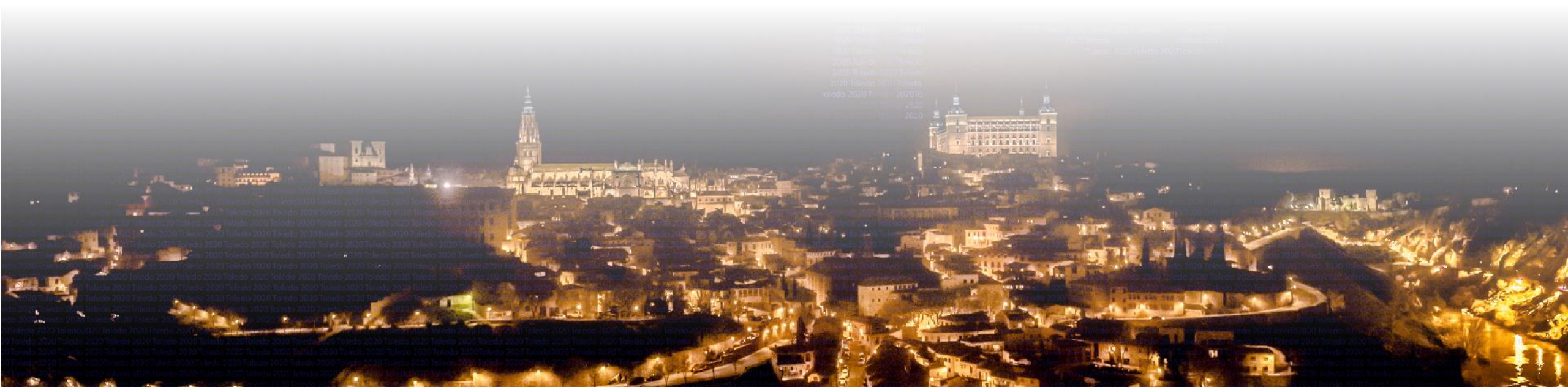


Twitter y las posibilidades de formación continuada a través del social media

Vicente Martín García

H. U. Nuestra Sra. de Candelaria. S. C. de Tenerife





Siguiendo

Sociedad Canaria de Radiología

@canariaderadio1 Te sigue

Cuenta oficial de la Sociedad Canaria de Radiología (SCR), filial de la Sociedad Española de Radiología (SERAM).

📍 Islas Canarias, España 📅 Se unió en junio de 2018

1181 Siguiendo **1203** Seguidores



caniel
perez

Editar perfil

Vicente Martín

@vmargar

NRx.HUNSC [#Neurorad](#)

📅 Se unió en junio de 2011

1840 Siguiendo **2703** Seguidores



Redes Sociales

 ¿Por qué?

 ¿Cuál?

 ¿Cómo?

 ¿A quién?



¿POR QUÉ?

- Visibilidad/exposición**
- Fiabilidad**
- Adicción**
- Inmediatez**
- Interactividad**

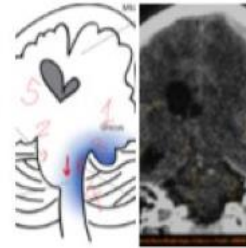


VIRALIZACIÓN, EL ARTE DE PERDER EL CONTROL



Impresiones: cantidad de veces que a un usuario se le publica un Tweet en la cronología o en los resultados de búsqueda.

Interacciones: cantidad total de veces que un usuario interactuó con un Tweet. Clicks en cualquier lugar del Tweet como: Retweets, respuestas, Me gusta, enlaces, etc



Vicente Martín @vmargar

#FOAMrad #NeuroRad #radres #HUNSC

Uncal herniation

Medial displacement of the uncus and parahippocampal gyrus of the temporal lobe

(1)

Mass effect/obliteration contralateral cisterns

(2)

Widening of ipsilateral cisterns (3)

Duret hemorrhage (4)

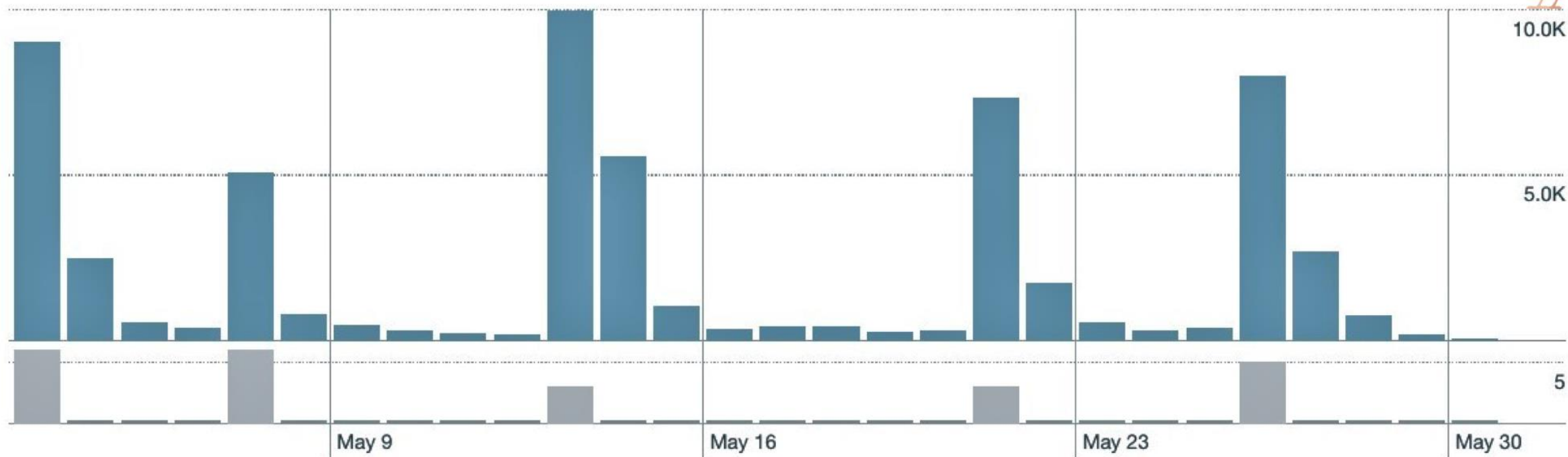
Contralateral hydrocephalus (5)

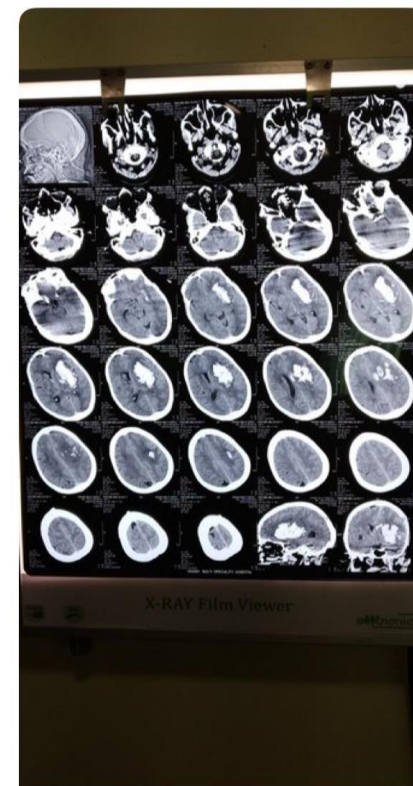
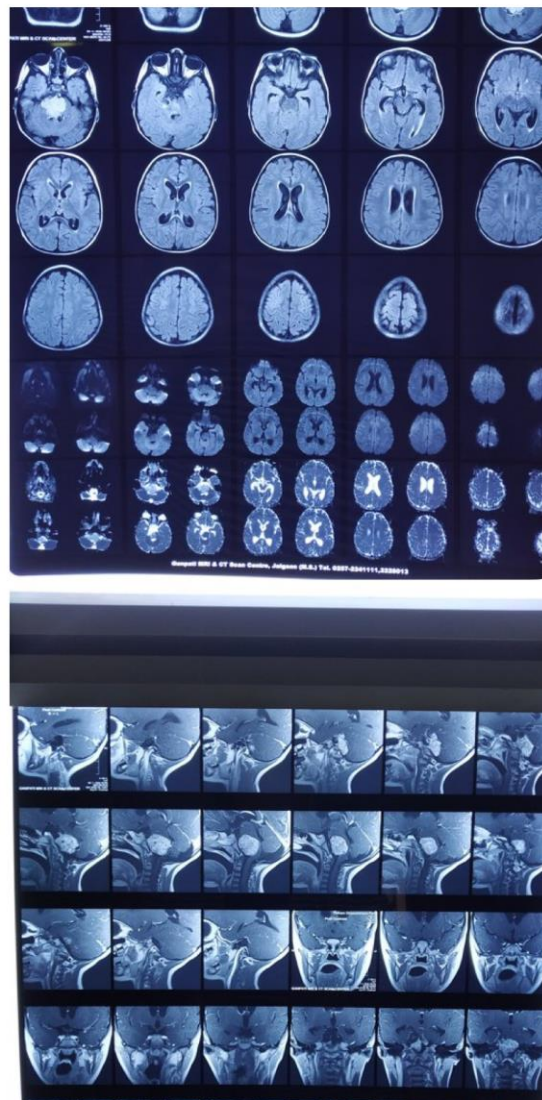
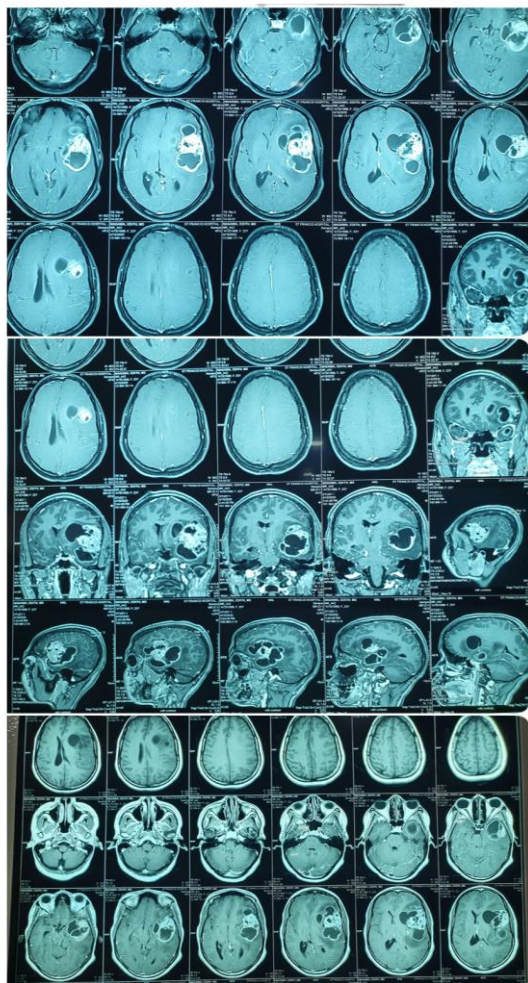
pic.twitter.com/BAG4V5gOTc

Impresiones	11.676
Interacciones totales	800
Interacciones con el contenido multimedia	402
Abrir el detalle	240
Me gusta	89
Clics en el perfil	33
Retweets	29
Clics en el enlace	4
Respuestas	2
Clics en la etiqueta	1



Sus Tweets consiguieron 62,3k impresiones en este período de 28 días





20 de enero de 2019



A patient sir in our casualty

10:58



¿CUÁL UTILIZAR?



Social Media Tools for Department and Practice Communication and Branding in the Digital Age

Marc D. Kohli, MD
 Dania Daye, MD, PhD
 Alexander J. Towbin, MD
 Amy L. Kotsenas, MD
 Marta E. Heilbrun, MD, MSCI

With nearly 70% of adults in the United States using at least one social media platform, a social media presence is increasingly important for departments and practices. Patients, prospective faculty and trainees, and referring physicians look to social media to find information about our organizations. The authors present

Insights Imaging (2015) 6:741–752
 DOI 10.1007/s13244-015-0430-0



REVIEW

Social media for radiologists: an introduction

Erik R. Ranschaert¹ · P. M. A. van Ooijen² · Simon Lee³ · Osman Ratib⁴ · P. M. Parizel⁵

Use of Social Media in Radiology Education

Saad Ranginwala, MD^a, Alexander J. Towbin, MD^a

© 2017 American College of Radiology
 1546-1440/17/\$36.00 ■ <https://doi.org/10.1016/j.jacr.2017.09.010>



Platform Name	Number of Users	Supported Content in Posts	Interaction	Direct Messaging	Stories	Viewer Tracking	Hashtags (#) to Sort Content	Crowdsourced Data
Facebook https://www.facebook.com/	2.41 billion active monthly users as of May 2019	Text based posts with support for embedded images, videos and links	Add Friends Like Comment Share	✓	✓	✓	✓	
Twitter https://twitter.com/	320 million active monthly users	Text based post with support for embedded images, videos and links	Follow Retweet Like Reply	✓		✓	✓	
Instagram https://www.instagram.com/	1+ billion active monthly users as of June 2018	Image based platform with support for videos and some text	Follow Like Comment Share	✓	✓	✓	✓	
REDDIT https://www.reddit.com/	430+ million active monthly users as of January 2020	Digital bulletin board with primarily text-based posts with support for embed links, photos and videos where more popular items appear first	Follow Comment Share Upvote Downvote	✓			✓	
LinkedIn https://www.linkedin.com/	660+ million members as of January 2020	Professional online profile for networking purposes, primarily text-based posts with support of embedded links, photos and videos	Connect Like	✓		✓		
YouTube https://www.youtube.com/	2+ billion users as of January 2020	Primarily video-based posts with support for embedded links and text	Share View Subscribe Like Dislike Comment			✓		
doximity https://www.doximity.com/	1 million members as of February 2018	Primarily text-based platform for displaying a profile for medical	Send HIPPA-compliant messages and faxes	✓				✓
Snapchat https://www.snapchat.com/	200 million (+) worldwide users	Primarily image and video-based posts with support of embedded text	View Snap	✓	✓	✓		
R ⁶ ResearchGate https://www.researchgate.net/	15+ million worldwide members as of April 2018	Primarily text-based posts that have either been published, been rejected, in need of revision or additional research support	Ask questions Share Research Seek Opportunities Find Collaborators	✓		✓		✓
WhatsApp https://www.whatsapp.com/	1.6 billion active users as of July 2019	Text based mobile messaging with support of embedded	Free mobile messaging app Interaction via direct messaging other users	✓				

Radiology Research Alliance

Social Media in Radiology: Overview and Usefulness of Online Professional #SoMe Profiles

Bradley Spieler, MD, David H Ballard, MD, Parisa Mazaheri, MD, Nicole Legro, BS, Tara Catanzano, MD, Courtney Dey, MD, Elizabeth Prejean, BS, Jake Fontentot, BSN, Maria Daniela Martin, MD, Raman Danrad, MD, Helen Hye Ryong Kim, MD, Drew Caplin, MD, Lori Mankowski Gettle, MD, Omer Awan, MD, MPH

<https://doi.org/10.1016/j.acra.2020.03.014>

Social Media Tools for Department and Practice Communication and Branding in the Digital Age

Twitter

Twitter is among the most commonly used social media platforms in the professional medical community. It is based on text interactions (tweets) delivering microbursts of information, in which users can also embed photographs, links, and videos. All posts are currently limited to 280 characters and can be viewed by all users following the poster or by any user following any hashtags included in the post. All users can also comment on any post.

RadioGraphics 2018; 38:1773–1785
<https://doi.org/10.1148/rg.2018180090>













CUENTAS CON MÁS SEGUIDORES

	Variación	Nombre de la cuenta	Propietario	Número de seguidores (en millones)
1.	=	@BarackObama	Barack Obama	129,1
2.	=	@justinbieber	Justin Bieber	113,8
3.	=	@katyperry	Katy Perry	109,4
4.	=	@rihanna	Rihanna	101,6
5.	=	@Cristiano	Cristiano Ronaldo	90,9
6.	=	@taylorswift13	Taylor Swift	88,2
7.	=	@ladygaga	Lady Gaga	83,8

	Variación	Nombre de la cuenta	Propietario	Número de seguidores (en millones)
8.	+1	@ArianaGrande	Ariana Grande	81,8
9.	-1	@TheEllenShow	Ellen DeGeneres	79,2
10.	=	@YouTube	YouTube	72,9
11.	=	@KimKardashian	Kim Kardashian	68,9
12.	+1	@narendramodi	Narendra Modi	65,5
13.	+1	@selenagomez	Selena Gomez	64,4



CUENTAS CON MÁS SEGUIDAS EN ESPAÑA

#	Twittero	Seguido por	Sigue a	Tweets	Twitea desde	Ultimo Tweet	Categoría
1	 @Cristiano Cristiano Ronaldo	78,536,721	51	3,412	14/06/2010	01/07/2019	deportes...
2	 @neymarjr Neymar Jr	47,734,956	733	41,684	22/06/2010	30/06/2020	deportes...
3	 @realmadrid Real Madrid C.F.?	32,927,635	58	67,491	22/05/2008	14/09/2019	futbol...
4	 @FCBarcelona FC Barcelona	30,012,030	80	102,754	15/12/2009	30/06/2019	deportes...
5	 @andresiniesta8 Andrés Iniesta	24,415,859	104	2,140	18/11/2009	14/09/2019	futbol...
6	 @3gerardpique Gerard Piqué	19,629,600	680	2,902	08/12/2010	01/02/2020	futbol
7	 @AlejandroSanz Alejandro Sanz	19,570,871	2,155	29,516	28/05/2009	30/07/2019	musica...
8	 @jamesdrodriguez James Rodríguez	18,299,207	296	2,732	11/04/2011	20/07/2019	deportes...
9	 @GarethBale11 Gareth Bale	18,028,244	117	1,506	06/08/2012	13/06/2019	deportes...
10	 @SergioRamos Sergio Ramos	16,848,762	722	3,996	02/06/2010	08/02/2020	futbol...





