We collected random cases of ischemic stroke.


### Aim

To illustrate the spectrum of neuroimaging findings of ischemic-infarction stroke.

### Method

- We collected random cases of ischemic stroke
- Clinical correlation and imaging findings were illustrated in this essay

### Discussion

NECT remains the first neuroimaging assessment in acute stroke to confirm the diagnosis, to exclude haemorrhage and stroke-mimics due to its speed and availability.

MRI provides improved anatomical detail over CT and defines early ischemic change with greater conspicuity. DWI (diffusion-weighted) sequence has emerged as the most sensitive and specific imaging finding for acute ischaemia.

Imaging of cerebral vasculature is an important aspect and determination of affected vessel is paramount for patient management which may require carotid endarterectomy, angioplasty or stenting.

Multimodality imaging and delineation of penumbra is important in management strategies and will be pivotal in extension of potential therapeutic windows.

### Magnetic Resonance Imaging (MRI)

Case 7: A 35 years old lady with crescendo stroke. Risk factors were smoker and diabetes mellitus.

MRI showed multifocal cerebral infarction in the left MCA territory (A). DSA (B) showed a short segment stenosis of left middle cerebral artery (arrow).

### Angiography

- **Case 8:** A 60 years old man with hypertension and chronic smoking complained of headache, dizziness and diplopia for few days.

### Other cases

- **Case 10:** A 16 years old man with acute liver failure and hypertensive episode. MRI showed acute symmetrical watershed infarction.
- **Case 11:** An 18 years old man, known case of vasculitis with renal artery stenosis. He presented with behavioural changes.
- **Case 12:** A 63 years old lady, day 8 post laparotomy for liver abscess with right internumal ophthalmoplegia.
- **Case 13:** A 66 years old man with isolated third nerve palsy. MRI showed infarct in midbrain.
- **Case 14:** A 54 years old man, complaining of right sided visual defect. CT Brain showed no focal lesion. MRI FLAIR (A) and post contrast image (B) showed subacute infarction (arrow).