



Communicating Hydrocephalus in Wegener's Granulomatosis

Katati MJ*, Ortiz I and dela Sabiocruz Sabido J

Servicio de Neurocirugía, Hospital Virgen de las nieves, Granada, Spain

Introduction

Wegener's granulomatosis (WG) is a systemic disease characterized by inflammatory changes of small and medium blood vessels were initially described by Wegener in 1936. The nervous system may be involved in up to 33% of cases [1], with the peripheral nervous system being most commonly affected so far less hydrocephalus [2].

Clinical Case

We describe an unusual case of a 53-year-old patient diagnosed with pulmonary biopsy of WG disease with pulmonary involvement and sinusitis in 2013.

He was admitted to emergency for a sub-acute symptoms of disorientation, instability in the last two months.

Cranial MRI demonstrated diffuse leptomeningeal thickening with increased tetra-ventricular size.

The patient underwent lumbar puncture (LP) with an opening pressure of 21 mmHg, both biochemistry and cultures CSF were normal's.

CSF evacuation of 30 ml makes improvement of the patient's symptoms, so a low-aperture ventriculoperitoneal shunt (5/35 Gav[®]) was implanted.

Conclusion

Adult conical hydrocephalus should be included in the differential diagnosis in patients with WG produced by leptomeningeal thickness.

References

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*Correspondence:

Majed J Katati, Servicio de Neurocirugía, Hospital Virgen de las nieves, Granada, Spain;
E-mail: mjkatati@hotmail.com

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