TOP 10 MÉDICOS EN TWITTER 2020



Cuenta	Seguidores	Seguidos	Ratio
1. @spiriman	125.607	137	916,83
2. @luciapediatra	66.722	1.290	51,72
3. @Nopanaden	63.776	663	96,19
4. @MDiazFuentes	47.537	3.241	14,66
5. @juliomayol	39.801	12.141	3,27
6. @joancmarch	34.315	33.174	1,03
7. @SergioVanoG	33.067	18.368	1,80
8. @mlalanda	32.983	2.791	11,81
9. @DoctorCasado	25.954	25.663	1,01
10. @frmat	24.372	26.590	0,91



¿CÓMO?: ACTITUD

 **Pasiva**

 **Pasiva/agresiva:**

 **Retuitear.**

 **Comentar.**

 **Activa:**

 **Hilos (“tutoriales”)**





Vicente Martín @vmargar · 6/7/21

#FOAMrad #FOAMed #neurorad #radres #neuroradiology

MRI findings for lesions related to Small Vessel Disease

Lancet Neurol 2013; 12: 822–38

DOI: 10.1016/S1474-4422(13)70124-8

	Recent small subcortical infarct	White matter hyperintensity	Lacune	Perivascular space	Cerebral microbleed
Example image					
Schematic					
Usual diameter	≤20 mm	Variable	3–15 mm	≤2 mm	≤10 mm
Comment	Best identified on DWI	Located in white matter	Usually have hyperintense rim	Most linear without hyperintense rim	Detected on GRE seq., round or ovoid, blooming
DWI	↑	↔	↔/(↓)	↔	↔
FLAIR	↑	↑	↓	↓	↔
T2	↑	↑	↑	↑	↔
T1	↓	↔/(↓)	↓	↓	↔
T2*-weighted GRE	↔	↑	↔ (↓ if haemorrhage)	↔	↓↓

↑ Increased signal ↓ Decreased signal ↔ Iso-intense signal





Vicente Martín @vmargar · 16/8/21

#FOAMrad #NeuroRad #radres #HUNSC

Uncal herniation

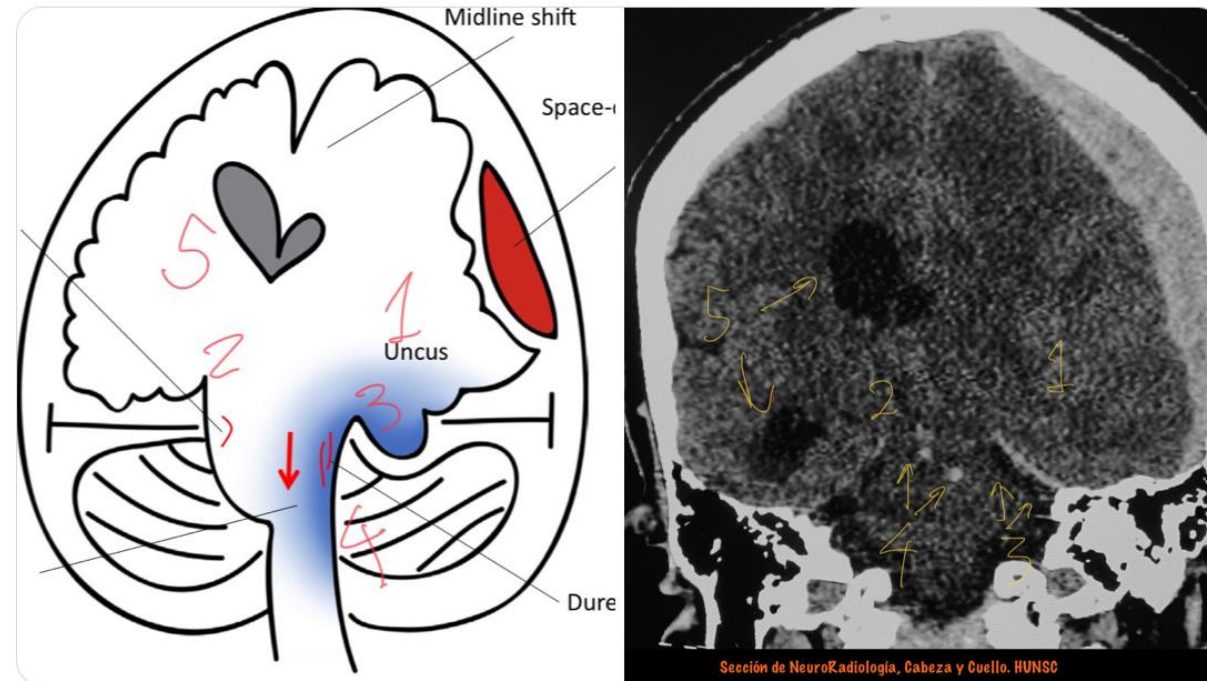
Medial displacement of the uncus and parahippocampal gyrus of the temporal lobe (1)

Mass effect/obliteration contralateral cisterns (2)

Widening of ipsilateral cisterns (3)

Duret hemorrhage (4)

Contralateral hydrocephalus (5)





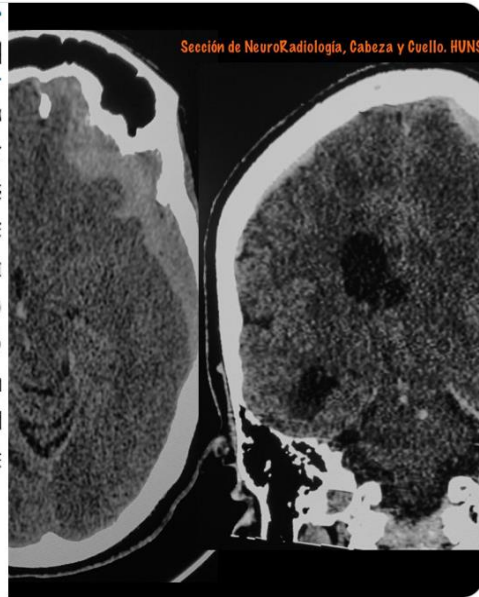
Vicente Martín @vmargar · 16/8/21

Uncal herniation produces a duret hemorrhage that appears as flame or linear-shaped hyperintensities in the brain stem.

This is due to tearing of small vessels.

dx.doi.org/10.1016/B978-0...

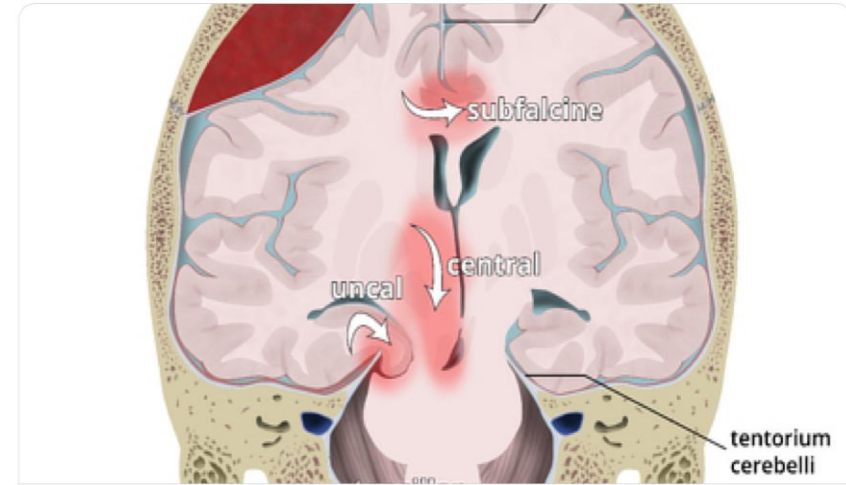
Mechanisms	Clinical presentations
1. Compression on parasympathetic followed by somatic component of oculomotor nerve 2. Infarction of ipsilateral visual cortex 3. Lateral displacement of brain stem to compress the contralateral corticospinal tract 4. Distortion of the ascending arousal system 5. Duret hemorrhage	1. Dilated pupils, ptosis, and "down and out position" of the ipsilateral eye 2. Contralateral homonymous hemianopia 3. Ipsilateral hemiparesis or hemiplegia 4. Unconsciousness 5. Decorticate posture, respiratory depression, and death



Type of herniation	Mechanisms	Clinical presentations
Uncal herniation	1. Compression on parasympathetic followed by somatic component of oculomotor nerve 2. Infarction of ipsilateral visual cortex 3. Lateral displacement of brain stem to compress the contralateral corticospinal tract 4. Distortion of the ascending arousal system 5. Duret hemorrhage	1. Dilated pupils, ptosis, and "down and out position" of the ipsilateral eye 2. Contralateral homonymous hemianopia 3. Ipsilateral hemiparesis or hemiplegia 4. Unconsciousness 5. Decorticate posture, respiratory depression, and death



Vicente Martín @vmargar



radiopaedia.org

Uncal herniation | Radiology Reference Article | Radiopaedia.org

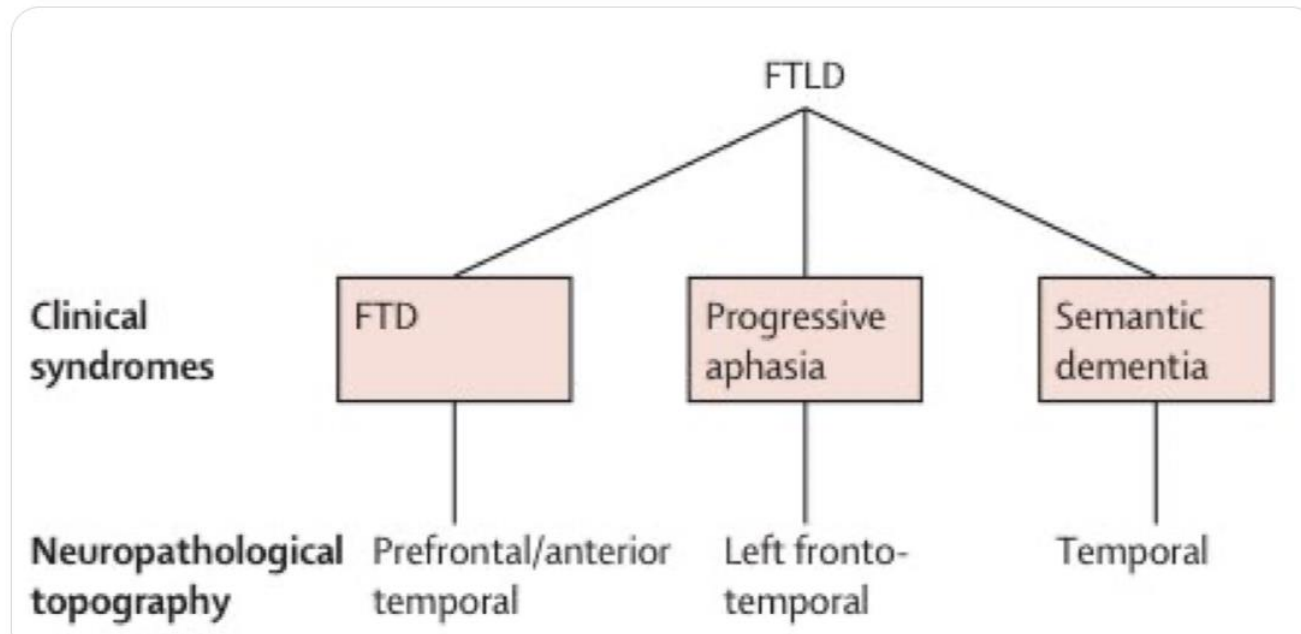


Vicente Martín @vmargar · 18/11/18



Neuroimaging of FTLD

Frontotemporal dementia or frontotemporal lobar degeneration (FTLD), is a clinical syndrome characterised by profound changes in personality and social conduct and associated with circumscribed degeneration of the prefrontal and anterior temporal cortex.





Vicente Martín @vmargar · 18/11/18

En respuesta a @vmargar

Behavioral variant

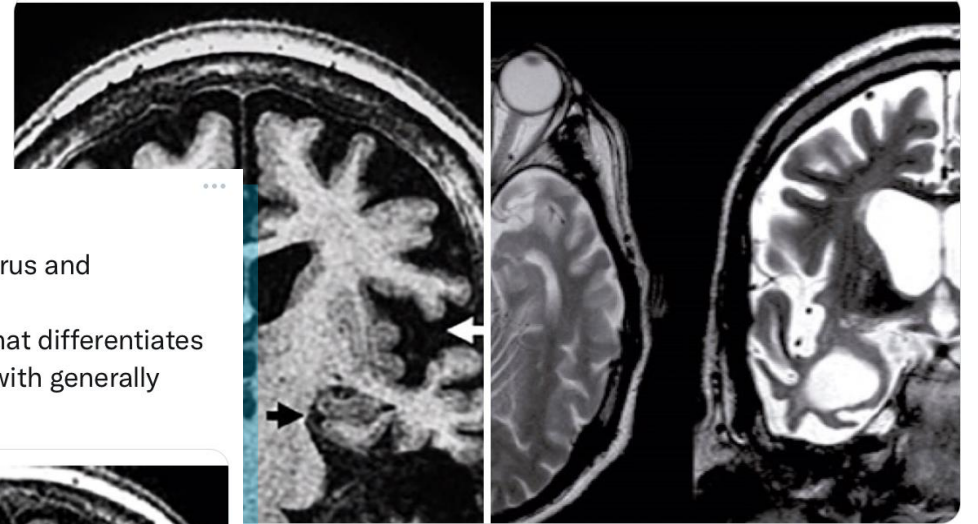
Asymmetric anteroposterior atrophy with first appearance in the orbitofrontal cortex and interhemispheric involvement of the amygdala. Bilateral frontotemporal atrophy, predominantly right.



Vicente Martín @vmargar · 18/11/18

Progressive aphasia not fluent

Frontoinsular, temporal superior and inferior parietal atrophy
Asymmetric with relative preservation of amygdala and hippocampi

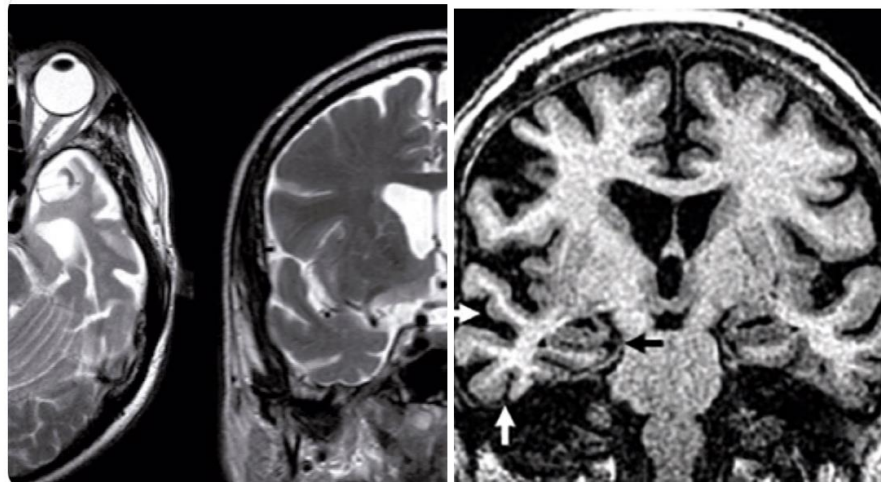


Vicente Martín @vmargar · 18/11/18

Semantic Variety

Asymmetric atrophy of the temporal pole, fusiform gyrus and amigdalohypocampal region

Presents asymmetric affection of the hippocampi that differentiates them from non-fluent aphasia and Alzheimer's type, with generally symmetric involvement



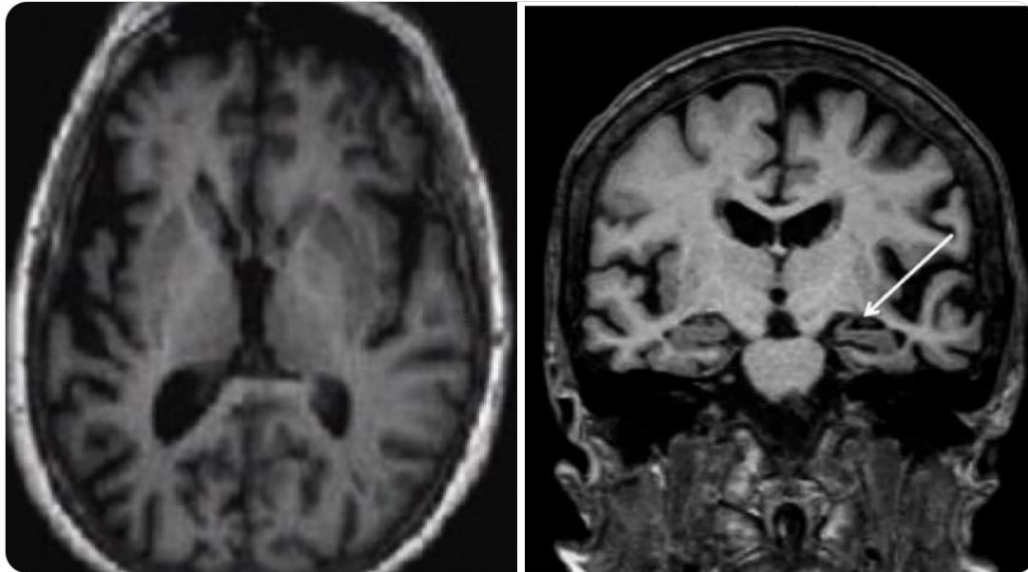


Vicente Martín @vmargar · 18/11/18

Logopenic Aphasia.

it is more related to Alzheimer's disease than to FLTD.

In the early stages its most characteristic feature is the asymmetric temporal and posterior parietal involvement.



Vicente Martín @vmargar · 18/11/18

doi:10.1016/j.nrl.2012.04.003

doi:10.1016/j.rx.2009.09.005

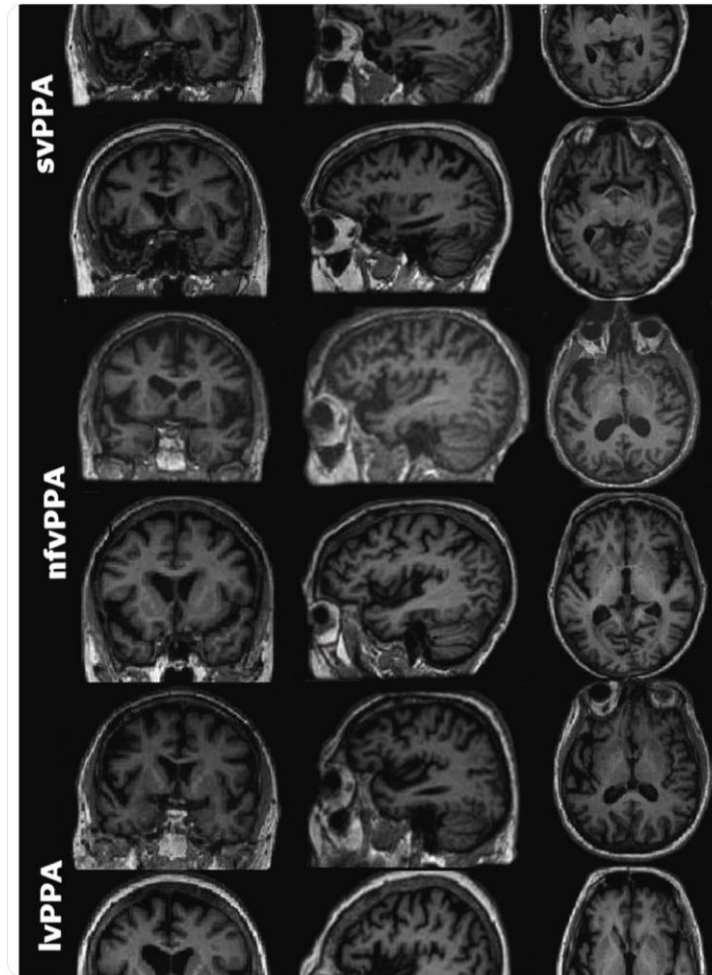
Lancet Neurol 2005; 4: 771-80

Rev colomb Radiol. 2013; 24(1): 3632-39

[dx.doi.org/10.3174/ajnr.A...](https://doi.org/10.3174/ajnr.A...)

[dx.doi.org/10.3174/ajnr.A...](https://doi.org/10.3174/ajnr.A...)

