



Title: POSTPARTUM CEREBRAL VENOUS SINUS THROMBOSIS: A RARE CASE

INTRODUCTION

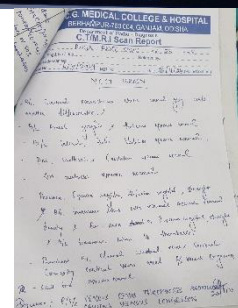
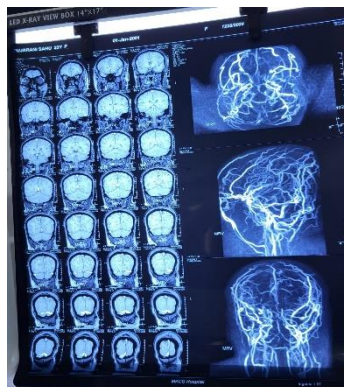
Cerebral venous thrombosis (CVT) is a rare illness in pregnancy and the postpartum period accounting for 0.5% to 1% of all cases of stroke worldwide. Cerebral venous sinus thrombosis (CVST) patients frequently present with headaches, seizures, and may be associated with focal neurological deficit manifestation. CVST is potentially fatal and early diagnoses and the management is crucial.

OBJECTIVES

To review the on the etiology, risk factors, diagnosis and treatment of postpartum cerebral venous sinus thrombosis and present a clinical case.

CASE REPORT

A 35 Yr old female para 2 living 2 presented to the MkCG labor room on her postpartum day 5 having severe headaches with confusion. Headaches were excruciating in nature and did not relieve despite the analgesics medications. On admission, her level of consciousness decreased with left side weakness. Bp was normal on admission with other vitals normal. She had no history of any seizures or any other CNS abnormalities. **INVESTIGATIONS** On labor room admission, Bp - 130/84mmHgPr- 84/minSpo2 - 94% with ra Chest cvs-nad An urgent ncct brain was advised and done and Ncct brain showed venous sinus thrombosis causing venous congestion.



DISCUSSION

CVT is an uncommon illness that has a critical outcome. A rate of 0.018% to 0.2% has been reported for developing venous thrombosis during pregnancy and in puerperium. CVT has known risk factors and causes, which are postpartum, venous thromboembolism, contraceptives medications, estrogen therapies, thrombophilia and hypercoagulability which is part from local infections and inflammatory conditions. although CVST is three times more common in women of reproductive age than in men, probably due to the use of oral contraceptives. In this case, CVST seemed to be without other risk factors, except postpartum and the patient had a COVID-19 negative status. CVST diagnosis clinically is challenging. Specially, distinguishing between CVST and postpartum eclampsia can be very difficult due to the similar clinical presentations and lack of experience or lack of awareness about rare-serious disorders, so it is crucial to diagnose it urgently and to manage it correctly.

CONCLUSION

The case highlights the importance of a broad differential diagnosis in females experiencing severe headaches on postpartum period. Postpartum cvt diagnosis is still a big challenge. It is important to evaluate postpartum headache as it is the most neglected clinical sign and in the meantime is the chief complaint in cvt. It is important to differentiate this condition from other associated postpartum CNS disorders like eclampsia and postpartum cerebral angiopathy.

REFERENCES

1. Stam J. Thrombosis of the cerebral veins and sinuses. *N Engl J Med*. 2005;352(17):1791–1798. doi: 10.1056/NEJMra2106545
2. McCaulley JA, Pates JA. Postpartum cerebral venous thrombosis. *Obstet Gynecol*. 2011;118(2 Pt 2):423–425. doi: 10.1097/AOG.0b013e318212fca2