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The clinical and progressive aspects of cerebral venous thromboses at the Oran hospital and university center

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Introduction:

- -Rare pathology but probably underestimated. given the diagnostic difficulties.
- -Untreated, it leads to potentially serious sequelae.
- -It affects young women with predilection and is characterized by a great diversity of clinical presentation.
- -The management takes into account the thrombotic process

Material and method:

Objective: to identify the main clinical aspects encountered during CVT.

Retrospective epidemiological study by analyzing the files of patients admitted for CVT during the period from January 2019 to December 2020.

.One-year survival study

Results:

In our study period, we collected 28 cases of CVT recorded in the UM department of HUC Oran.

- -sex ratio 6 (24 women against 4 men) with an average age of 38.26 ± 13.59 years.
- -The clinical symptomatology was acute in 90% of cases and subacute in 10% of cases.

The inaugural signs are various dominated by headaches (88.8%), visual disturbances (50%), seizures (44.4%), motor deficit (44.4%).

MRI showed a predominance of sagittal sinus involvement in 42% of cases and lateral sinuses in 35% of cases, signs of infarction were observed in 10.71%.

Pregnancy and postpartum was the most common cause in 90% of cases followed by autoimmune diseases in 10% of cases.

One-year survival was 92.86%.

Discussion:

- : -Average age was 38.26 years, it is 34 years in Constantine and 41.8 years (CHU south-Réunion). Female predominance identical to the majority of studies. -Clinical signs (headaches, convulsions, papilloedema) are the same signs encountered in the literature.
- -Postpartum and contraceptives only represent 10 to 20% of CVT etiologies in international series.
- -The sagittal sinus thrombosis is the most found in the majority of studies. Bias: insufficient immunological assessments.

Conclusion:

Despite its low incidence rate and the diversity of its clinical manifestations, CVT should be considered in the face of any symptomatology of ICH, headaches and disturbances of consciousness.

Anticoagulants should be started urgently as soon as the diagnosis is confirmed.