Dement Neuropsychol 2014 September;8(3):302-307



¿A QUIÉN SEGUIR? PERFILES

 **Institucionales:**

 **Nacionales**

 **Internacionales**

 **Revistas**

 **Personales**



INSTITUCIONES NACIONALES

@SERAM_RX (01/2010): 4.852 seguidores.



SERAM

@cbSERAM (03/2013): 1.867.



RADIOLOGÍA AL DÍA

Club bibliog SERAM

@residentesSERAM (04/2018): 3.524.



Residentes SERAM

Secciones (11).

Filiales (13).





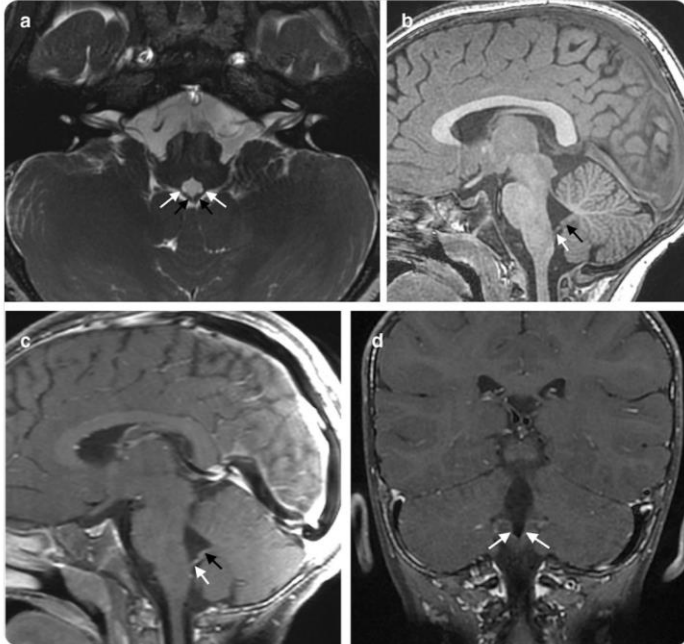
Residentes SERAM @residentesSERAM · 15/9/21

El resumen del @cbSERAM de hoy nos lo trae @JcabMRI del Hospital Nuestra Señora De La Candelaria 🇪🇸

Potenciales nuevos biomarcadores para el diagnóstico diferencial entre saco de Blake y la malformación de Dandy Walker mediante RM 😊

cbseram.com/2021/08/16/nue...

@SENr_org



Club bibliog SERAM @cbSERAM · 20/8/21

Kelly Johanna Parra nos trae esta revisión de @RadioGraphics sobre las lesiones de la calota.

Cuando ponemos la ventana de hueso en el TC craneal 🧠... ¿Sabemos que lesiones estamos viendo?

cbseram.com/2021/07/15/esp...

@SERAM_RX



SERAM @SERAM_RX

¡La #LigaSERAM arrancará en octubre! 🙌

A partir del 15 de septiembre podrás inscribirte en esta competición de casos clínicos donde podrán participar distintos equipos.

Este proyecto de la #SERAM parte de la iniciativa de @residentesSERAM.

bit.ly/3gLsMmd



Secciones (7)

@SENR_org (09/2011): 1.749.



SENR_org

@SERAUWeb (09/2015): 1.523.



SERAU

@sediabdomen (04/2016): 2.452.



SEDIA

@SERVEISoc (06/20107): 1.722.



SERVEI - Radiología Vascular Intervencionista

@MskSerme (02/2019): 2.149.



SERME

@SEDIM_RX (11/2018): 392.



SEDIM

@SEICAT_RAD (05/2019): 1.283.



SEICAT





Twitter profile card for SENR_org. The header is a solid blue bar with a back arrow on the left and a three-dot menu on the right. Below the header is a circular profile picture of the SENR logo. To the right of the profile picture are icons for notifications, messages, and a 'Siguiendo' button. The profile name is **SENR_org** with the handle @SENR_org and a 'Te sigue' tag. The bio reads: 'SENR, Sociedad Española de Neurorradiología, fundada en 1972, es una asociación de carácter médico-científico de la Neurorradiología diagnóstica y/o terapéutica'. Location is 'España', website is 'senr.org', and it was joined in 'febrero de 2011'. At the bottom, it shows '341 Siguiendo' and '1731 Seguidores'.

SENR_org
@SENR_org Te sigue

SENR, Sociedad Española de Neurorradiología, fundada en 1972, es una asociación de carácter médico-científico de la Neurorradiología diagnóstica y/o terapéutica

📍 España senr.org 📅 Se unió en febrero de 2011

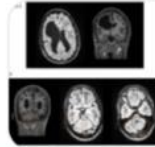
341 Siguiendo **1731** Seguidores





SENOR_org @SENOR_org · 4/6/21

Has visto alguna vez esta entidad? Caso del mes SENOR de Junio (recuerda que pronto sortearemos 2 bolsas de viaje para Reunión Anual de Toledo, enviad vuestros casos!!!!) > senr.org/index.php/caso...
[@SERAM_RX](#) [@residentesSERAM](#) [@seneurologia](#)



Caso del mes junio 2021 - SENOR: Bienvenid@ al portal de la SENOR (Sociedad Española de Neurorradio...
senr.org

Figura 1

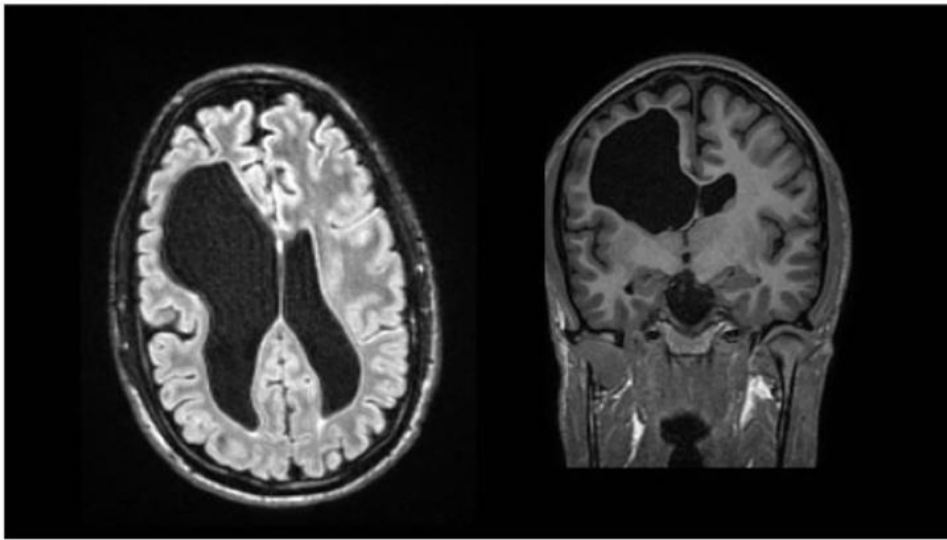
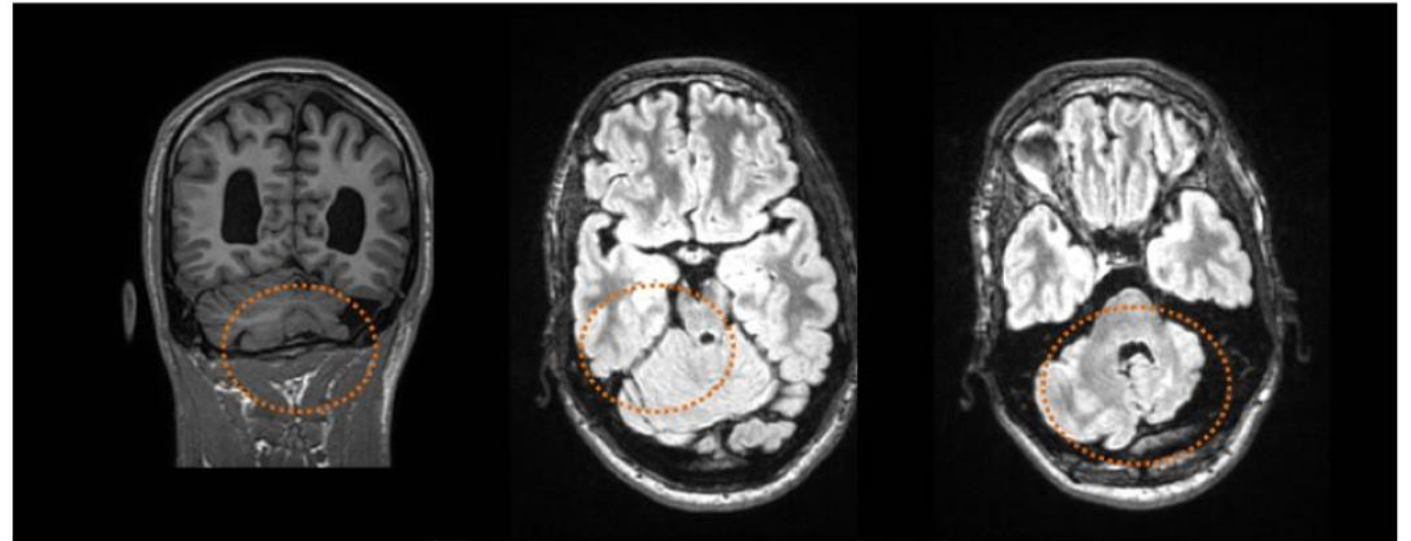


Figura 2



Filiales (5)

@SORMU_RX (01/2018): 992.



Sociedad Murciana de Radiología



Sociedad Canaria de Radiología

@canariaderadio1 (06/2018): 1.211.



radiolegscatalunya

@Radiolegs_CAT (03/2019): 133.

@SRadiologiaCV (02/2020): 854.



Sociedad Radiología CV

@SAR_Rad (01/2021): 391.



Sociedad Aragonesa de Radiología



← SOCIEDAD ARAGONESA DE RADIOLOGÍA ...



Seguir

Sociedad Aragonesa de Radiología
@SAR_Rad

Sociedad Aragonesa de Radiología (SAR), filial de la Sociedad Española de Radiología Médica (SERAM)

📍 Aragón 🔗 onlinesar.es 📅 Se unió en enero de 2021

229 Siguiendo 385 Seguidores

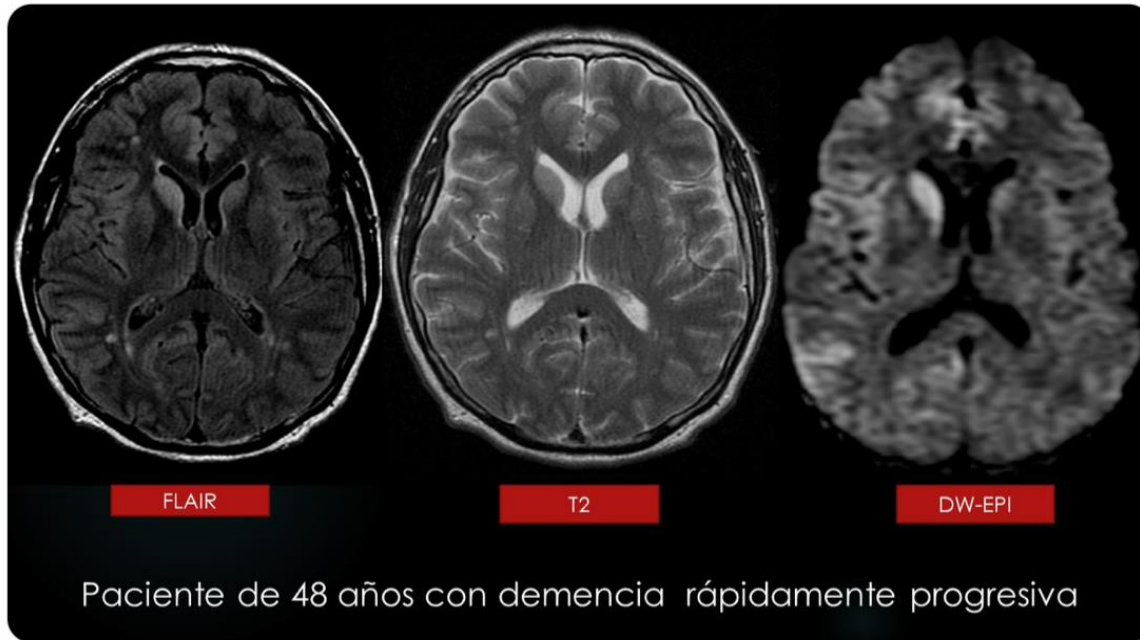




Sociedad Aragonesa de Radiología @SAR_Rad · 18/4/21

Este ha sido nuestro octavo caso

@SERAM_RX @residentesSERAM @ResidentesRayos @SENR_org
@TheASNR @SPRneuro @SRadiologiaCV @SORMU_RX
@canariaderadio1 @serammeA6SALUD @Radiolegs_CAT



Sociedad Aragonesa de Radiología @SAR_Rad · 18/4/21

¿Diagnóstico?

- A-Síndrome de Leigh
- B-Síndrome de desmielinización osmótica con alteración de señal en caudado y putamen
- C-Enfermedad de Creutzfeldt-Jacob con alteración de señal asimétrica en núcleo caudado y cortical frontotempora
- D-Linfoma, con infiltración en ganglios basales



41 votos · Resultados finales

1 2



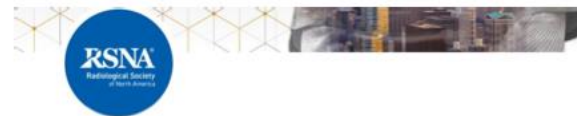
Sociedad Aragonesa de Radiología @SAR_Rad · 19/4/21

¡¡Muy bien!! 🙌🙌🙌 La respuesta correcta es la C. Más información sobre este caso en onlinesar.es/resources/caso...
Gracias por participar.



INSTITUCIONES INTERNACIONALES

@RSNA (08/2008): 54.840.



RSNA ✓

@RadiologyACR (03/2008): 48.743.



ACR Radiology

@TheASNR (04/2010): 10.581.



The American Society of Neuroradiology

@ASHNRSociety (09/2011): 6.170.



ASHNR

@ESNRad (05/2016): 3.186.



ESNR





Twitter profile header for ASHNR. The header features a blue background with a white back arrow on the left and a white three-dot menu icon on the right. Below the header is a white profile card. On the left side of the card is a circular profile picture showing a stylized human head in profile with horizontal lines. To the right of the profile picture is a black rounded rectangular button with the white text "Seguir". Below the profile picture, the name "ASHNR" is displayed in bold black text, followed by the handle "@ASHNRSociety" in a smaller black font. The bio reads "Official Twitter feed of the American Society of Head and Neck Radiology (ASHNR)". Below the bio is a blue link "Traducir la biografía". Further down is a blue link "ashnr.org" followed by a calendar icon and the text "Se unió en septiembre de 2011". At the bottom of the profile card, it shows "160 Siguiendo" and "5994 Seguidores".



ASHNR
@ASHNRSociety

Official Twitter feed of the American Society of Head and Neck Radiology (ASHNR)

[Traducir la biografía](#)

[ashnr.org](#)  Se unió en septiembre de 2011

160 Siguiendo 5994 Seguidores



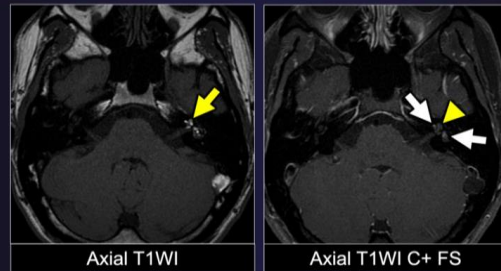


ASHNR @ASHNRSociety · 1d

#ASHNRCOTW #165 ANSWER: Intralabyrinthine Lipoma! Thx Dr. @CMGlastonbury 4 case! #ASHNR21

@DShatzkes @CDP_Rad @rhiggins @callyrobs @nakootz
@cmtomblinson @CincyPedsNeuro @ESHNRSociety @TheASNR
@phudge54 @AnnJayMD1 @amyjuliano @RadRupa @KRileyMD
@PhilipRChapman1 @gmoonis

Longstanding Left SNHL



Case courtesy of Christine Glastonbury, MBBS
University of California, San Francisco

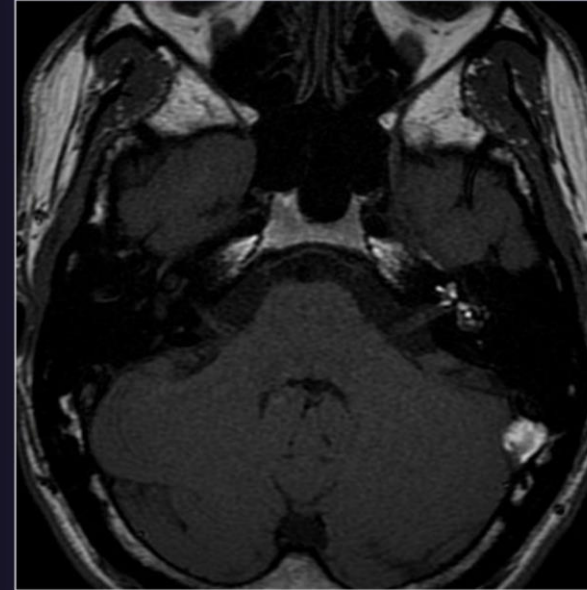
Intralabyrinthine Lipoma

- Key imaging features:
 - Intrinsic bright signal in the membranous labyrinth on T1WI (yellow arrow) with associated signal loss on fat saturated sequences (yellow arrowhead)
 - Subtle enhancement (white arrow) suggests associated inflammatory tissue
- Pearls:
 - Intrinsic bright T1 signal within the membranous labyrinth results in a DDx of blood products (e.g., trauma, anticoagulation, hematologic disorders), proteinaceous material (e.g., labyrinthitis), or lipoma
 - May be associated with CP angle lipoma
 - SNHL is typical presentation

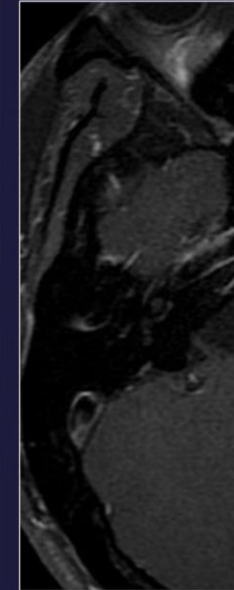


Case courtesy of Christine Glastonbury, MBBS
University of California, San Francisco

Longstanding Left



Axial T1WI



Axial

Case courtesy of Christine G
University of California, S



Radiopaedia.org 2021



Radiopaedia.org

@Radiopaedia

Free online collaborative radiology resource. Articles, cases, courses and more.

