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Sudden Coma due to Simultaneous Basilar Artery and Bilateral Carotid Artery Occlusion

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A 42-year-old woman with atrial fibrillation suddenly developed a comatose mental state. Perfusion CT performed after recombinant tissue plasminogen activator administration showed

extensive perfusion defects in the bilateral hemispheres and brainstem (fig. 1). CT angiogram also showed tapered occlusion of both internal carotid arteries and occlusion of the mid-basilar artery (fig. 2).

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Fig. 1. Perfusion CT scan showing extensive perfusion defects in the bilateral carotid territories and whole brainstem (arrow). Extensive deficits of cerebral blood flow (CBF) and cerebral blood flow volume (CBV) represent a large ischemic core in the bilateral hemispheres and brainstem.

Fig. 2. CT angiogram showing tapered occlusions of both internal carotid arteries and occlusion of the basilar artery. CT angiogram source images show the arterial occlusion (dotted white arrows) (a) and tapered occlusion of the bilateral internal carotid arteries (arrows) (b). Sagittal image of the CT angiogram shows the occlusion of the basilar artery in the pontine level (dotted arrows) (c).