A Tangled Web

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Keywords

arteriovenous malformation, dysphagia, seizures

Case

A 65-year-old woman presented with 1 year of slowly progressive dysphagia. She had a history of right frontoparietal arteriovenous malformation (AVM) treated with embolization and radiation 15 years previously, with residual left hemiparesis and well-controlled seizures.

Imaging revealed progression of her AVM with dilated vessels in the bilateral frontal, parietal, temporal, and occipital lobes as well as the cerebellum bilaterally. Additionally, dilated vessels were seen in the brain stem (Figure 1).

Swallowing evaluation under fluoroscopy demonstrated oropharyngeal dysphagia with a delayed pharyngeal swallow reflex and reduced laryngeal elevation consistent with bulbar dysphagia,¹ attributed to progressive medullary involvement of the AVM.

Declaration of Conflicting Interests

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Reference

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Figure 1. Brain stem and global involvement of AVM. Brain magnetic resonance imaging (MRI) from 10 years prior to presentation (A-C) and current (D-I). Gadolinium-enhanced T1-weighted images (A-F) show a diffuse arteriovenous malformation with interval enlargement of feeding and draining vessels throughout the cerebral hemispheres and brain stem. Parenchymal displacement and atrophy, particularly in the brain stem, is demonstrated on T2-weighted images (G-I).