Case 2

Identification and Chief Complaint

September 2nd 2017

A.C.S.M., 3 years old, female, born and raised in São Paulo, Brazil

Previously healthy

Admitted at the E.R. with a 2-day history of fever and vomiting

Right Otitis Media diagnosed in another service, treated with azithromycin. Developed with worsening of symptoms and bilateral convergent strabismus, more accentuated to the right

Physical Examination

Alert, fully conscious, oriented as to time and place

Right tympanic membrane with signs of inflammation

Bilateral convergent strabismus, more accentuated to the right



Acute Otomastoiditis





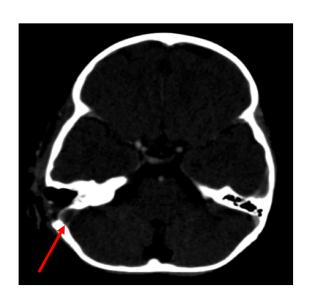
Treatment

Sep 3rd

- Ceftriaxone 100mg/kg
- Right Mastoidectomy

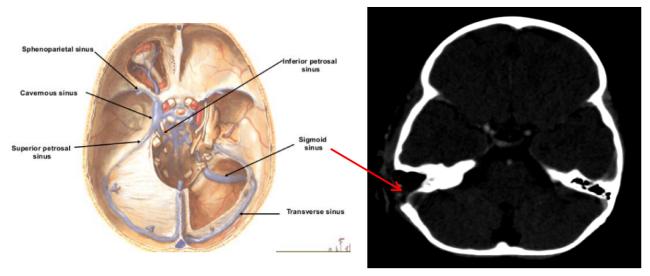
CT Scan post surgery





Acute thrombosis of the right sigmoid sinus

Sinus Venous



Netter's Introduction to Imaging E-Book

CT Scan post surgery



Acute thrombosis of right internal jugular vein

Questions

- Would you treat this patient?
- If yes, what anticoagulante therapy would you choose and how would you monitor it?
- How long would the treatment last?

Treatment

Sep 6th Anticoagulation using Unfracionated Heparin (UFH)

- No complications

Sep 9th Enoxaparin 1mg/kg/dose q12h

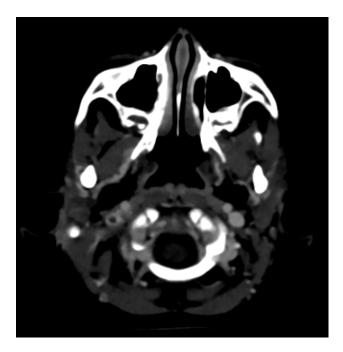
Neuro: Acetazolamide (Diamox) + Repeated lumbar punctures

Ophtalmologist: Ocular Buffer

- Hb=9.8 / Hct=28 / WBC=14310 / Plt=4144k
- Fibrinogen= 442
- aPTT= 19.2s / R=0.69
- PT= 13s / Prothrombin activity= 86%
- D-Dimer=2116

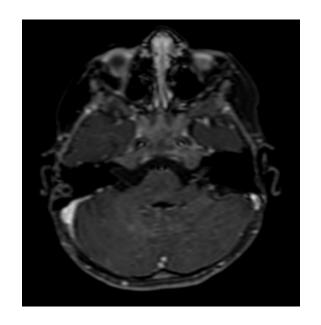
1 month later

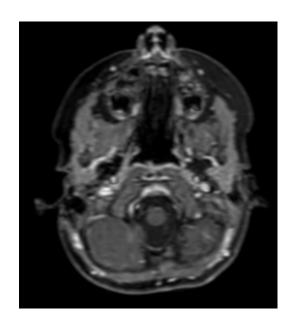




Partially recanalized right sigmoid sinus and right internal jugular vein thrombosis

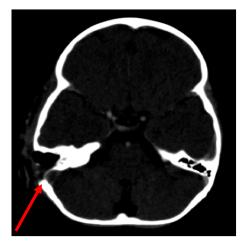
6 months later



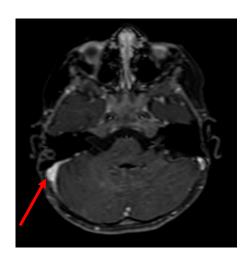


Complete recanalization – End of anticoagulation treatment

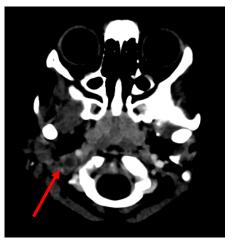
Evolution

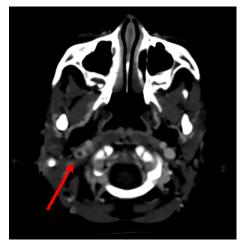


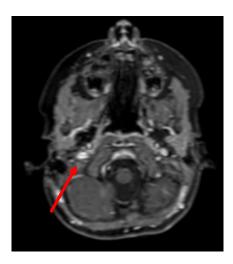




Evolution







Clinical progress

Normal hearing

Resolution of strabismus

Absence of neurological sequelae

Clinical progress

Before treatment



After treatment

