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Magnetic resonance imaging abnormalities in idiopathic intracranial hypertension: a study of 40 female patients

Ana Carolina Montouro Storarri, Annelise Akemi Higa Lee, Bruno Pissolati Mattos Gonzaga, Lorrane Campidelli Arthuzo, Luis Armando Sawada, Beatriz Marques dos Santos, Thassia Cavalcante de Oliveira Moraes Marques, Renan Barros Domingues

Irmandade Santa Casa de Misericórdia de Sao Paulo, Sao Paulo, Brazil

Introduction

Idiopathic intracranial hypertension (IIH) is a condition characterized by increased intracranial pressure with no detectable cause. MRI is an importat tool in diagnosing and understanding IIH, providing insights into the anatomical changes associated with this condition. This study aims to describe the MRI findings in a cohort of 40 female patients diagnosed with IIH.

Objective

To evaluate the frequency and type of abnormalities detected on MRI in female patients with IIH.

Methods

We conducted a retrospective analysis of MRI findings in 40 female patients diagnosed with IIH. The average age of the patients was 33.9 years (standard deviation of 11.5 years). The MRI abnormalities evaluated included sella turcica deformities, optic nerve abnormalities (including optic nerve tortuosity, distended optic nerve sheath, and optic nerve head protrusion), globe flattening, and transverse sinus stenosis. The data were analyzed to determine the prevalence of each abnormality. All the patients were evaluated at the Headache Outpatient Clinic of Santa Casa de Misericórdia de São Paulo.

Results

The analysis revealed the following abnormalities:

- Sella turcica deformities in 14 patients (35%)
- Optic nerve abnormalities in 35 patients (87.5%)
- Globe flattening in 8 patients (20%)
- Transverse sinus stenosis in 14 patients (35%)

Conclusion

Our study demonstrates that optic nerve abnormalities are the most frequent MRI finding in female patients with IIH, observed in 87.5% of cases. This is a higher frequency compared to sella turcica deformities, which were present in 35% of the patients. These findings differ from other series in the literature, where sella turcica abnormalities are often reported as more common. This highlights the variability in anatomical manifestations of IIH and underscores the importance of comprehensive MRI evaluation in these patients.