



Figure. Left: Doppler flow in CCA, ECA, ICA, and MCA. Middle: Color duplex flow imaging of right CCA, ECA, ICA, and MCA during systole and diastole. Right: Red and blue arrows correspond to systolic and diastolic flows respectively. IJV = internal jugular vein. (See also videos I, II, and III.)

VIDEO Flashing carotids in aortic valve disease

Alexandre Croquelois, MD; Julien Boguslavsky, MD; and Gerald Devuyst, MD, Lausanne, Switzerland

A 71-year-old man with a history of severe aortic regurgitation was admitted to the cardiology department after dyspnea aggravation; he was free of neurologic symptoms. Results of extracranial and intracranial ultrasonography demonstrated diastolic reversal flow in common (CCA), external (ECA) (early diastole), and internal (ICA) (late diastole) carotid arteries and very low

Address correspondence and reprint requests to Dr. Gerald Devuyst, Neurology Department, Centre Hospitalier Universitaire Vaudois, Rue du Bugnon 46, 1011 Lausanne, Switzerland; e-mail: gerald.devuyst@chuv.hospvd.ch

anterograde end-diastolic flow in ipsilateral middle cerebral artery (MCA) (figure). The observed pattern demonstrates continuous brain perfusion (compensatory vasodilation) despite precerebral diastolic reversal flow. Two former studies described bilateral holodiastolic reversal flow in CCA,^{1,2} but no description of ECA, ICA, and MCA flow in that clinical entity was available at that time.

Copyright © 2005 by AAN Enterprises, Inc.

1. Malaterre HR, Kallee K, Giusiano B, Letallec L, Djiane P. Holodiastolic reversal flow in the common carotid: another indicator of the severity of aortic regurgitation. *Int J Cardiovasc Imaging* 2001;17:333-337.
2. Glenny P, Altamirano C. Bilateral holodiastolic reversal flow in common carotid arteries: a sign of severe aortic regurgitation. *Echocardiography* 2004;21:210.

Neurology[®]

Flashing carotids in aortic valve disease

Alexandre Croquelois, Julien Bogousslavsky and Gerald Devuyst

Neurology 2005;65;E2

DOI 10.1212/01.WNL.0000160305.07538.9D

This information is current as of July 25, 2005

Updated Information & Services	including high resolution figures, can be found at: http://n.neurology.org/content/65/2/E2.full
Supplementary Material	Supplementary material can be found at: http://n.neurology.org/content/suppl/2005/07/24/65.2.E2.DC1 http://n.neurology.org/content/suppl/2007/04/02/65.2.E2.DC2
References	This article cites 2 articles, 0 of which you can access for free at: http://n.neurology.org/content/65/2/E2.full#ref-list-1
Permissions & Licensing	Information about reproducing this article in parts (figures, tables) or in its entirety can be found online at: http://www.neurology.org/about/about_the_journal#permissions
Reprints	Information about ordering reprints can be found online: http://n.neurology.org/subscribers/advertise

Neurology® is the official journal of the American Academy of Neurology. Published continuously since 1951, it is now a weekly with 48 issues per year. Copyright . All rights reserved. Print ISSN: 0028-3878. Online ISSN: 1526-632X.

