Neuro *Images*

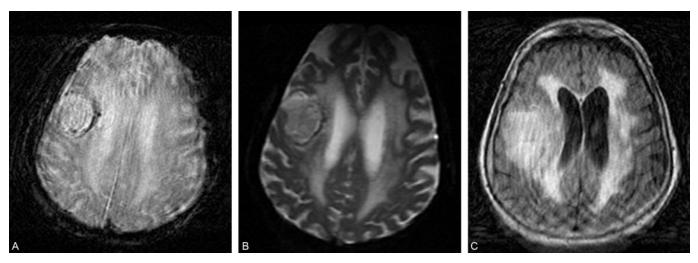


Figure. (A) Gradient echo (GRE), (B) T2-weighted imaging (diffusion weighted MRI b=0) and (C) FLAIR showed right hemisphere hyperintensity with a slight rim of hypointensity on GRE and T2, consistent with an accumulation of fresh arterial blood consisting mainly of intact red blood cells containing oxy-Hb. Oxy-Hb is diamagnetic showing hypo or isointensity on T1-weighted imaging and hyperintensity on T2-weighted imaging (high water content).

Hyperacute post-thrombolysis hematoma by MRI

A.J. Gagnon, MD, FRCPC, and P.A. Barber, MB ChB, MRCP, Calgary, Alberta, Canada

An 89-year-old woman presented acutely following the onset of aphasia and right hemiparesis (NIH Stroke Scale = 10), without clinical or CT contraindications to thrombolysis. She received IV recombinant tissue plasminogen activator (0.9 mg/kg infused over 1 hour after 10% bolus) beginning 90 minutes after symptom onset.

Address correspondence and reprint requests to Dr. A.J. Gagnon, University of Calgary, Calgary Stroke Program, 1403-29 Street NW, Calgary, Alberta T2N 2T9, CANADA; e-mail: alexis.gagnon@calgaryhealthregion.ca

The patient was imaged with a 3 T MRI 2.5 hours after stroke onset. Ten minutes after the start of the MRI, she suddenly became agitated and developed contralateral left hemiplegia. Fluid attenuated inversion recovery (FLAIR), T2-weighted and gradient echo sequences revealed a hyperacute right hemisphere hematoma (figure). Microbleeds, a potential risk factor for contralateral symptomatic hemorrhage following thrombolysis, were not identified on gradient echo sequences.

- Parizel PM, Makkat S, Van Miert E et al. Intracranial hemorrhage: principles of CT and MRI interpretation. Eur Radiol 2001;11:1770-1783.
- Kidwell CS, Saver JL, Villablanca P et al. Magnetic resonance imaging detection of microbleeds before thrombolysis: an emerging application. Stroke 2002;33:95–98.



Hyperacute post-thrombolysis hematoma by MRI

A. J. Gagnon and P. A. Barber *Neurology* 2004;63;1534 DOI 10.1212/01.WNL.0000137024.44831.28

This information is current as of October 25, 2004

Updated Information & including high resolution figures, can be found at: **Services** http://n.neurology.org/content/63/8/1534.full

References This article cites 2 articles, 1 of which you can access for free at:

http://n.neurology.org/content/63/8/1534.full#ref-list-1

Subspecialty Collections This article, along with others on similar topics, appears in the

following collection(s):

All Cerebrovascular disease/Stroke

http://n.neurology.org/cgi/collection/all_cerebrovascular_disease_strok

e Intracerebral hemorrhage

http://n.neurology.org/cgi/collection/intracerebral_hemorrhage

MRI

http://n.neurology.org/cgi/collection/mri

Permissions & Licensing Information about reproducing this article in parts (figures, tables) or in

its entirety can be found online at:

http://www.neurology.org/about/about_the_journal#permissions

Reprints Information about ordering reprints can be found online:

http://n.neurology.org/subscribers/advertise

Neurology ® is the official journal of the American Academy of Neurology. Published continuously since 1951, it is now a weekly with 48 issues per year. Copyright . All rights reserved. Print ISSN: 0028-3878. Online ISSN: 1526-632X.

