

Serial Sonographic Findings of Lenticulostriate Vasculopathy

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摘要

Abstract

The vessels supplying basal ganglia and thalami are not usually detectable on the neurosonogram in the neonates. In recent studies, bright linear echogenesis in these regions have been well described and were defined as lenticulostriate vasculopathy (LSV). These lesions suggested as a marker of a previous insult to the fetal or neonatal brain and the hemodynamics in the immature brain play an important role in its pathogenesis. In a period of 2 year and 5 months, we collected 39 cases of neonates and prematurities with LSV. These include 16 cases of premature babies, 16 cases of normal full-term neonates and 7 cases with perinatal insults. LSV was detected incidentally in most cases, distinctly different from the previous reports that LSV are linked with congenital anomaly, chromosomal anomaly, prematurity, perinatal insult or congenital infection, etc. There are early onset (< or = 7 days) LSV in 23 cases (59%) and late onset (>7 days) in 16 cases (41%). 16 cases (41%) had total remission, 7 cases (18%) had partial remission, and 16 cases (41%) remained persistently. Rare reports reminded of the long term effect of LSV including tics, attention deficit hyperactive disorder and developmental delay. An isolated LSV generally has a good long term prognosis and a grave neurologic deficit may be mainly due to its associated brain damage.