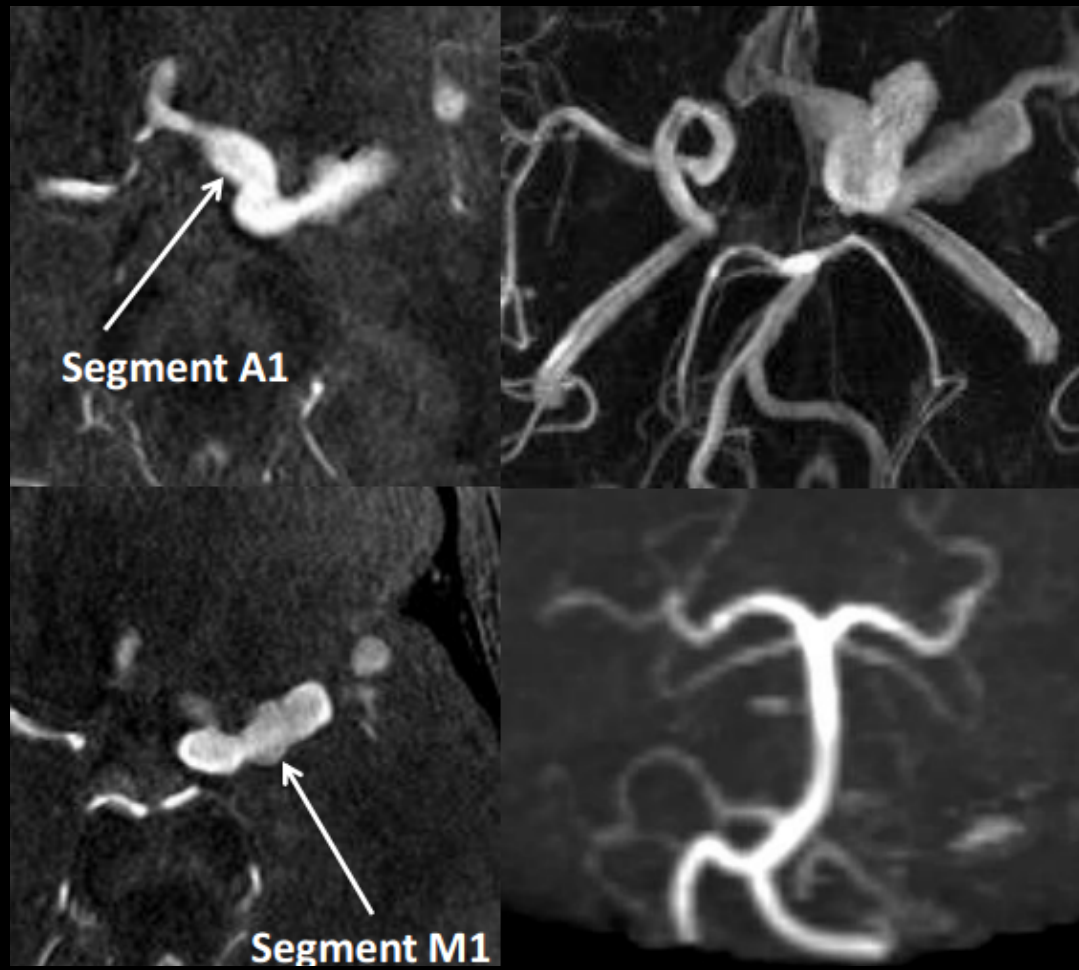
MAIS:

Pas de prise de contraste parenchymateuse ni de leptoméningite.