[#foamed](#) [#foamrad](#)

[radiopaedia.org](#) Se unió en abril de 2009

464 Siguiendo 68.568 Seguidores



Siguiendo

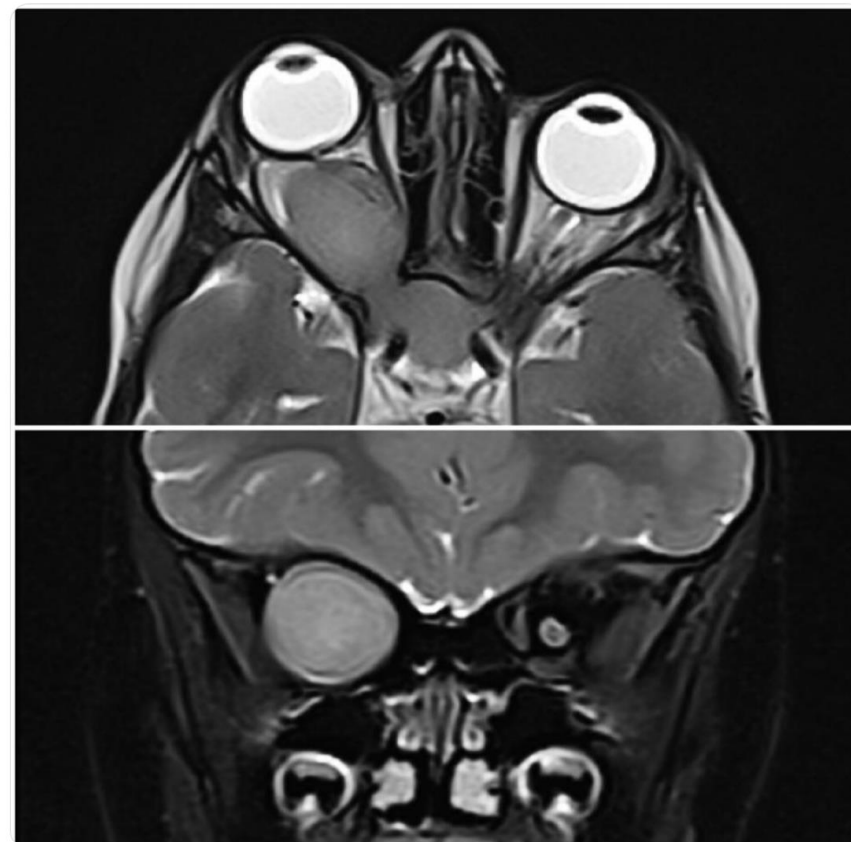


Radiopaedia.org @Radiopaedia · 27/8/21

Q: 5yo female with right eye visual loss. What's the diagnosis?

ANSWER: bit.ly/2U9gVSk

[#FOAMrad](#) [#FOAMed](#)



IMAGING OF STROKE

LEARNING PATHWAY

BY DR FRANK GAILLARD

DON'T MISS OUT

Optochiasmatic glioma

Case contributed by Dr Huda B. Gharbia

Diagnosis almost certain ●

Presentation

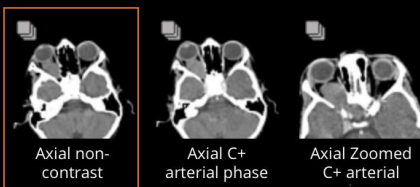
Right ptosis with loss of vision.

Patient Data

AGE: 5 years

GENDER: Female

CT



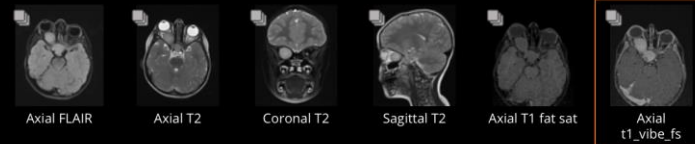
Scroll Stack



CT

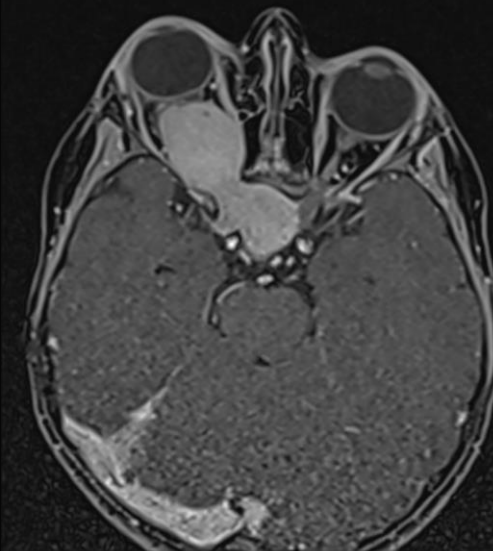
There is hypodense soft tissue mass centred on the right optic nerve in retrobulbar space, shows faint enhancement post-contrast, extend through the right optic canal to suprasellar cistern.

MRI



MRI

Scroll Stack



Axial t1_vibe_fs



REVISTAS

@Radiology_rsna (04/2009): 41.942.



@RadioGraphics (11/2010): 25.297.



@AJR_Radiology (04/2020): 3.796.



@TheASNR (04/2010): 10.581.



@ASNRographics (05/2005): 2.591.



@NRADjournal (05/2016): 1.417.



@RevistaRADIOLO2 (02/2018): 3.136.



The Journal of Diagnostic and Interventional Neuroradiology

Official Journal ASNR • ASFNR • ASHNR • ASPNR • ASSR

AJNR

AJNR
@TheAJNR

The American Journal of Neuroradiology is a peer-reviewed journal focusing on diagnostic and interventional neuroradiology. Published by [@TheASNR](#)

[Traducir la biografía](#)

Oak Brook, IL [ajnr.org](#) Se unió en enero de 2013

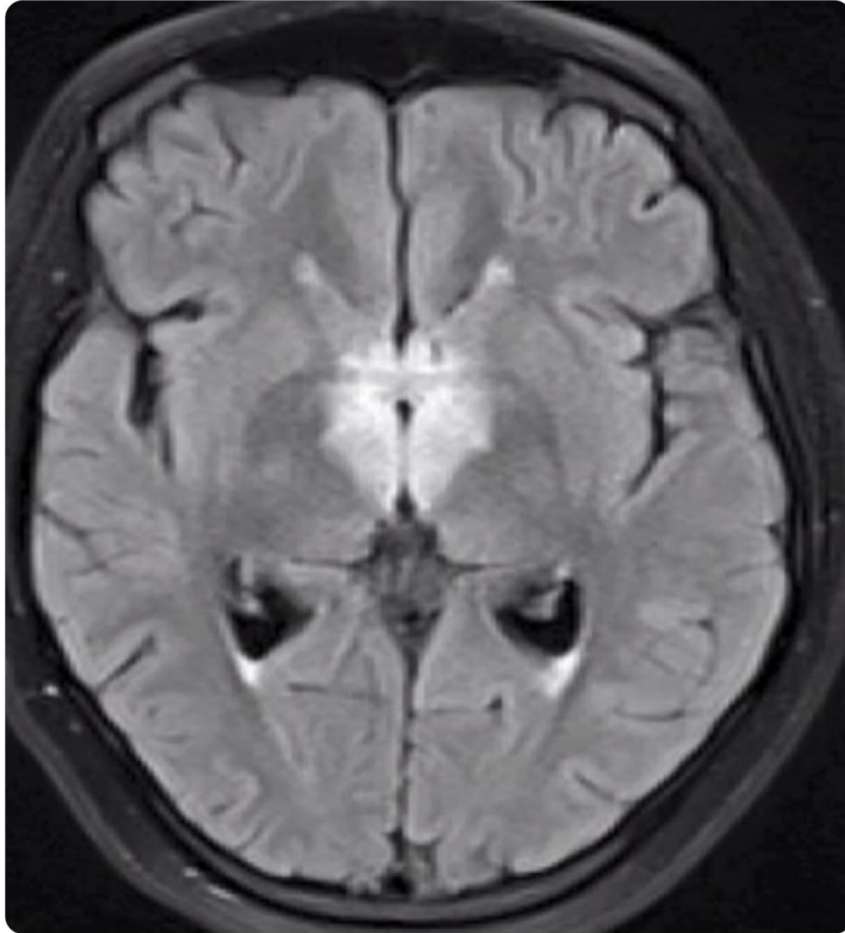
465 Siguiendo 10.807 Seguidores



AJNR

AJNR @TheAJNR · 23/7/21

#AJNRcow >> July 22, 2021 >> A 22-year-old woman with headache, decreased responsiveness, increased sleepiness for 10 days, and previous history of longitudinally extensive transverse myelitis. View the case at ow.ly/NQ0e50FCecU.



AJNR

AJNR @TheAJNR · 23/7/21

"MRI-Visible Perivascular Spaces in the Centrum Semiovale Are Associated with Brain Amyloid Deposition in Patients with Alzheimer Disease–Related Cognitive Impairment" | #NeuroRad | bit.ly/3wWBJ1b

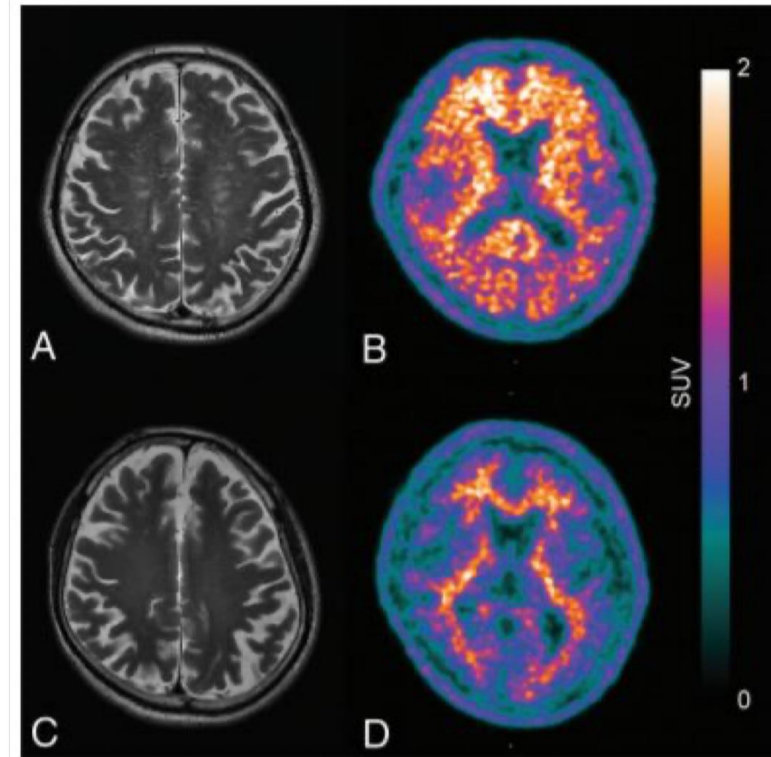
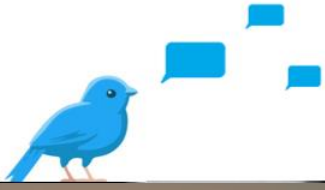


FIG 3. Examples of perivascular space patterns with the corresponding [¹⁸F] FBB PET image. The axial T2-weighted MR imaging shows a high degree of MR imaging–visible PVS-CS (A), and the corresponding [¹⁸F] FBB PET (B) shows pronounced β -amyloid deposition. Axial T2-weighted MR imaging shows a low degree of MR imaging–visible PVS-CS (C) and the [¹⁸F] FBB PET scan (D) shows low β -amyloid deposition.





PERFILES PERSONALES

María J. Díaz Candamio
@Vilavaite Te sigue

Scanning #Medicine and life with a #radiology #MSKRad #radiology Hospital Universitario. #español

A Coruña, Galicia, Spain vilavaite.wordpress

20.315 Siguiendo 22.855 Seguidores

Deborah Shatzkes
@DShatzkes Te sigue

#HNRRAD, proud past president of @ASHNRSociety, @AARP_Rad mom/wife/lousy runner, tweets my own

Asbury Park, NJ Se unió en marzo de 2015

Judy Gadde, DO, MBA
@JudyGadde Te sigue

Pediatric Neuroradiologist. Cofounder @RadiologySIG. @Harva Lurie Children's Hospital of Chicago. #MedEd #LuriePedsNeur NeuroradiologyU.com

Victor Suárez NeuroRx
@VictorSuarez_Rx Te sigue

Clinica Universidad de Navarra

Masaki Komiyama
@kanachan2020

Neurointerventionalist and husband. I like embryology and functional anatomy of cerebral vessels and HHT, and dogs and vertebrates. Tweets mine.

Osaka City General komiyama.ma/kodomo/welcome... Se unió en enero de 2020

147 Siguiendo 2041 Seguidores

Gennaro D'Anna, MD
@gennadanna Te sigue

Italian Neuroradiologist. Curiosity is the way. Husband. 2 Times #RadDad. @neurad Social Media Committee Chair. #NeuroRad #EURRad #RadKY

Ahmed Elkady, MSc
@ahkady06 Te sigue

Medicine is a science of uncertainty and an art of probability

Jeddah, Kingdom of Saudi Arabia Fecha de nacimiento 31 de diciembre Se unió en abril de 2019

57 Siguiendo 122 Seguidores

Neuroradiology bites
@NeuradBites Te sigue

Providing you with bite-sized Neurorad knowledge #radres #FOAMrad #RadEd #neurology #neurotwitter #neuroscience #FOAMed #medtwitter #MedEd #Neurosurgery

Se unió en agosto de 2021

980 Siguiendo 1627 Seguidores

Tan-Lucien Mohammed, MD, FACR
@TLHM_MD Te sigue

Chief, Radiology & Director, #PediNeuroRad Fellowship, @CincyKidsRad | @WestPoint_USMA & @PCOMEducation alum | @USAirForce retired | 🇺🇸🇨🇦🇨🇪

Cincinnati, OH Fecha de nacimiento 7 de diciembre Se unió en noviembre de 2017

1481 Siguiendo 4253 Seguidores

Tabby A. Kennedy, MD
@tabby_kennedy

Neuro + Head & Neck Radiologist | Wisconsin/MIR/PENN/Pomona/BJS | tweets my own learning@headandneck.com Se unió en noviembre de 2017

Antonio López-Rueda
@AntonioLR81 Te sigue

Beatriz Brea Álvarez
@beabrea Te sigue

Ryan Peterson
@RyanBPetersonMD Te sigue

#NeuroRad @ Emory. Former #ERRad, Assoc PD- #radres & #TY.#FOAMed #FOAMrad. #Dad. Classy on the inside, scrubs on the outside. 🇸🇪 #Swedish things #EmoryRadCOTD

Atlanta, GA Se unió en julio de 2016

997 Siguiendo 7295 Seguidores

Philip R. Chapman, MD
@PhilipRChapman1 Te sigue

Neuroradiologist | Neuroradiology education | Sharing the interesting neuro case where the images tell the story |

Durham, NC Se unió en mayo de 2019

522 Siguiendo 3203 Seguidores

Aaron Rutman, MD
@aarorutman Te sigue

Neuroradiologist, @kpwashington, @UWIRadiology clinical assistant professor, UW SOM #neuroanatomy instructor; photography, guitar, baseball, dad of 3

Seattle, WA Se unió en junio de 2014

342 Siguiendo 1864 Seguidores

Lorenzo Pinelli
@LorenzoPinelli Te sigue

adult and pediatric neuroradiologist, opinions are my own (whose else could it be?)

Italia Fecha de nacimiento 1 de octubre de 1965 Se unió en enero de 2013

512 Siguiendo 1327 Seguidores

Wende Gibbs
@WendeGibbs Te sigue

Neuroradiologist, Alum: @BarrowNeuro @GeorgetownSFS #Spine #Oncology #Standardization and reporting #AI/#ML Quality and value

Se unió en mayo de 2016

3284 Siguiendo 6480 Seguidores

Mohit Agarwal
@MohitAgarwal Te sigue

Director Neuroradiology Fellowship Program MCW Milwaukee lifelong learner and educator @MCWNeuroRad #SACNeuroRad #TheCortexClub #posterhead

Milwaukee United States Fecha de nacimiento 2 de octubre Se unió en abril de 2017

753 Siguiendo 2031 Seguidores



Siguiendo

María J. Díaz Candamio

@Vilavaite Te sigue

Scanning [#Medicine](#) and life with a [#radiologist](#) gaze Mostly RTs [#RadXX](#)
[#MSKRad](#) [#radiology](#) Hospital Universitario A#Coruña Spain [@Perbess](#) en
[#español](#)

📍 A Coruña, Galicia, Spain [🔗 vilavaite.wordpress.com](#) 📅 Se unió en marzo de 2010

20.315 Siguiendo **22.855** Seguidores





María J. Díaz Candamio
@Vilavaite

Don't miss the latest @Radiographics issue !!

Free for just a few hours !? 😊

https://t.co/OHcdp3rutJ

Beautiful cover:

Prostatic artery embolization of the

@cookyscan1

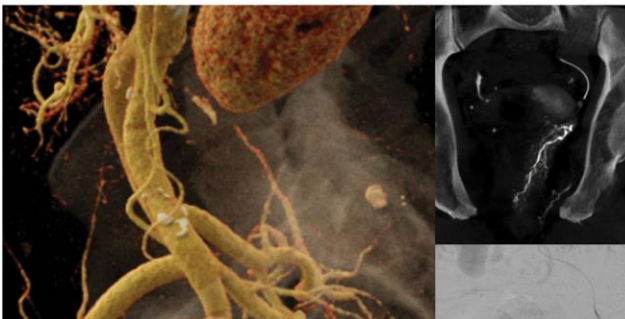
#Radiology #RadCME #RadRes

#FOAMRad #RadEd #Radiología

Traducir Tweet

RadioGraphics

September-October 2021 • Volume 41 Number 5 • radiographics.rsna.org

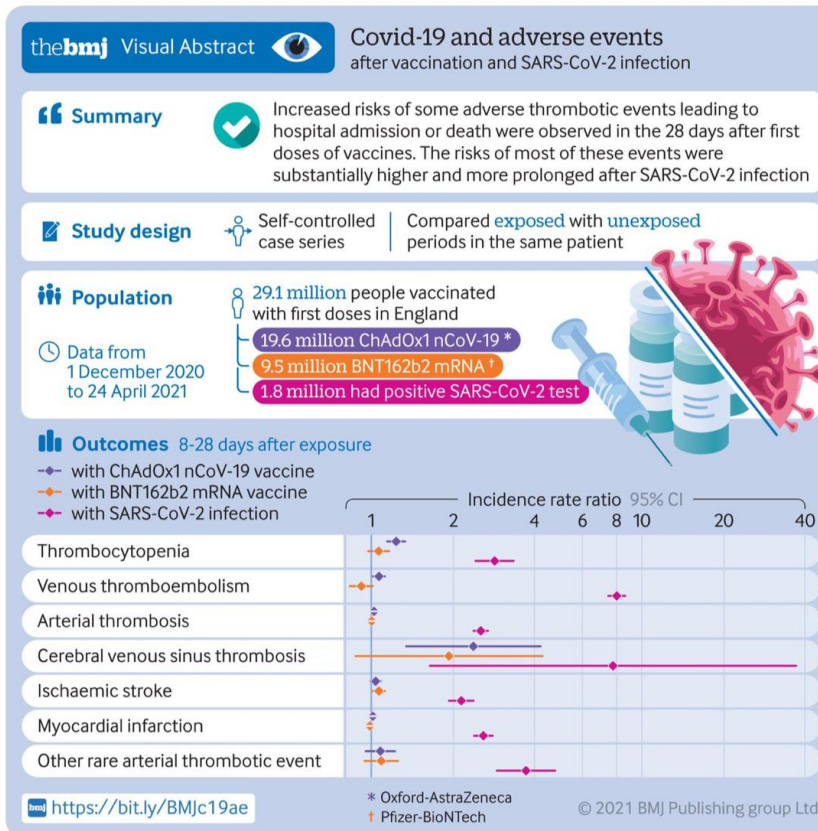


María J. Díaz Candamio @Vilavaite · 27/8/21

Increased risks of haematological and vascular events that led to hospital admission or death observed for short time intervals after first doses of AstraZeneca and Pfizer vaccines

Risks were higher and more prolonged after COVID19 than after vaccination

bmj.com/content/374/bm...





