Subacute post-traumatic diffuse axonal injury presenting on MRI as multiple enhancing nodules

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Clinical history

A 33-year-old man complained of left leg weakness and numbness following a motor vehicle collision two weeks earlier. Brain MRI 19 days after the accident revealed minimal cortical hemorrhages in the right temporal and frontal lobes. Post-gadolinium study showed at least 11 small nodular enhancements (Fig. 1). This patient was discharged from hospital eight days later, and had no neurological complaint after a 2-year follow-up.

Discussion

Diffuse axonal injury (DAI) constitutes one of the major primary intra-axial lesions in patients with brain injury and is associated with significant morbidity. Hemorrhagic and non-hemorrhagic DAI lesions present as a variety of MRI signals on T1weighted, T2-weighted, and FLAIR images, and, at greater sensitivity, on T2* gradient-echo images (1). Nodular enhancements as in our case has seldom been reported. We postulate that they are due to blood-brain-barrier breakdown around subacute small hematomas and degenerated white matter tracts. The differential diagnosis includes tumoral and inflammatory lesions. Tuberculomas, for instance, can present as hypointense lesions on T2-weighted images, and as a central isointensity surrounded by a slightly hyperintense rim internal to a hypointense rim on T1-weighted images, with rim enhancement after gadolinium injection (2). In our case, however, no nodules were detected on pre-contrast T1weighted images. Moreover, in addition to other data, the spontaneously favorable clinical outcome allowed to exclude an inflammatory or neoplastic process.

REFERENCES

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Fig. 1. — MRI (A) Pre-contrast T1-weighted image showing no obvious brain lesions. (B) T2* gradient-echo images with several dark dots in sub-cortical white matter, indicating petechial hemorrhages (arrows). (C, D) Post-gadolinium T1weighted images revealing many enhancing nodules (arrows).

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