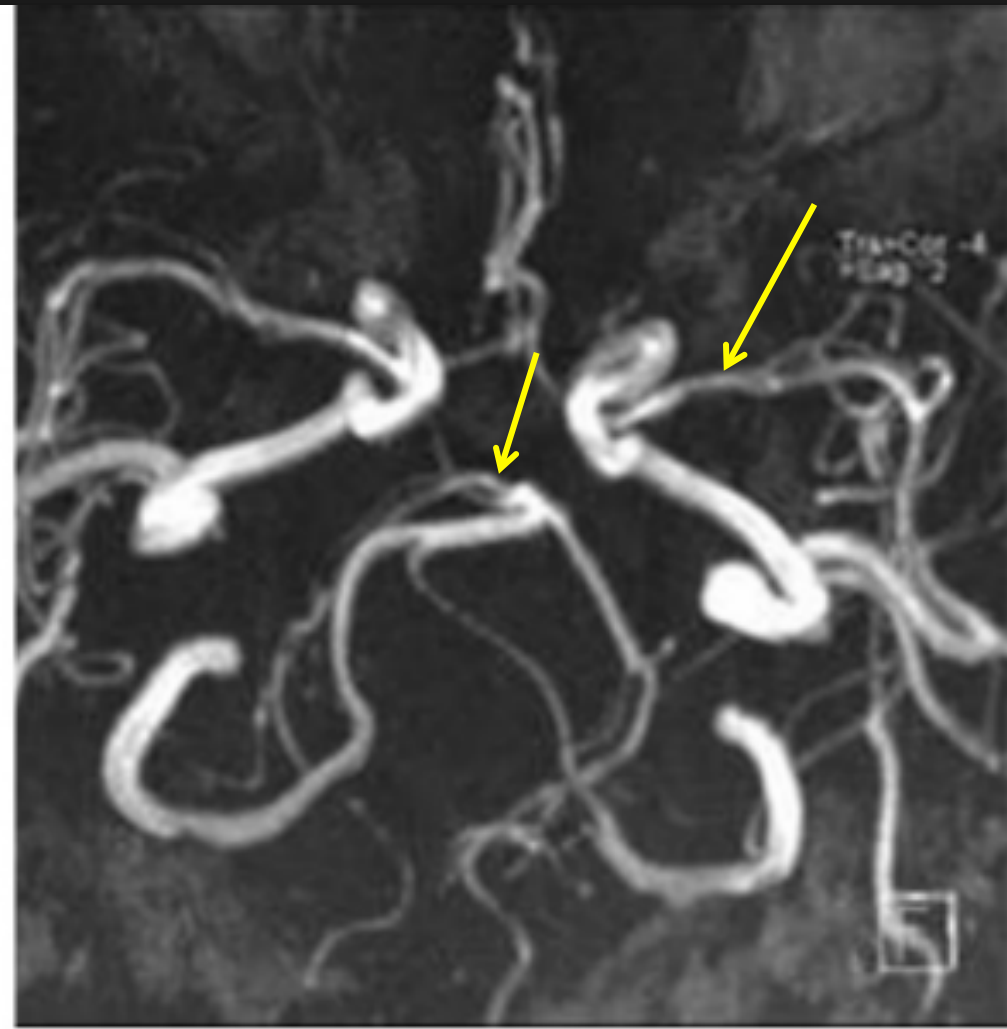
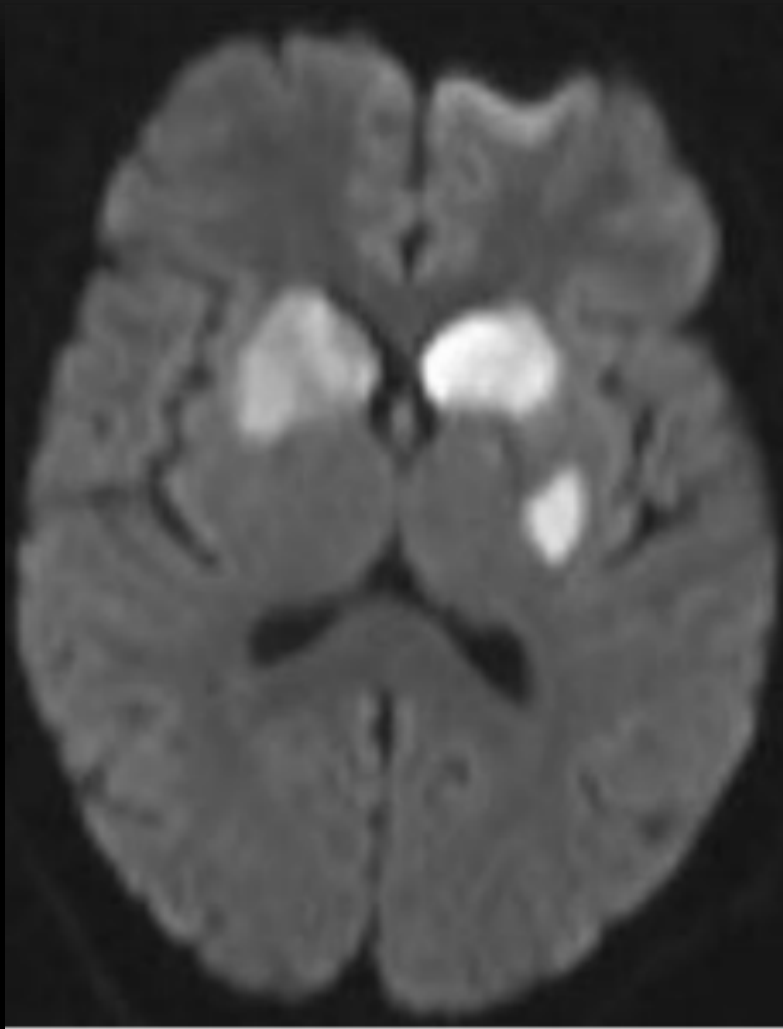
VASCULARITE DU VIH:

Développement
d'anévrismes et d'ectasies
fusiformes



radiographics

VASCULARITE VARICELLEUSE: INFARCTUS DES NOYAUX GRIS CENTRAUX + VASCULARITE PLURIFOCALE



Disparité de calibre des artères de moyen calibre: non spécifique

radiographics

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- (2) Acta Clin Belg. 2017 Feb 21:1-3. doi: 10.1080/17843286.2017.1290890. [Epub ahead of print]. **The big imitator strikes again: a case report of neurosyphilis in a patient with newly diagnosed HIV.** de Bruijn S¹, Kenyon C², Léonard N³, Vlieghe E^{1,2}.
- (3) Bourazza A, Kerouache A, Reda R, Mounach J, Mosseddag R. Meningovascular syphilis: study of five cases. Rev Neurol. 2008;164(4):369–73.
- (4) **Aspect IRM de la neuropsychillis - 07/04/11 MRI features of neurosyphilis** Doi : 10.1016/j.neurol.2010.08.012 **M. Brisset** ^a, **M.-L. Chadenat** ^a
- (5) Central nervous system infection associated with human immunodeficiency virus infection. Radiographics nov 2008 vol 28. DOI: 10.1148/rg.287085135
- (6) Imaging spectrum of CNS vasculitis RadioGraphics, Jul 2014, Vol. 34: 873–894, 10.1148/rg.344135028