Siguiendo

Tan-Lucien Mohammed, MD, FACR

@TLHM_MD Te sigue

Chest Radiologist by day // Chest radiologist by night, too // Equanimity under duress // My tweets are my own // RTs, ❤️s, follows ≠ support

[Traducir la biografía](#)

📍 United States [🔗 tlmrads.com](https://t.me/tlhmrad) 📅 Se unió en febrero de 2018

463 Siguiendo **4431** Seguidores



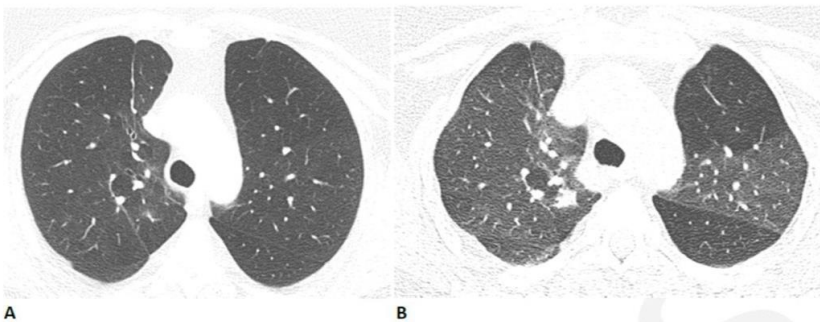


Tan-Lucien Mohammed, MD, FACR @TLHM_MD · 11min

#RT - long-term chest imaging abnormalities in patients who have recovered from acute #COVID19 infection 🦠 From @RSNA #radiology #chestrad @edonnelymdphd @LucyModahlMD @hochhegger @RituGill2014 @ShravSridhar @LeahMuhmLin @farouk_dako @BrixeyAnu @AshleyEProsper @cfmunozn

RSNA @RSNA · 14h

A subset of people recovering from #COVID19 will have persistent chest imaging abnormalities. This study, published in @radiology_rsna, reviews the long-term chest imaging abnormalities in patients who have recovered from acute infection. bit.ly/3s5jKos #ChestRad



Radiology



Tan-Lucien Mohammed, MD, FACR @TLHM_MD · 14h

Terrific Tenerife, #Spain 🇪🇸

Vacations @vacationhotels · 2d

Tenerife, Spain





Tan-Lucien Mohammed, MD, FACR
@TLHM_MD

Augment your [#neurorad](#) knowledge when you follow these amazing educators:

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[@JudyGadde](#)

[@EMiddlebrooksMD](#)

[@vmargar](#)

[@tabby_kennedy](#)

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[@MohitAgNeurorad](#)

[@PhilipRChapman1](#)

[@mossabas](#)



Siguiendo

Ryan Peterson 🇸🇪

@RyanBPetersonMD Te sigue

#Neurorad @ Emory. Former #ERrad. Assoc PD- #radres & #TY.#FOAMed #FOAMrad. #Dad. Classy on the inside, scrubs on the outside. 🥰 #Swedish things #EmoryRadCOTD

[Traducir la biografía](#)

📍 Atlanta, GA 📅 Se unió en julio de 2016

997 Siguiendo 7295 Seguidores

Tweets

Tweets y respuestas

Multimedia

Me gusta



Ryan Peterson 🇸🇪 @RyanBPetersonMD · 17/8/21

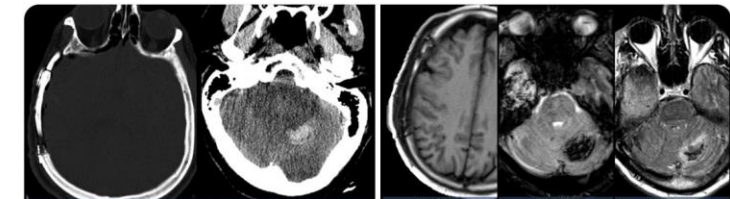
Emory Radiology COTD #180

Hx: Prior GBM now post op scan following right frontal craniotomy for resection

NO SPOILERS!!! Give answers with GIFs ONLY or submit to bit.ly/EmoryCOTD

Answer in 24 hrs

#Neuro #Neurorad #Neurosurg #FOAMed #FOAMrad #radres #EmoryRadCOTD



Submit Answers to questions at:
bit.ly/EmoryCOTD

1. What is the most likely diagnosis?
2. What is the mechanism of this abnormality?

Please **DO NOT** post ANSWERS or SPOILERS

Reply **ONLY** with professionally appropriate comments and/or GIFs

- Medical education should be fun & interactive
- Yet requires professionalism and respect for patients and their families at all times

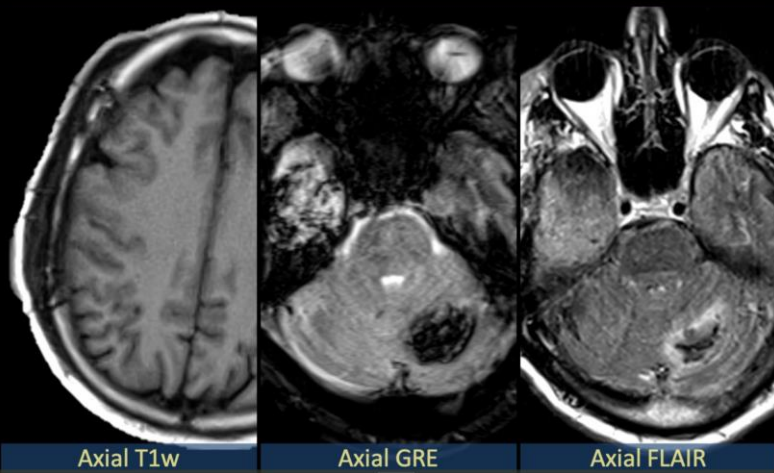


Case 180 Questions

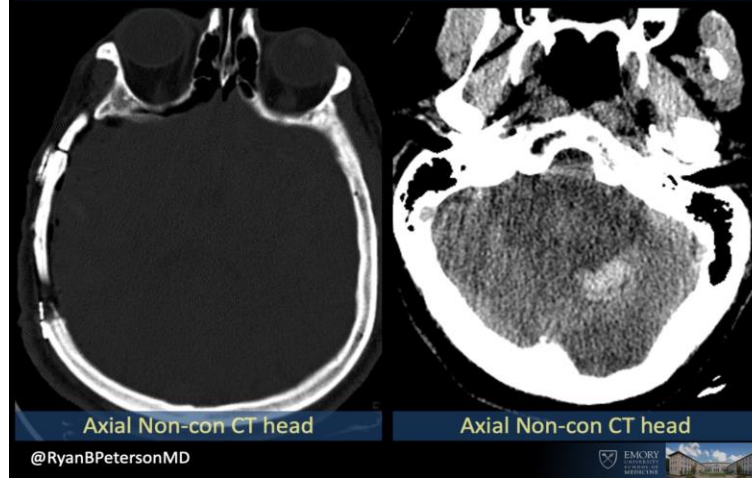
Submit Answers to questions at:
bit.ly/EmoryCOTD

1. What is the most likely diagnosis?
2. What is the mechanism of this abnormality?
3. What are potential proposed risk factors for developing this abnormality?

Case 180: Post-op resection for recurrent GBM



Case 180: Post-op resection for recurrent GBM





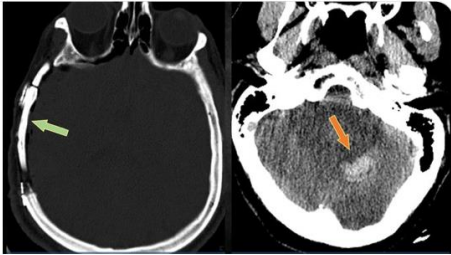
Ryan Peterson 🇺🇸 @RyanBPetersonMD · 18/8/21

Answer: Remote Cerebellar Hemorrhage

Cerebellar hemorrhage (intraparenchymal or subarachnoid hemorrhage... the ZEBRA sign) due to pressure changes from supratentorial craniotomy. Can be ipsilateral or contralateral. Has benign course but unclear mechanism #EmoryRadCOTD

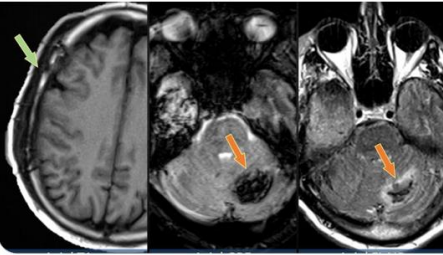
Submit Answers to questions at:
bit.ly/EmoryCOTD

1. What is the most likely diagnosis?
Remote Cerebellar Hemorrhage
2. What is the mechanism of this abnormality?
Many proposal but no definite mechanism (see info slide)
3. What are potential proposed risk factors for developing this abnormality?
Male sex, perioperative hypertension, anticoagulation (esp Aspirin)



This case

- Right frontoparietal craniotomy with overlying subgaleal drain
- Intraparenchymal hemorrhage in left cerebellum with edema



Remote Cerebellar Hemorrhage

- Rare (0.4-0.8%) complication from supratentorial craniotomy
- Self limiting and benign course (might need f/u CT)
- Can be contralateral or ipsilateral
- Proposed mechanism is unknown

1. Opening ventricle or cistern with patient in supine position → CSF hypoattenuation → transient occlusion of bridging cerebellar veins → hemorrhagic infarction
2. Oversuction → downward displacement of cerebellum → tearing of the superior cerebellar veins

- Debatable risk factors (see answer slide)

Case 180 Answers

Submit Answers to questions at:
bit.ly/EmoryCOTD

1. What is the most likely diagnosis?
Remote Cerebellar Hemorrhage
2. What is the mechanism of this abnormality?
Many proposal but no definite mechanism (see info slide)
3. What are potential proposed risk factors for developing this abnormality?
Male sex, perioperative hypertension, anticoagulation (esp Aspirin)

Case 180: Remote Cerebellar Hemorrhage

This Case

- Right frontoparietal craniotomy with overlying subgaleal drain
- Intraparenchymal hemorrhage in left cerebellum with edema

Remote Cerebellar Hemorrhage

- Rare (0.4-0.8%) complication from supratentorial craniotomy
- Self limiting and benign course (might need f/u CT)
- Can be contralateral or ipsilateral
- Proposed mechanism is unknown

1. Opening ventricle or cistern with patient in supine position → CSF hypoattenuation → transient occlusion of bridging cerebellar veins → hemorrhagic infarction
 2. Oversuction → downward displacement of cerebellum → tearing of the superior cerebellar veins
- Debatable risk factors (see answer slide)
 - Don't confuse this for more ominous pathology

Reference: Amini et al. AJNR. 2005





Siguiendo

Judy Gadde, DO, MBA

@JudyGadde Te sigue

Pediatric Neuroradiologist. Cofounder [@RadiologySIG](#). [@HarvardMacy](#) scholar.
Lurie Children's Hospital of Chicago. [#MedEd](#) [#LuriePedsNeuro](#)
[NeuroradiologyU.com](#)

📍 Chicago, IL [luriechildrens.org/en/doctors/gad...](#) 🗓 Fecha de nacimiento 20 de julio

📅 Se unió en abril de 2017

2207 Siguiendo **6781** Seguidores





Judy Gadde, DO, MBA @JudyGadde · 3d

Lurie Peds Neuro Case #45


History: Teenage female with gradual global headache, acute onset nausea & dizziness

*Only reply with GIFs. NO answers or spoilers.

#LuriePedsNeuro #FOAMrad #FOAMed #MedEd #NeuroRad
#PediNeuroRad @LurieNeuroRads

Case 45: Teenage female with gradual global headache, acute onset nausea & dizziness

Case 45: Questions



Axial noncontrast CT

the findings?

the next best imaging step?

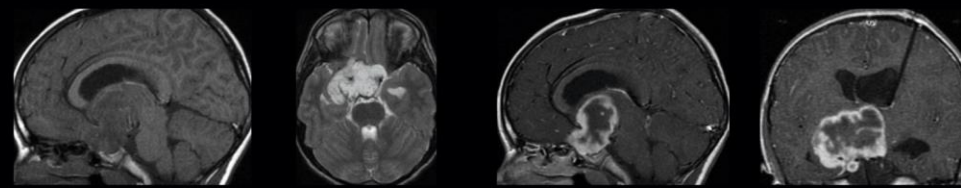
ould be considered in the differential dia

**These and do n

**These and do n

Ann & Robert H. Lurie Children's Hospital of Chicago

Case 43: Young male child with double vision & vomiting



Sag T1 Ax T2 Sag T1 post Cor T1 post

@JudyGadde @LurieNeuroRads

**These activities represent an individual and do not represent Lurie Children's.

Judy Gadde, DO, MBA @JudyGadde · 18/8/21

En respuesta a @JudyGadde

What is the most likely diagnosis?

Craniopharyngioma	80 %
Astrocytoma	14 %
Rathke cleft cyst	3 %
Diabetes insipidus	3 %





Judy Gadde, DO, MBA @JudyGadde · 20/8/21

En respuesta a @JudyGadde

ANSWER: Suprasellar astrocytoma/hypothalamic glioma

Often stable or slowly growing, especially if associated with NF1.
Usually T2 hyperintense and enhances.

#LuriePedsNeuro #COTW #radres #futureradres #radiology
#radtwitter #neurotwitter #FOAMrad #FOAMed

<p>Ann & Robert H. Lurie Children's Hospital of Chicago</p> <p>Case 43: Young male child with double vision & vomiting</p> <p>Sag T1 Ax T2 Sag T1 post Cor T1 post</p> <p>@JudyGadde @LurieNeuroRads **These activities represent an individual and do not represent Lurie Children's.</p>	<p>Ann & Robert H. Lurie Children's Hospital of Chicago</p> <p>Case 43: Young male child with double vision & vomiting</p> <p>GRE</p> <p>@JudyGadde @LurieNeuroRads **These activities represent an individual and do not represent Lurie Children's.</p>
<p>Ann & Robert H. Lurie Children's Hospital of Chicago</p> <p>Case 43: Answers</p> <ol style="list-style-type: none"> 1. What is the most likely diagnosis? Suprasellar astrocytoma (or hypothalamic glioma) 2. What is the most common suprasellar mass in children? Craniopharyngioma 3. What patient group is predisposed to this diagnosis? NF1 <p>@JudyGadde @LurieNeuroRads **These activities represent an individual and do not represent Lurie Children's.</p>	<p>Ann & Robert H. Lurie Children's Hospital of Chicago</p> <p>Suprasellar Astrocytoma</p> <ul style="list-style-type: none"> • 2nd most common suprasellar mass in childhood • Majority are pilocytic (WHO I) with minority of pilomyxoid (WHO II – this case, usually younger patients and may hemorrhage) • Imaging: Usually solid, intermediate to low T1, T2 hyper, may be cystic, >90% enhance to variable degree • Treatment: Often no treatment unless vision loss (debulking) or progressive disease (radiation & chemo). Usually stable or slowly progressive if associated with NF1. <p>@JudyGadde @LurieNeuroRads **These activities represent an individual and do not represent Lurie Children's.</p>

Ann & Robert H. Lurie Children's Hospital of Chicago

Case 43: Answers

1. What is the most likely diagnosis?
Suprasellar astrocytoma (or hypothalamic glioma)
2. What is the most common suprasellar mass in children?
Craniopharyngioma
3. What patient group is predisposed to this diagnosis?
NF1

@JudyGadde @LurieNeuroRads **These activities represent an individual and do not represent Lurie Children's.

Ann & Robert H. Lurie Children's Hospital of Chicago

Suprasellar Astrocytoma

- 2nd most common suprasellar mass in childhood
- Majority are pilocytic (WHO I) with minority of pilomyxoid (WHO II – this case, usually younger patients and may hemorrhage)
- Imaging: Usually solid, intermediate to low T1, T2 hyper, may be cystic, >90% enhance to variable degree
- Treatment: Often no treatment unless vision loss (debulking) or progressive disease (radiation & chemo). Usually stable or slowly progressive if associated with NF1.

@JudyGadde @LurieNeuroRads **These activities represent an individual and do not represent Lurie Children's.





Siguiendo

Aaron Rutman, MD

@aaronrutman Te sigue

Neuroradiologist, [@kpwashington](#), [@UWRadiology](#) clinical assistant professor, UW SOM [#neuroanatomy](#) instructor; photography, guitar, baseball, dad of 3 [#neurorad](#)

📍 Seattle, WA [aaronrutmanphotography.com](#) 📅 Se unió en junio de 2014

342 Siguiendo **1866** Seguidores





Aaron Rutman, MD
@aaronrutman

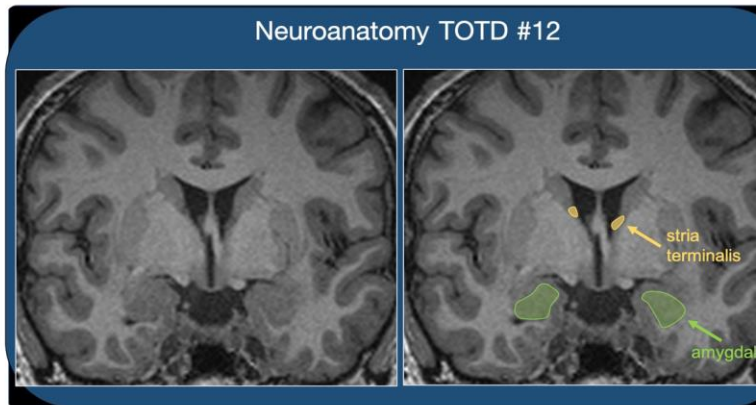
Neuroanatomy TOTD #12

The green structure is the amygdala (amygdaloid body) and the yellow structure is the stria terminalis (ST).

