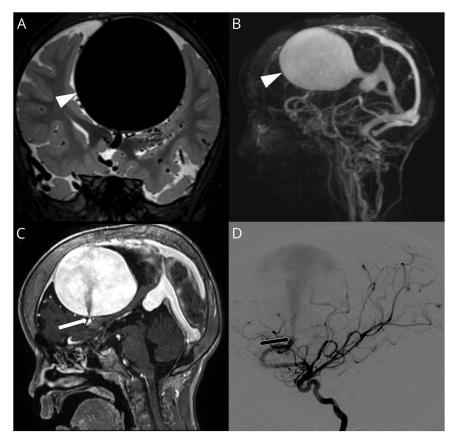
Giant pediatric intracranial pial macrofistula

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Figure Brain MRI and digital subtraction angiography



MRI coronal T2 sequence (A) shows a giant vascular structure (arrowhead) corresponding to a dilated supracallosal vein on magnetic resonance angiography (B, arrowhead). A direct connection between the anterior cerebral artery and the venous ectasia is visible on the T1 postgadolinium sequence (C, arrow) and is confirmed on cerebral angiography (D).

A 5-year-old boy with no familial history presented with macrocrania, dilated facial veins, and intracranial bruit at auscultation of the skull. MRI showed a giant supracallosal venous ectasia typical of a macrofistula (figure). Cerebral angiography confirmed the diagnosis. Macrofistulas are rare cerebral vascular malformations (1.6%) frequently seen in children with hereditary hemorrhagic telangiectasia (HHT) or capillary malformation-arteriovenous malformation disorders.² In case of HHT, any associated pulmonary fistula has to be ruled out: left untreated, HHT would carry a risk of brain abscess or stroke. Treatment of the macrofistula is necessary to prevent complications due to hydrovenous disorders or hemorrhage.

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Appendix Authors Name Location Contribution Stanislas Fondation Rothschild Designed and conceptualized Smajda, MD Hospital, Paris, study, analyzed the data, drafted the manuscript for intellectual France Georges Hôpital Foch, Designed and conceptualized Rodesch. Suresnes, France study, analyzed the data, drafted MD, PHD the manuscript for intellectual

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