

## Hyperdense middle cerebral artery sign

S B Gunatilake<sup>1</sup>, M Ekanayake<sup>2</sup> and J Indrakumar<sup>2</sup>

A 57-year old man presented with sudden onset hemiplegia. On examination he had global aphasia, a dense right hemiplegia and a right extensor plantar response. He had a history of diabetes mellitus, hypertension and a myocardial infarction one year ago. A non contrast CT scan of the brain done on the same day did not show a cerebral infarction, but showed a loss of visualisation of the insular ribbon, loss of outline of the lentiform nucleus, effacement of the overlying cortical sulci and a hyperdense middle cerebral artery on the left side (Figure 1), all of which are early signs of a middle cerebral artery territory infarction in the CT. A repeat CT scan done a week later showed a large infarction in the territory of the left middle cerebral artery (Figure 2) and the disappearance of the hyperdense artery sign.

Hyperdense artery sign is an early, but indirect, sign of an ischaemic stroke. It represents the acute large cerebral artery occlusion, caused by thrombosis or embolism, as an increased density in the artery [1]. However, the reliability of this sign is uncertain in the elderly when the vessel wall is calcified. The evidence of calcification persists on rescanning, but not the hyperdense artery due to thrombosis which disappears in a few days with recanalisation of the artery. Increased haematocrit can also give the appearance of a hyperdense artery although then seen bilaterally. In a series of 272 consecutive patients with stroke, CT scanned within 12 hours of symptom onset, hyperdense artery sign was found in 73 (27%) [2]. Some have found this sign to indicate a large infarct [3].



Figure 1.

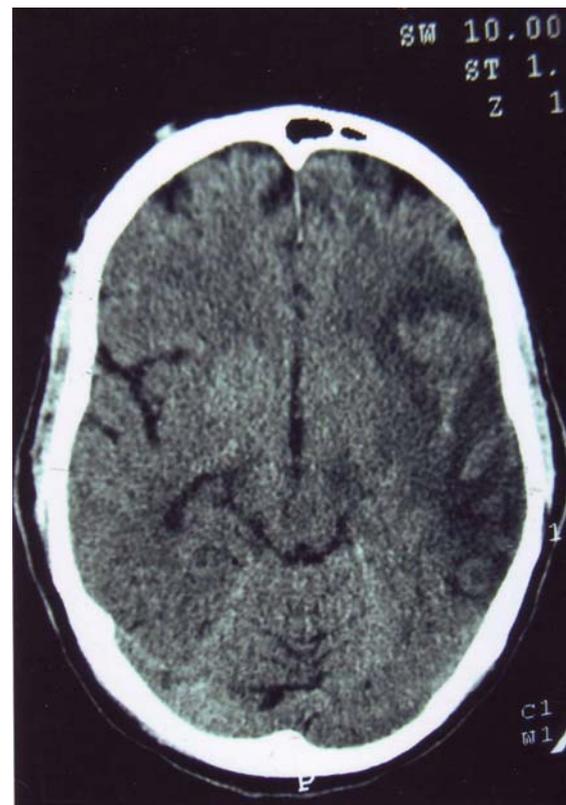


Figure 2.

<sup>1</sup>Department of Medicine, University of Sri Jayawardenepura, Nugegoda, and <sup>2</sup>Colombo South Teaching Hospital, Kalubowila, Sri Lanka.

Correspondence: SBG, e-mail <saman.gunatilake@hotmail.com>. Received 9 October 2009 and accepted 9 January 2010. Competing interests: none declared.

## References

1. Bastianello S, Pierrallini A, Colonnese C. Hyperdense middle cerebral artery sign. *Neuroradiology* 1991; **33**: 207-11.
  2. Leys D, Pruvo JP, Godefroy O, Rondepierre P, Leclerc. Prevalence and significance of hyperdense middle cerebral artery in acute stroke. *Stroke* 1992; **23**: 317-24.
  3. Tomsick T, Brott T, Barsan W. Thrombus localization with emergency cerebral computed tomography. *American Journal of Neuroradiology* 1992; **13**: 257-63.
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## To live and die with TB

D P C K A Lal<sup>1</sup>

It was just an ordinary day  
I was waiting in front of the Department of Anatomy to go in for dissections

A lady came towards the department, she was breathless and coughing  
Her helpless eyes were on me, I realised that she needed my help

I asked "What are you looking for?"  
She replied, "Sir, please show me the place where I can donate my body"

I showed her the Department of Anatomy and she went in.

After a few minutes she came back with tears in her eyes.  
I asked, "Why?"

She replied, "Sir TB patients' bodies are not accepted"

I had nothing to say, she continued:

"I can't live as I wish because of this TB!  
I can't die as I wish because of the TB!!"

(An experience as a 2nd year medical student)

<sup>1</sup>Department of Microbiology, Faculty of Medicine, University of Peradeniya, Sri Lanka.

Correspondence: DPCKAL, e-mail <Chula.kanishka@gmail.com>.