



Figure. (A) Gradient-echo MR image demonstrating multiple areas of cortical hemorrhage. Similar lesions were seen in all vascular territories throughout the cortex. T1- and T2-weighted images (not shown) indicate that the areas of bleeding are of different ages, but that several of the lesions are acute. (B)  $\beta$ -Amyloid immunostain showing  $\beta$ -amyloid-positive blood vessels in cortex adjacent to hemorrhagic and ischemic necrosis.

### Amyloid angiopathy

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A 65-year-old woman with an unremarkable medical history presented with sudden-onset right hemiplegia and hemianopsia. Except for a 20-pound weight loss over the previous several months, her recent health had been good.

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Initial differential diagnoses given the MRI above included septic emboli, metastatic disease, vasculitis, and amyloid angiopathy (figure, A). Brain biopsy subsequently confirmed the diagnosis of cerebral amyloid angiopathy (figure, B).

The patient's relatively young age is atypical for this condition, as is the absence of dementia.<sup>1</sup> However, this case illustrates the spectrum of amyloid angiopathy and its ability to present with multiple simultaneous cerebral hemorrhages.

1. Greenberg SM, Vonsattel JP. Diagnosis of cerebral amyloid angiopathy: sensitivity and specificity of cortical biopsy. *Stroke* 1997;28:1418-1422.

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