1/18

#meded #FOAMed #FOAMrad #medtwitter #medstudent #radiology #neurorad #radres #neurology #neurosurgery #neuroanatomy #neuroanatomyTOTD

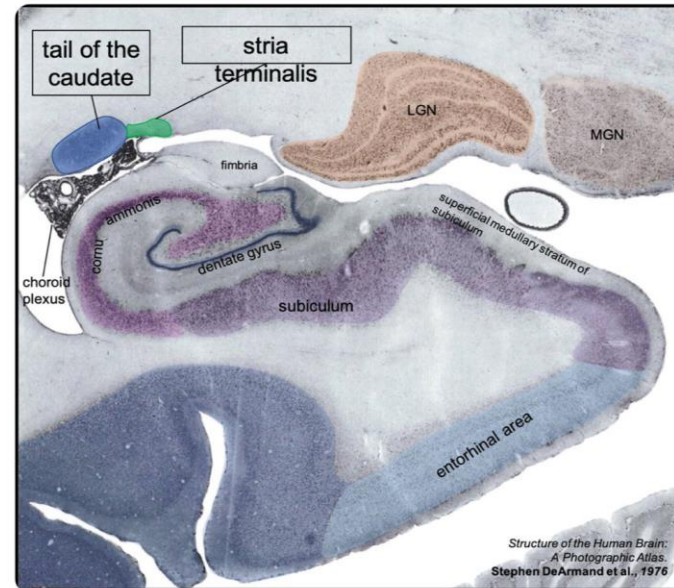
Traducir Tweet



Aaron Rutman, MD @aaronrutman · 2/12/20

ST emanates from the amygdala adjacent to the hippocampal fimbria and extends posteriorly along the roof of the temporal horn medial to the caudate tail. The proximal ST is not well seen on imaging--not distinguished from the fimbria, caudate tail, and choroid plexus.

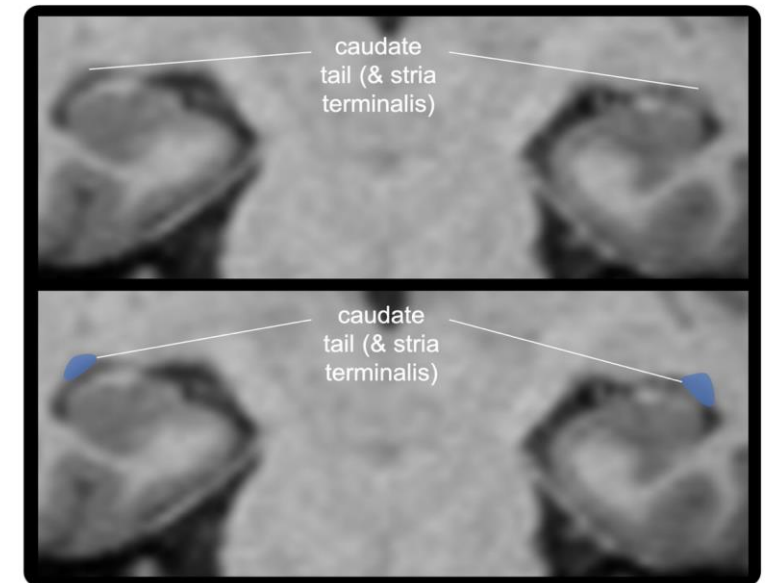
5/18

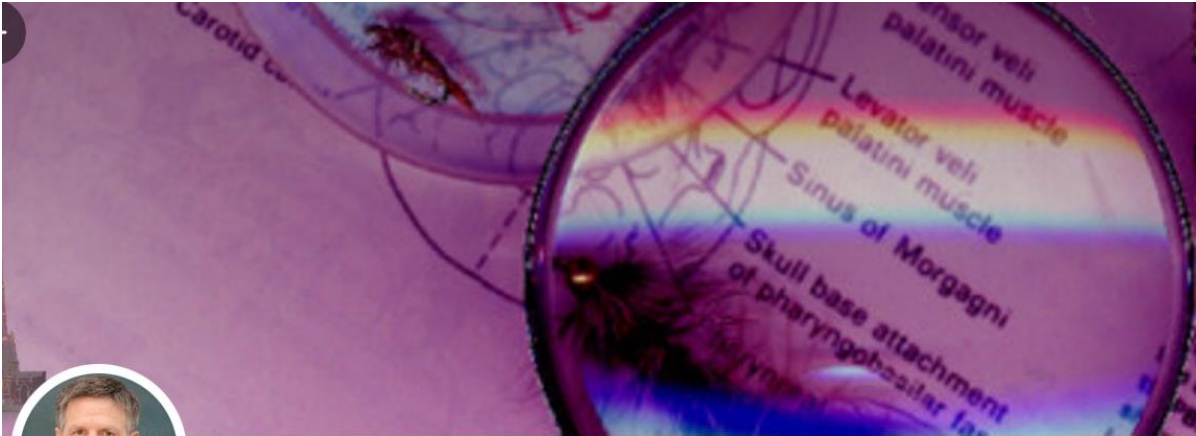


Aaron Rutman, MD @aaronrutman · 2/12/20

Have seen residents mistake this periventricular gray matter for abnormal GM heterotopia when prominent. Nope--this is normal caudate tail/ST along roof of the temp horn of lat ventricle--variable in size across patients, some subtle (like this image), some more prominent.

6/18





Philip R. Chapman, MD

@PhilipRChapman1 Te sigue

Neuroradiologist | Neuroradiology education | Sharing the interesting neuro where the images tell the story |

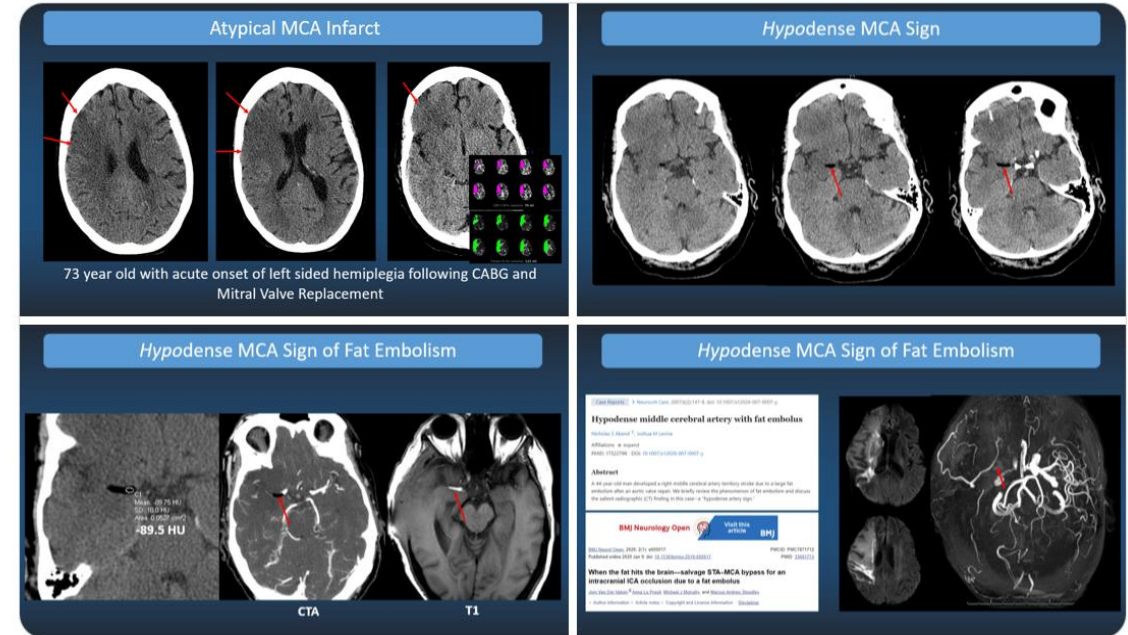
📍 Durham, NC 📅 Se unió en mayo de 2019

522 Siguiendo 3203 Seguidores

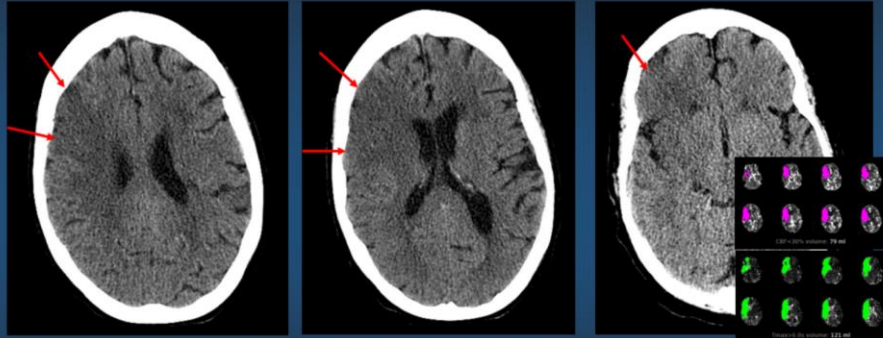


Philip R. Chapman, MD @PhilipRChapman1 · 26/8/21

Fat embolism syndrome of brain usually refers to extensive embolism of microscopic fat to the brain after trauma or surgery resulting in numerous tiny infarcts with microhemorrhage. But embolization of macroscopic fat can take on a different appearance.

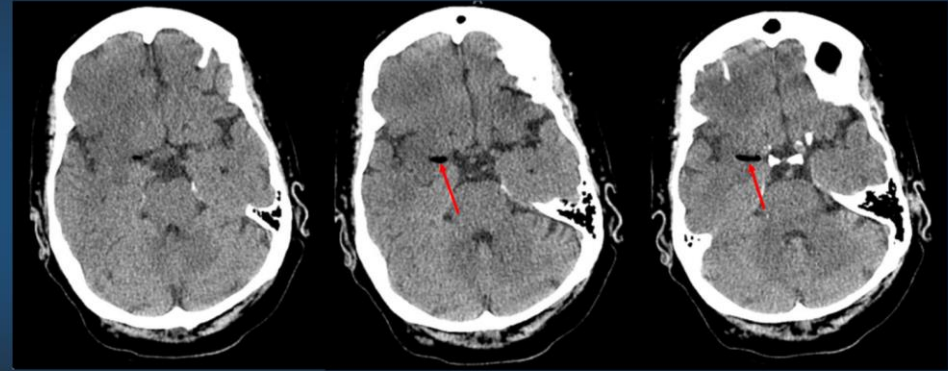


Atypical MCA Infarct



73 year old with acute onset of left sided hemiplegia following CABG and Mitral Valve Replacement

Hypodense MCA Sign



Hypodense MCA Sign of Fat Embolism

Case Reports | Neurocrit Care. 2007;6(2):147-8. doi: 10.1007/s12028-007-0007-y.

Hypodense middle cerebral artery with fat embolus

Nicholas S Abend¹, Joshua M Levine

Affiliations: expand
PMID: 17522799 DOI: 10.1007/s12028-007-0007-y

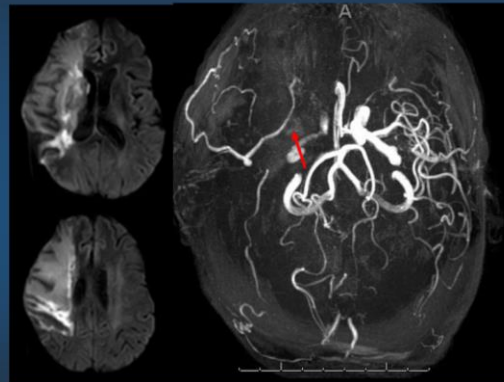
Abstract
A 44-year-old man developed a right middle cerebral artery territory stroke due to a large fat embolism after an aortic valve repair. We briefly review the phenomenon of fat embolism and discuss the salient radiographic (CT) finding in this case—a “hypodense artery sign.”

BMJ Neurology Open. 2020; 2(1): e000017.
Published online 2020 Jan 9. doi: 10.1136/bmjne-2019-000017

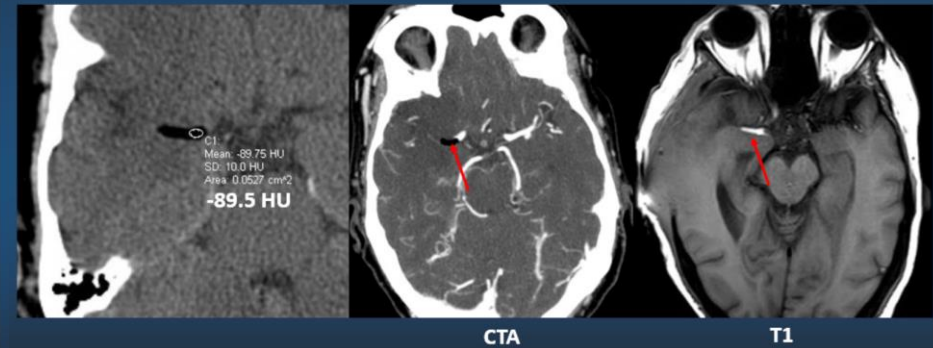
PMCID: PMC7071712
PMID: 33681773

When the fat hits the brain—salvage STA–MCA bypass for an intracranial ICA occlusion due to a fat embolus
Jan Van Der Veken¹, Anne La Prose², Michael J Mulcahy³, and Marcus Andrew Stoodley⁴

Author information • Article notes • Copyright and License information • Disclaimer



Hypodense MCA Sign of Fat Embolism





Siguiendo

Tabby A. Kennedy, MD

@tabby_kennedy

Neuro + Head & Neck Radiologist | Wisconsin/MIR/PENN/Pomona/JBS | tweets
my own learningheadandneck.com

learningneuroradiology.com  Se unió en noviembre de 2017

466 Siguiendo 3335 Seguidores





Tabby A. Kennedy, MD @tabby_kennedy · 4/8/21

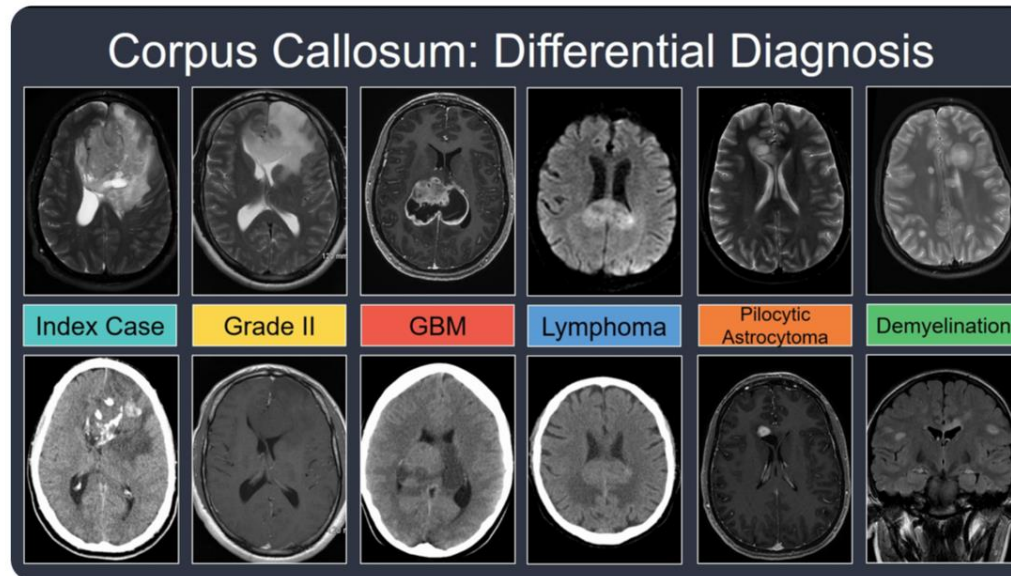
...

DDx for Lesions in the Corpus Callosum: Includes the spectrum of glial neoplasms, lymphoma, demyelinating disease & toxic/metabolic conditions.

Want to learn about distinguishing imaging features?

Register for a great conference next week @TheASNR #CNC21 for more!

#Meded





Wende Gibbs

@WendeNGibbs Te sigue

Neuroradiologist, Alum: @BarrowNeuro @GeorgetownSFS #Spine #Oncology #Standardization and reporting #AI/#ML Quality and value

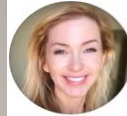
[linkedin.com/in/wende-gibbs...](https://www.linkedin.com/in/wende-gibbs...) Fecha de nacimiento 1 de enero de 1980

Se unió en mayo de 2016

3284 Siguiendo 6480 Seguidores

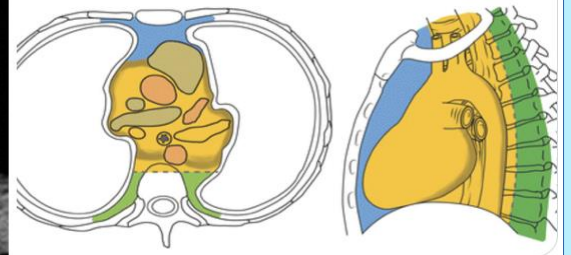
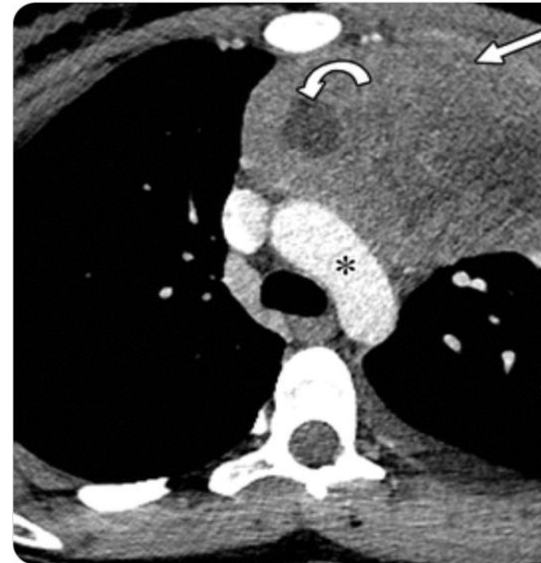


Siguiendo



Wende Gibbs @WendeNGibbs · 2d

Do you know how to approach a mass like this one? Great podcast describing an approach to mediastinal masses @RadioGraphics : rsnaradiographics.libsyn.com/issue-summary-... #radres #foamed #FOAMrad

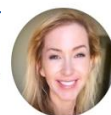
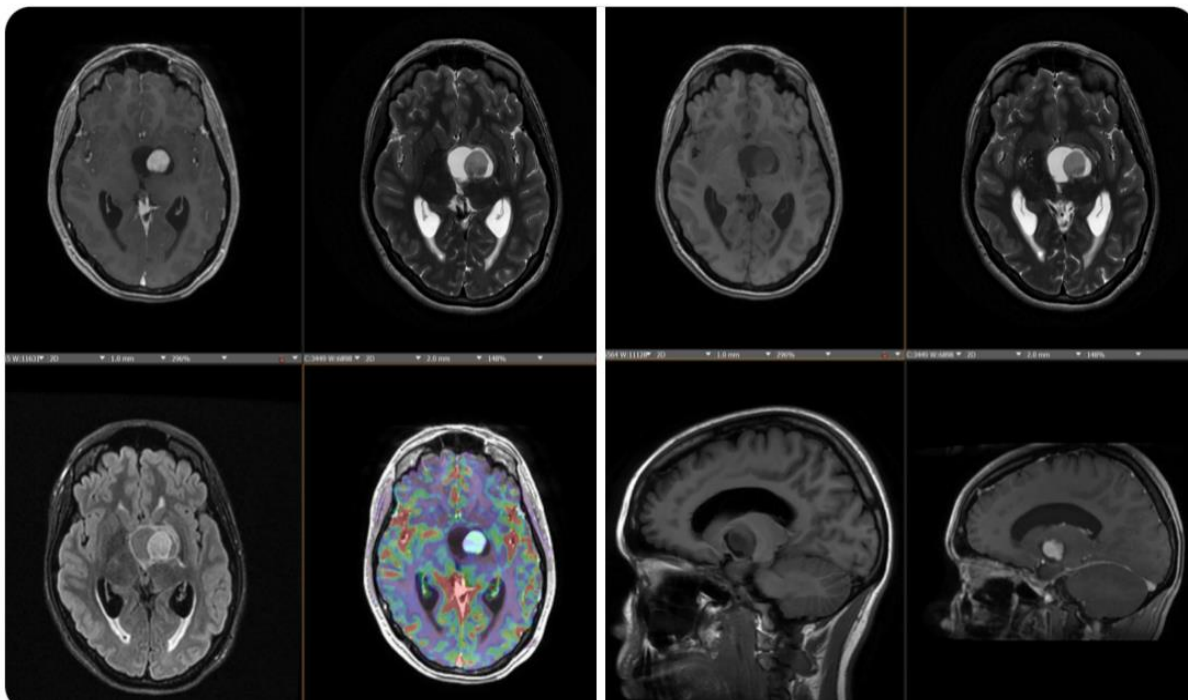




Wende Gibbs @WendeNGibbs · 3d

18 year old- not too many things this could be. What do you think?

