

CAVERNOUS SINUS (CS) SYNDROME AS PRESENTING FEATURE OF MYCOTIC ANEURYSM (MA) OF INTRACAVERNOUS SEGMENT(ICS) OF INTERNAL CAROTID ARTERY(ICA)

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Purpose: MA of ICS of ICA are extremely rare. Early diagnosis is important as they have propensity to rupture..Three cases of pseudoaneurysms of ICS of ICA in children are reported. Methods: Case I: Ten year old boy developed Left eye (LE) preseptal cellulitis(PSC), fever and headache following a boil at tip of nose . Following systemic antibiotics, fever and headache subsided but LE showed complete third and fourth nerve palsy. Computerized Tomography angiogram confirmed lobulated aneurysm arising from ICS of left ICA. Case II Three years old boy had PSC both eyes following multiple boils on scalp.Even after long course of antibiotics, developed complete ophthalmoplegia both eyes, Magnetic Resonance Imaging(MRI) showed aneurysms in both the CS. Digital subtraction angiography confirmed the same. Case III Five year old boy had Left eye PSC, improved completely on systemic antibiotics. Two weeks later developed complete third nerve palsy. Imaging revealed lobulated lesion in left CS. Result: Case I had marked improvement in third nerve palsy following parent artery occlusion using coils. In Case II ophthalmoplegia on right side improved completely with antibiotics, but partial improvement on left side. Endovascular procedure is planned for left ICA aneurysm. Case III is on systemic antibiotics for three weeks without any improvement. Conclusion: MA of ICS of ICA may present as CS syndrome with features of underlying infection. It results from direct invasion of vascular wall from the nearby infection such as CS thrombophlebitis.