



Figure. T1 pre- (A), T1 post-Gadolinium (B), and T2 (C) MRI images showing enhancing structures in the area of the left and right middle cerebral arteries. Magnetic resonance angiography images of the Circle of Willis (D), left (E), and right (F) middle cerebral arteries show that these structures represent fusiform dilatation of these arteries (arrows).

Multiple stable fusiform intracranial aneurysms following atrial myxoma

S. Andrew Josephson, MD; and S. Claiborne Johnston, MD, PhD, San Francisco, CA

A 33-year-old woman presented in 1989 with multiple embolic strokes from a left atrial myxoma. Eight years later, magnetic resonance angiography showed multiple fusiform aneurysms that

have been stable on yearly imaging studies, and the patient currently remains asymptomatic (figure, A through F).

Fusiform aneurysms have been reported as a neurologic complication of atrial myxoma.^{1,2} The natural history of these aneurysms is unknown. Given the invasion of the vascular intima by myxoma tumor cells, these aneurysms may be flimsy and endovascular or surgical treatments may be particularly risky. The stability of these aneurysms in our patient over a 7 to 15 year period argues for conservative management.

Address all correspondence and reprint requests to Dr. S. Claiborne Johnston, Department of Neurology, 505 Parnassus Avenue, M-798, San Francisco, CA, 94143-0114; e-mail: Clay.Johnston@ucsfmedctr.org

1. Yilmaz MB, Akin Y, Guray U, Kisacik HL, Korkmaz S. Late recurrence of left atrial myxoma with multiple intracranial aneurysms. *Int J Cardiol* 2003;87:303-305.
2. Nucifora PG, Dillon WP. MR diagnosis of myxomatous aneurysms: report of two cases. *AJNR Am J Neuroradiol* 2001;22:1349-1352.

Neurology®

Multiple stable fusiform intracranial aneurysms following atrial myxoma

S. Andrew Josephson and S. Claiborne Johnston

Neurology 2005;64;526

DOI 10.1212/01.WNL.0000145838.61057.E8

This information is current as of February 7, 2005

Updated Information & Services	including high resolution figures, can be found at: http://n.neurology.org/content/64/3/526.full
Supplementary Material	Supplementary material can be found at: http://n.neurology.org/content/suppl/2012/04/16/64.3.526.DC1
References	This article cites 2 articles, 1 of which you can access for free at: http://n.neurology.org/content/64/3/526.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_stroke Cardiac http://n.neurology.org/cgi/collection/cardiac MRI http://n.neurology.org/cgi/collection/mri Subarachnoid hemorrhage http://n.neurology.org/cgi/collection/subarachnoid_hemorrhage
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.