[#radres](#) [#neurorad](#) [#neurosurgery](#)



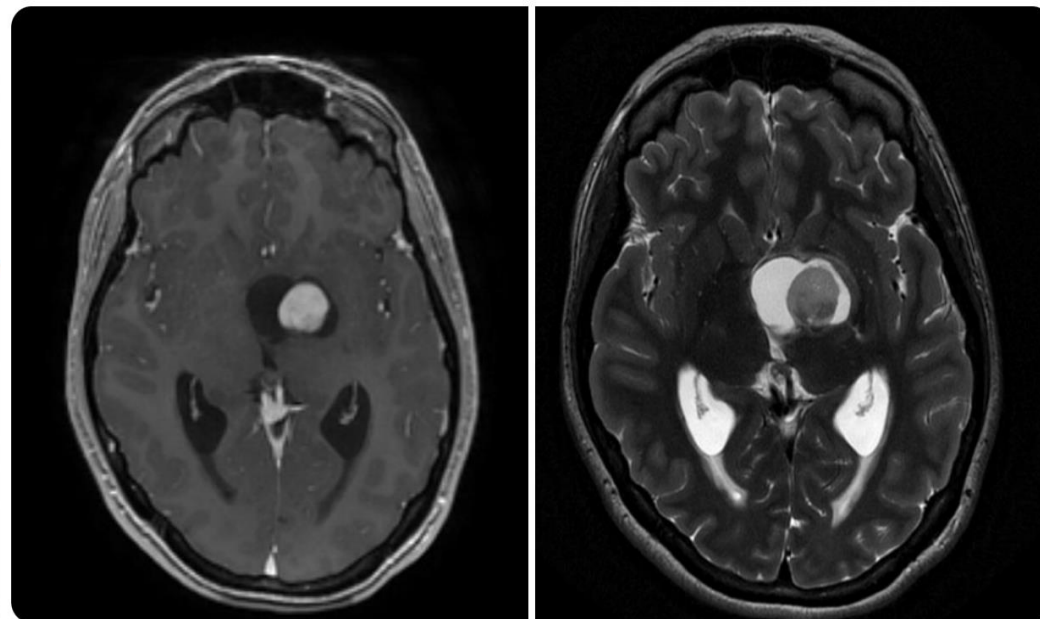
Wende Gibbs

@WendeNGibbs

A third ventricle?? 🤔

[#neurorad](#) [#neurosurgery](#)

[Traducir Tweet](#)





Mohit Agarwal

@MohitAgNeurorad Te sigue

Director Neuroradiology Fellowship Program MCW Milwaukee lifelong learner and educator @MCWNeurorad #MCWNeuroradBTW #TheCortexClub #potterhead

Milwaukee United States Fecha de nacimiento 2 de octubre

Se unió en abril de 2017

753 Siguiendo 2031 Seguidores

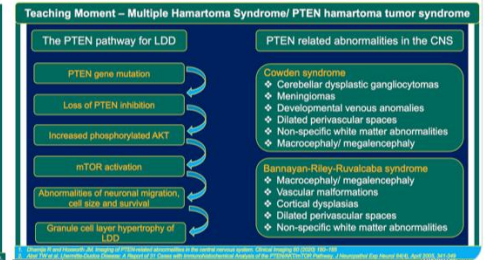
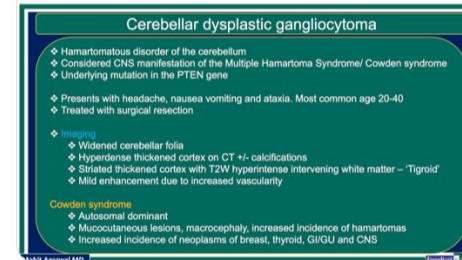
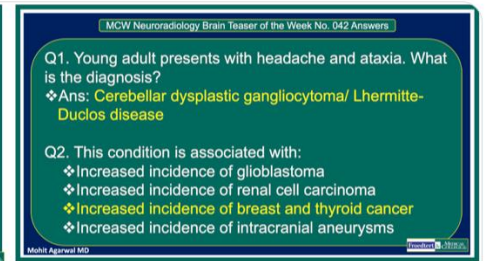
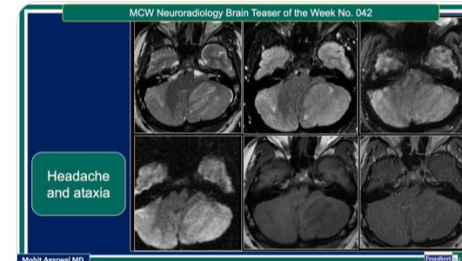
Notification, Message, and 'Siguiendo' buttons.



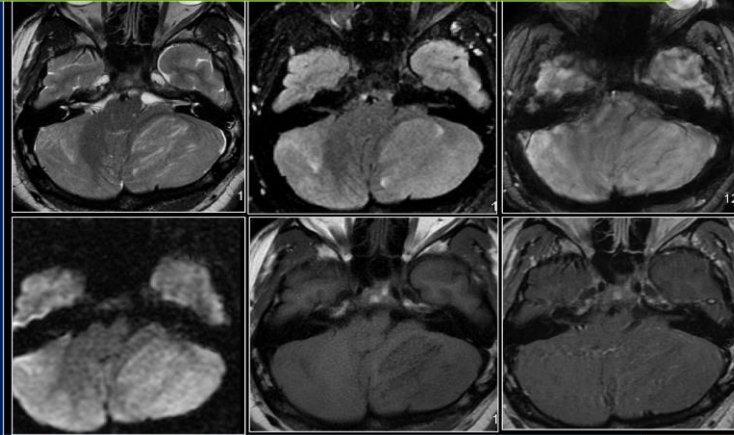
Mohit Agarwal @MohitAgNeurorad · 20/8/21
#MCWNeuroradBTW 042 Ans: Lhermitte-Duclos

Check out #TeachingMoment on PTEN in CNS

#FOAMed #FOAMrad #radres #MedEd @TheASNR @ARRS_Radiology @BSHNI_UK @ESNRad @BshniTrainees @RANZCRcollege @ESHNRSociety @RadDiscord @MCWNeurorad @theASFNR @MCWRadIntGroup @The_ASPNR



MCW Neuroradiology Brain Teaser of the Week No. 042



Headache and ataxia

Mohit Agarwal MD

Froedtert MEDICAL CENTER

MCW Neuroradiology Brain Teaser of the Week No. 042 Answers

Q1. Young adult presents with headache and ataxia. What is the diagnosis?

❖ Ans: **Cerebellar dysplastic gangliocytoma/ Lhermitte-Duclos disease**

Q2. This condition is associated with:

- ❖ Increased incidence of glioblastoma
- ❖ Increased incidence of renal cell carcinoma
- ❖ **Increased incidence of breast and thyroid cancer**
- ❖ Increased incidence of intracranial aneurysms

Mohit Agarwal MD

Froedtert MEDICAL CENTER

Cerebellar dysplastic gangliocytoma

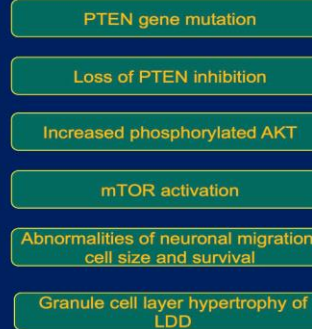
- ❖ Hamartomatous disorder of the cerebellum
- ❖ Considered CNS manifestation of the Multiple Hamartoma Syndrome/ Cowden syndrome
- ❖ Underlying mutation in the PTEN gene
- ❖ Presents with headache, nausea vomiting and ataxia. Most common age 20-40
- ❖ Treated with surgical resection
- ❖ **Imaging**
 - ❖ Widened cerebellar folia
 - ❖ Hyperdense thickened cortex on CT +/- calcifications
 - ❖ Striated thickened cortex with T2W hyperintense intervening white matter – 'Tigroid'
 - ❖ Mild enhancement due to increased vascularity
- ❖ **Cowden syndrome**
 - ❖ Autosomal dominant
 - ❖ Mucocutaneous lesions, macrocephaly, increased incidence of hamartomas
 - ❖ Increased incidence of neoplasms of breast, thyroid, GI/GU and CNS

Mohit Agarwal MD

Froedtert MEDICAL CENTER

Teaching Moment – Multiple Hamartoma Syndrome/ PTEN hamartoma tumor syndrome

The PTEN pathway for LDD



PTEN related abnormalities in the CNS

- ❖ **Cowden syndrome**
 - ❖ Cerebellar dysplastic gangliocytomas
 - ❖ Meningiomas
 - ❖ Developmental venous anomalies
 - ❖ Dilated perivascular spaces
 - ❖ Non-specific white matter abnormalities
 - ❖ Macrocephaly/ megalencephaly
- ❖ **Bannayan-Riley-Ruvalcaba syndrome**
 - ❖ Macrocephaly/ megalencephaly
 - ❖ Vascular malformations
 - ❖ Cortical dysplasias
 - ❖ Dilated perivascular spaces
 - ❖ Non-specific white matter abnormalities

1. Dharmia R and Howarth JM. Imaging of PTEN-related abnormalities in the central nervous system. *Clinical Imaging* 80 (2020) 180-185
 2. Abel TW et al. Lhermitte-Duclos Disease. A Report of 31 Cases with Immunohistochemical Analysis of the PTEN/AKT/mTOR Pathway. *J Neuropathol Exp Neurol* 04(4), April 2005, 341-349





Siguiendo

Masaki Komiyama 🇯🇵

@kanachan2020

Neurointerventionalist and husband. I like embryology and functional anatomy of cerebral vessels and HHT, and dogs and vertebrates. Tweets mine.

[Traducir la biografía](#)

📍 Osaka City General [🔗 komiyama.me/Kodomo/welcome...](https://komiyama.me/Kodomo/welcome...)

📅 Se unió en enero de 2020

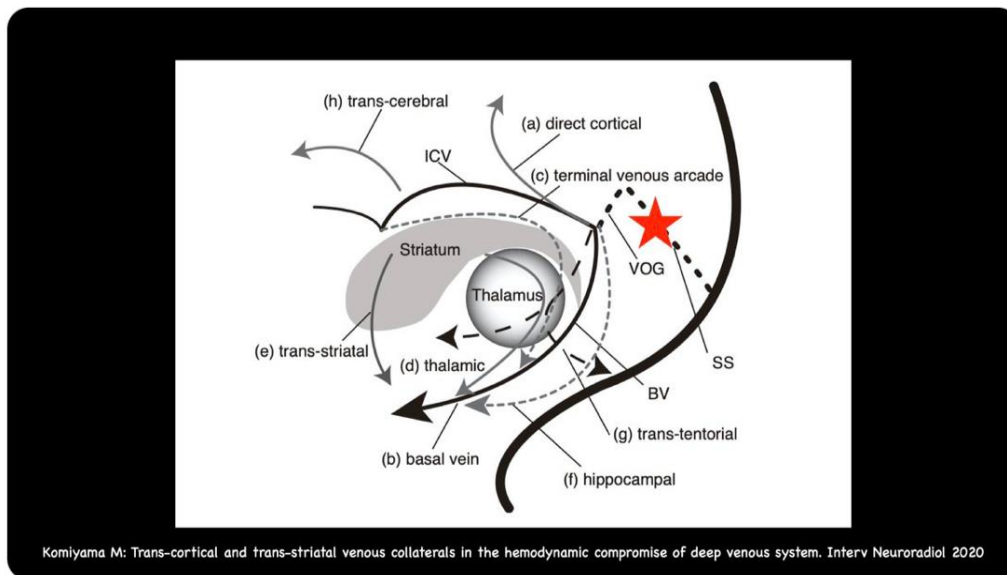
147 Siguiendo 2041 Seguidores





Masaki Komiya 🇯🇵 @kanachan2020 · 19/7/21

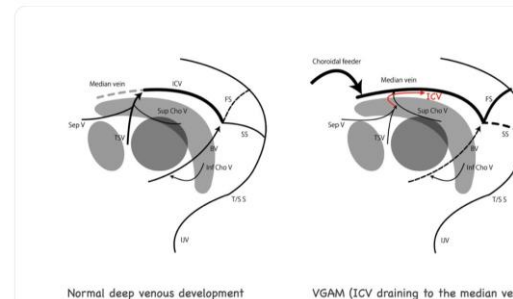
Cerebral venous system is composed of superficial and deep systems. When normal drainage route of the deep one is compromised, collaterals between two systems will function. They include trans-medullary (cerebral), trans-striatal, thalamic vein, etc. doi.org/10.1177/159101...



Masaki Komiya 🇯🇵 @kanachan2020 · 20/8/21
Internal cerebral vein connection to the varix in vein of Galen aneurysmal malformation

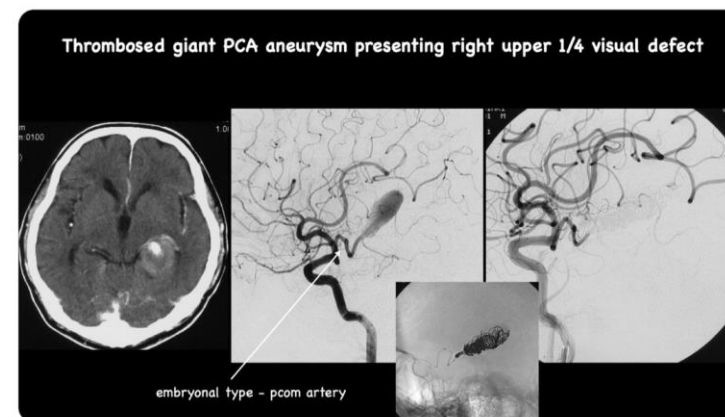
It has been believed that there is no connection between ICSV and Galenic vein in VGAM, which is theoretical basis of transvenous embolization.

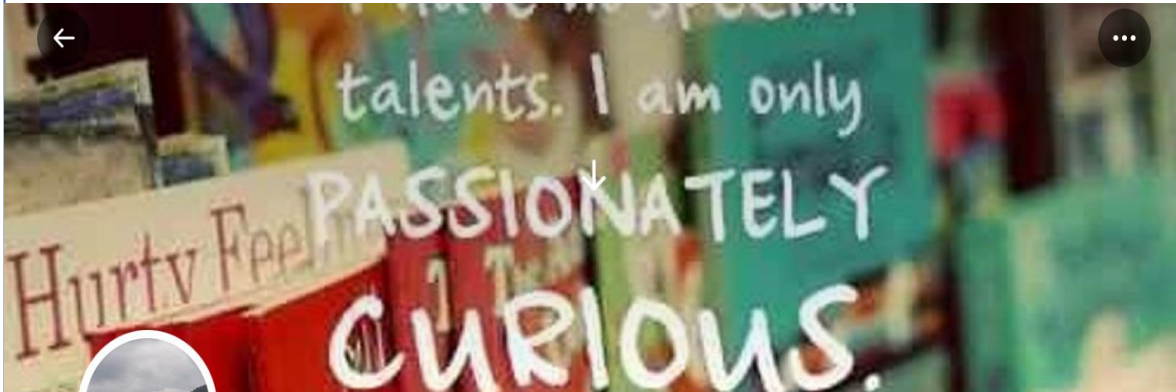
This is not true. Such connection may exist!



Masaki Komiya 🇯🇵 @kanachan2020 · 8/5/21

Embryologically, P2-4 of PCA are telencephalic branches of primitive anterior choroidal artery. Thus, there are various variations of Acho artery and PCA branching. This also suggests high tolerance of proximal PCA sacrifice for PCA An due to rich leptomeningeal collaterals.





