26 y/o female History withheld

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### **Globus Pallidus Infarcts**



Globus Pallidus Infarcts secondary to Anoxic Brain Injury Patient had H/O depression s/p suicide attempt (asphyxiation due to hanging)





Relative hyperintensity of globus pallidus is seen on FLAIR





DWI demonstrates diffusion restriction of globus pallidus, due to infarction



#### Physiologic Effects of Hanging Injury

External compression of neck leads to:

- Autonomic reflex activity
  - Pressure on carotid areas/vagal sheath → vascular resistance and cardiac output → arrest

changes in systemic potential cardiac

- Airway compromise
  - Tongue and epiglottis move upwards → upper airway obstruction
- Occlusion of blood flow
  - Direct compression of vessels (carotid arteries, jugular veins)

These can all contribute to hypoxic-ischemic brain injury.



# Hypoxic Ischemic Brain Injury

- Vascular Anatomy:
  - The basal ganglia is supplied by the lenticulostriate branches of the middle cerebral artery. These smaller, terminal vessels are more susceptible to ischemia.
- Imaging Findings:
  - There is restricted diffusion in the bilateral basal ganglia. The bilateral findings are suggestive of global hypoxia/hypoperfusion of the brain.



# Hypoxic Ischemic Brain Injury

**Etiologies:** 

- Cardiac arrest
- Vascular catastrophe
- Carbon monoxide poisoning
- Head trauma

Goals of Neurologic Treatment:

- Maintain cerebral oxygenation
- Prevent increased intracranial pressure
  - Hyperventilation
  - Osmotic diuresis—mannitol
- Decrease cerebral metabolic rate
  - Hypothermia
  - Prevent seizure activity



### References

- McHugh, T. P., & Stout, M. (1983). Nearhanging injury. Annals of emergency medicine, 12(12), 774-776.
- Kwok S. Tarakji A. Globus Pallidus Infarcts. Radiology Online. (2020)

