77-year-old male with a history of hypertension and depression presenting with cognitive decline and decreased concentration

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T2 FS







UCONN HEALTH RADIOLOGY





Communicating Hydrocephalus



T2



Width of the frontal horns of the lateral ventricles = 92 mm

Width of internal diameter of the skull = 153 mm

Evans index = 0.60

Normal = 0.2 - 0.25



Dilation of the lateral ventricles

T2 FS

Saccular aneurysm of the right ICA incidentally noted

Dilation of the lateral and 3rd ventricles

Series Description - reso





RADIOLOGY

Communicating Hydrocephalus

Flow of CSF is blocked after it exits the ventricles; termed "communicating because CSF can still flow between ventricles which remain open

- Diagnosis
 - Evan's index assesses for ventriculomegaly as a ratio of the maximum width of the frontal horns of the lateral ventricles and the maximal internal diameter of the skull being greater than 0.3
- Epidemiology
 - Global prevalence is 175 per 100,000 in elderly individuals, higher prevalence in Africa and South America
- Symptoms
 - Urinary incontinence, gait dysfunction, and cognitive impairment like executive function, concentration, apathy, and psychomotor slowing.
- Management
 - VP shunt to drain CSF from lateral ventricle into peritoneal cavity, ventriculoatrial shunt if patient has abdominal abnormalities such as peritonitis or morbid obesity, lumboperitoneal shunt in cases of pseudotumor cerebri
 - Alternatives to shunting: Endoscopic third ventriculostomy to permit CSF in the 3rd ventricle to enter the prepontine basal cistern (used in cases of aqueductal stenosis), external ventricular drain placement in emergent acute hydrocephalus, lumbar puncture in posthemorrhagic or postmeningitic hydrocephalus

RADIOLOGY

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