Ahmed Elkady, MSc

@ahkady86 Te sigue

Medicine is a science of uncertainty and an art of probability

[Traducir la biografía](#)

📍 Jeddah, Kingdom of Saudi Arabi 🗓 Fecha de nacimiento 31 de diciembre

📅 Se unió en abril de 2019

57 Siguiendo 122 Seguidores



Siguiendo



Ahmed Elkady, MSc @ahkady86 · 27/7/21

[#FOAMed](#) [#FOAMneu](#)

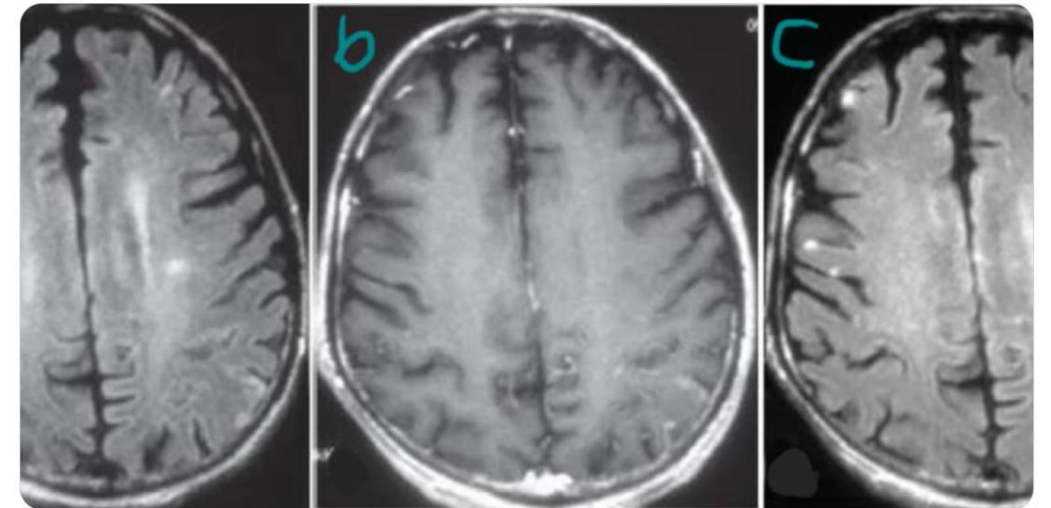
[#neurorad](#) [@vmargar](#)

Case Sc: Male pt 65 yo, lung SCC, has severe headache, & seizures

a) Flair multiple hyperintense lesions; b) T1 contrast enhanced (CE)

unremarkable; c) Flair CE multiple cortical enhanced lesions

Diagnosed Leptomeningeal carcinomatosis





Ahmed Elkady, MSc @ahkady86 · 27/7/21

En respuesta a @ahkady86

Flair CE in CNS Disorders:

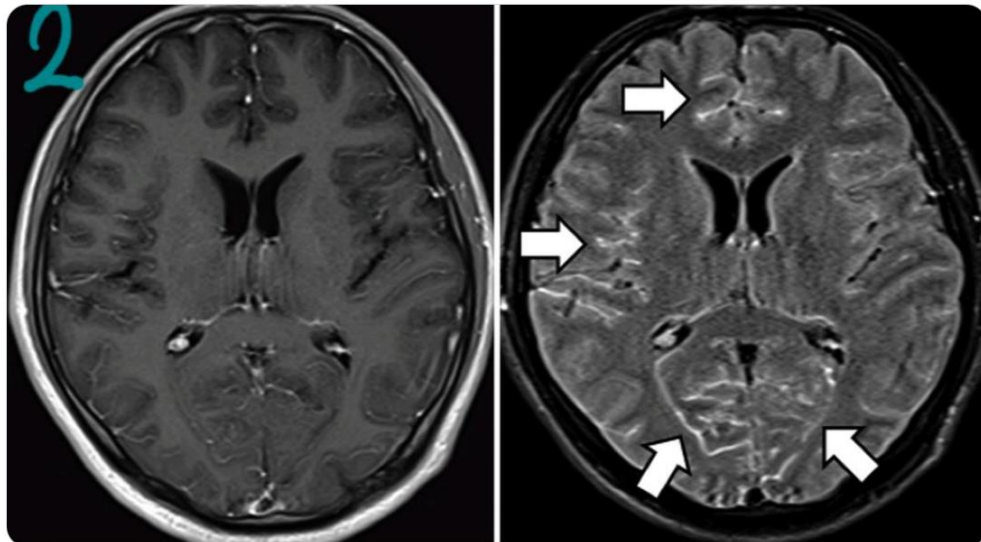
T1 CE faintly lesions might depicted more clearly on FLAIR CE, so highly effective in detection of sulcal or meningeal infection, inflammation and metastases, but marked T1 CE lesions show no FLAIR CE because the signal-reducing T2 effects obscure it



Ahmed Elkady, MSc @ahkady86 · 27/7/21

2. Leptomeningeal Infection

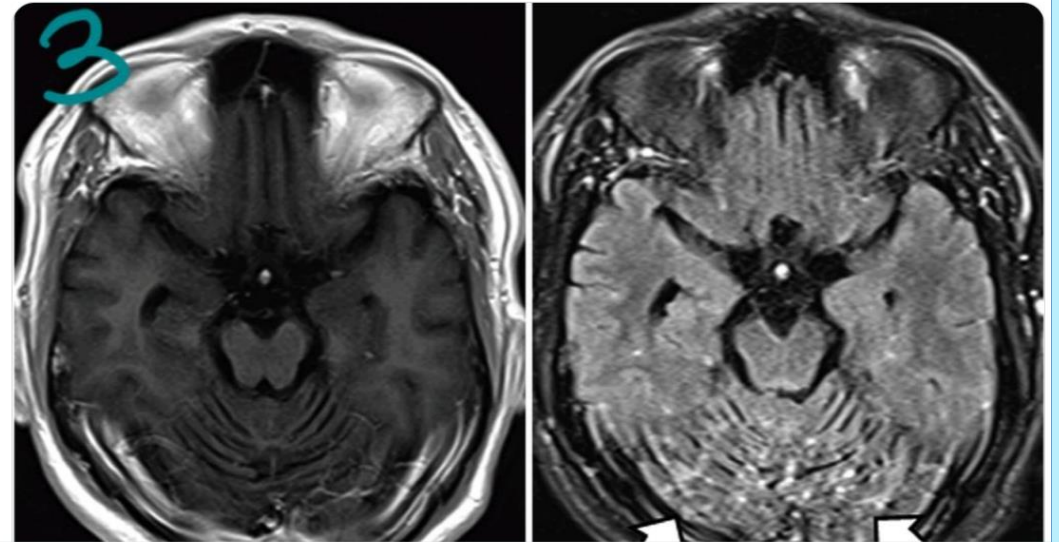
FLAIR CE is more effective than T1 CE as it doesn't demonstrate enhancement in the normal vascular or meninges that can be confused with abnormal enhancement on T1 CE, beside its extreme sensitivity to minimal modification of the CSF composition



Ahmed Elkady, MSc @ahkady86 · 27/7/21

3. Leptomeningeal Neoplasm

CSF cytology is most specific test, but could be false-negative. T1 CE has been used as a reliable technique for confirming diagnoses and assessing the extent of a lesion and its response to therapy, FLAIR CE show superiority for leptomeningeal disease

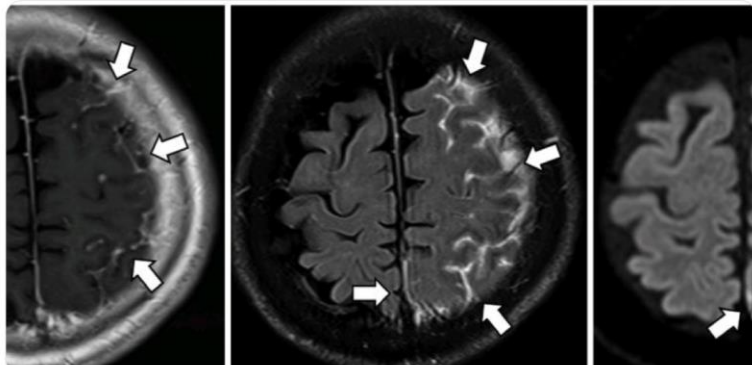




Ahmed Elkady, MSc @ahkady86 · 27/7/21

4. Rheumatoid leptomeningitis

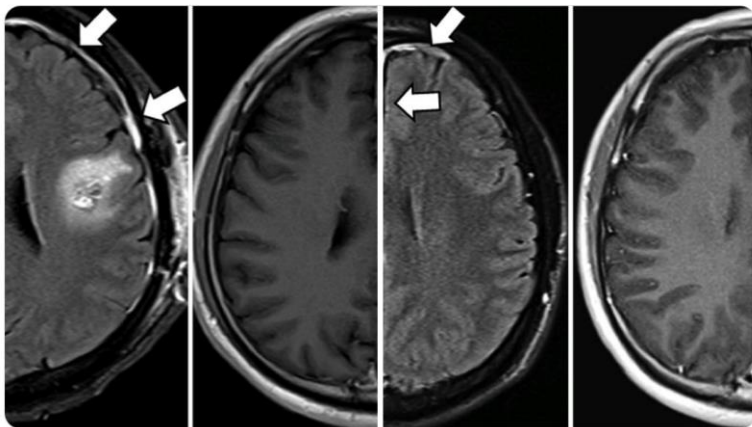
is a rare but serious complication of RA. Characteristic MRI are high signal intensity lesions in the subarachnoid spaces on FLAIR images or DWI & meningeal thickening more prominent in Flair CE than T1 CE, especially with CCP antibodies



Ahmed Elkady, MSc @ahkady86 · 27/7/21

Pachymeningeal lesions

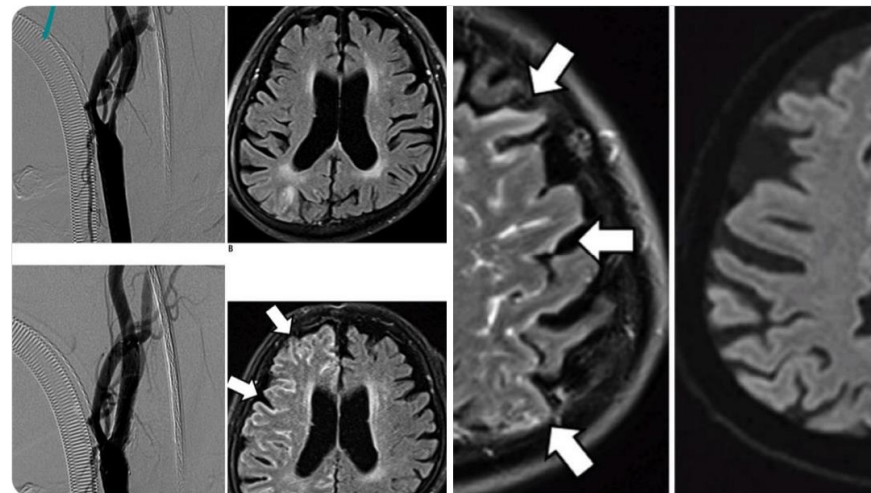
Postoperative (5) & posttraumatic (6) dural enhancement Flair CE is more extensive & persistent than T1CE. Posttraumatic dural enhancement implies considerable head injury, even minor lacerations that cause bleed into CSF are sufficient to induce Flair CE



Ahmed Elkady, MSc @ahkady86 · 27/7/21

Hyperintense Acute Reperfusion Marker (HARM)

Is Flair CE of subarachnoid CSF space, caused by leakage of Gd through disrupted BBB, transient w/o neurological symptoms post carotid stenting(7) Post cardiac surgery, or acute ischemia(8) due to hypoperfusion or thrombectomy procedure



1 1 1 1



Ahmed Elkady, MSc @ahkady86 · 27/7/21

doi.org/10.1148/rg.272...

doi.org/10.3348/kjr.20...

1 1 1 1





Siguiendo

Deborah Shatzkes

@DShatzkes Te sigue

[#HNRAD](#), proud past president of [@ASHNRSociety](#), [@AIRP_Radiology](#) faculty, mom/wife/lousy runner, tweets my own

[Traducir la biografía](#)

[Asbury Park, NJ](#) Se unió en marzo de 2015

370 Siguiendo **2347** Seguidores

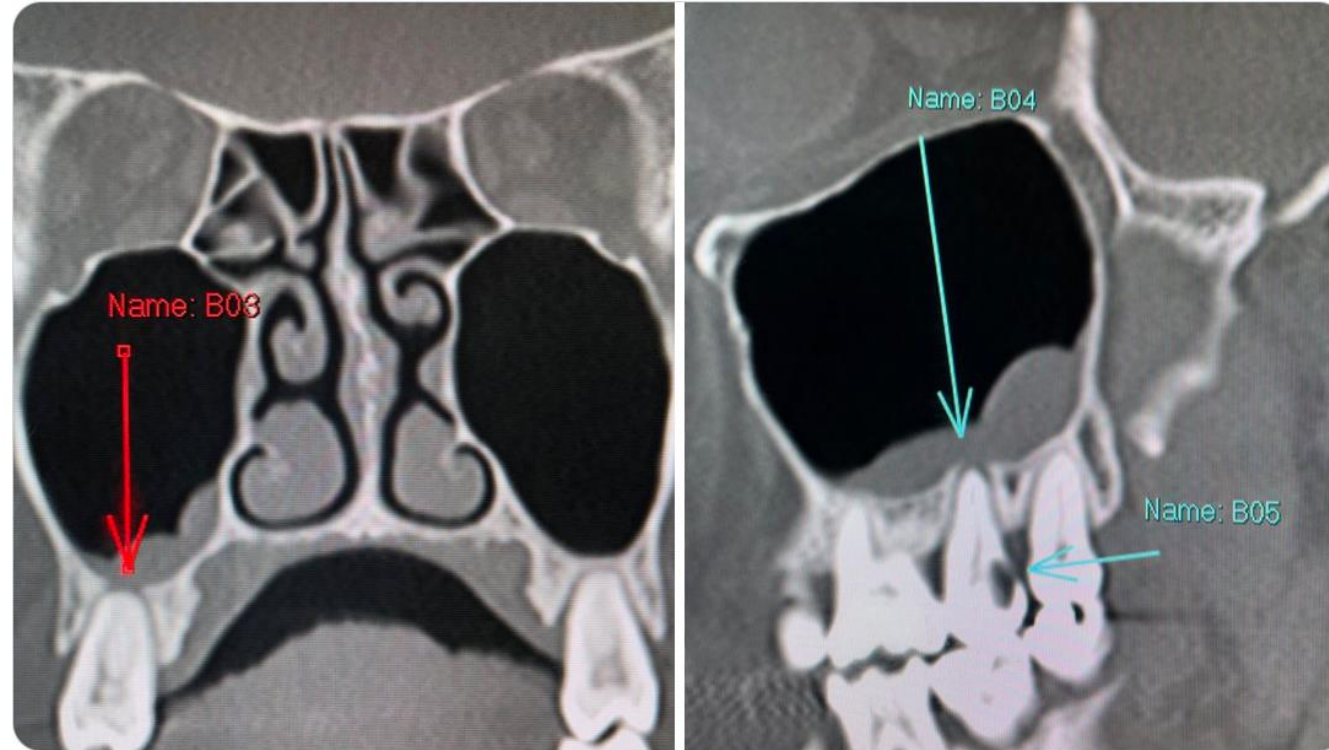




Deborah Shatzkes @DShatzkes · 19/8/21

...

Sometimes I think the most useful thing I do for patients is identify unsuspected odontogenic sinusitis. [#dontforgettheteeth](#)
[#doesntneedFESS](#) @KateEDean @ASHNRSociety @ESHNRSociety
[#ASHNR21](#)





Siguiendo

William T. O'Brien, Sr.

@CincyPedsNeuro Te sigue

Chief, Neuroradiology & Director, #PediNeuroRad Fellowship, @CincyKidsRad |
@WestPoint_USMA & @PCOMeducation alum | @USAirForce retired | 🚚✈️🌟



📍 Cincinnati, OH 🗓 Fecha de nacimiento 7 de diciembre

📅 Se unió en noviembre de 2017

1481 Siguiendo **4253** Seguidores





William T. O'Brien, Sr. @CincyPedsNeuro · 14/5/21

Challenging #PediNeuroRad Case
#CincyPedsNeuroCase for the Weekend

Slide 1: History & images at presentation

Slide 2: Annotated images

Slide 3: Answer & key points

Slide 4: Illustration of key finding

Have a great weekend...

#PedsRad #NeuroRad #RadRes #FOAMrad #MedEd

Adolescent with mild delay, spasticity & hyperreflexia

Adolescent with mild delay, spasticity & hyperreflexia

Hereditary Spastic Paraparesis with Thin Corpus Callosum (HSP-TCC)

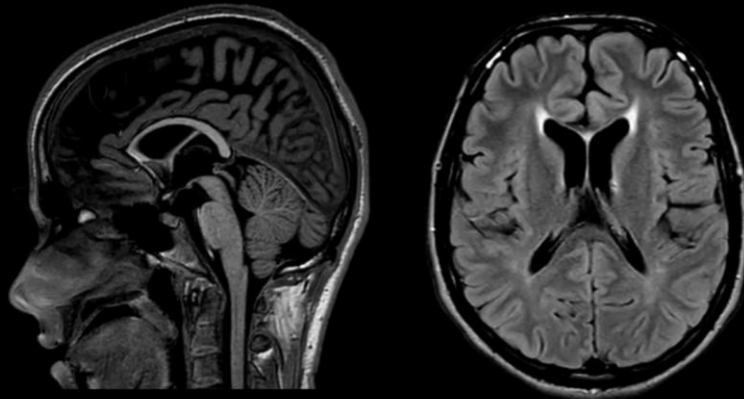
- Imaging Findings
 - Diffuse thinning of corpus callosum, most pronounced anteriorly
 - Symmetric signal abnormality in deep frontal white matter with characteristic 'Ears of the Lynx' configuration (see last slide)
- Key Points/Pearls
 - HSP-TCC is an AR hereditary form of spastic paraplegia
 - Most often due to mutation of spastic paraparesis gene T1 (SPF11), followed by SPG15
 - HSPs as a group of disorders result in progressive degeneration of long tracts
 - Common clinical presentations for HSPs (all comers):
 - Limb (mainly lower) weakness & spasticity
 - Gait disturbances
 - Variable sensory deficits & urinary issues
 - Spinal cord imaging may show progressive cord atrophy / volume loss in cases of HSP
 - HSP-TCC has classic brain MRI findings as detailed in this case

'Ears of the Lynx'

As on T1 MRI As on T2 MRI



Adolescent with mild delay, spasticity & hyperreflexia



Sagittal T1 image

Axial T2-FLAIR image

@CincyPedsNeuro



Adolescent with mild delay, spasticity & hyperreflexia



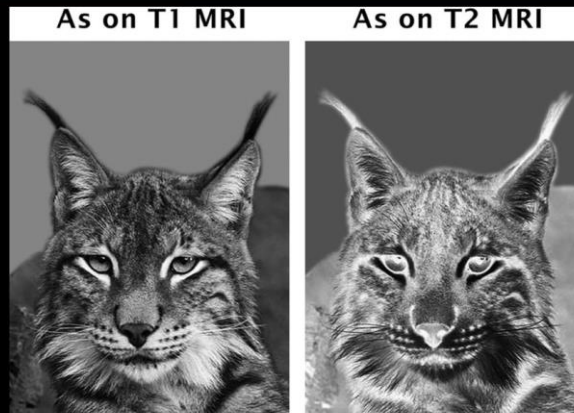
Sagittal T1 image

Axial T2-FLAIR image

@CincyPedsNeuro



'Ears of the Lynx'



Pascual B, et al. "Ears of the Lynx" MRI Sign Is Associated with SPG11 and SPG15 Hereditary Spastic Paraplegia. AJNR 2019; 40 (1) 199-203

@CincyPedsNeuro



Hereditary Spastic Paraparesis with Thin Corpus Callosum (HSP-TCC)

- Imaging Findings
 - Diffuse thinning of corpus callosum, most pronounced anteriorly
 - Symmetric signal abnormality in deep frontal white matter with characteristic 'Ears of the Lynx' configuration (see last slide)
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 - Gait disturbances
 - Variable sensory deficits & urinary issues
 - Spinal cord imaging may show progressive cord atrophy / volume loss in cases of HSP
 - HSP-TCC has classic brain MRI findings as detailed in this case

@CincyPedsNeuro

Pascual B, et al. "Ears of the Lynx" MRI Sign Is Associated with SPG11 and SPG15 Hereditary Spastic Paraplegia. AJNR 2019; 40 (1) 199-203





Siguiendo

Lorenzo Pinelli

@LorenzoPinelli Te sigue

adult and pediatric neuroradiologist, opinions are my own (whose else could it be? 😊)

📍 Italia 🕒 Fecha de nacimiento 1 de octubre de 1968 📅 Se unió en enero de 2013

512 Siguiendo **1327** Seguidores





Lorenzo Pinelli @LorenzoPinelli · 25/7/21

...

Incidental craniopharyngeal canal 📍 type 1 (and other findings) in “cri-du-chat” syndrome (5p- syndrome), must be distinguished from 📍 sphenoid-occipital synchondrosis 🧐. Why “type 1”? Have a look at [@CMGlastonbury](https://ajnr.org/content/ajnr/3...) and colleagues’ brilliant paper! ajnr.org/content/ajnr/3...

