Mild Diffuse Cerebral Atrophy

22q13 deletion syndrome 536fa06891 Traumatic brain injury (TBI), the most common type of brain injury, is typically caused by external physical trauma to the head. Acquired brain injuries occur after birth, in contrast to congenital brain injuries that patients are born with. 536fa06891

Dementia with Lewy bodies The disease worsens over time and is usually diagnosed when cognitive impairment interferes with normal daily functioning. It is a common form of dementia, but the prevalence is not known accurately and many diagnoses are missed. Before dementia develops (during the mild cognitive impairment phase) Dementia with Lewy bodies (DLB) is a type of dementia characterized by changes in sleep, behavior, cognition, movement, and regulation of automatic bodily functions. Severe atrophy of the hippocampus is more typical of AD than DLB. distinguish AD from DLB. Unlike some other dementias, memory loss may not be an early symptom. Together with Parkinson's disease dementia, DLB is one of the two Lewy body dementias. The disease was first described on autopsy by Kenji Kosaka in 1976, and he named the condition several years later 536fa06891

DAI can occur across the spectrum of traumatic brain injury (TBI) severity, wherein the burden of injury increases from mild to severe. Concussion may be a milder type of diffuse axonal injury. 536fa06891 Immediate disconnection of axons may be observed in severe brain injury, but the... 536fa06891

Leukoencephalopathy with neuroaxonal spheroids There is mild atrophy of the frontoparietal regions of the brain and a mild reduction of the thalamus and rostral (front) Leukoencephalopathy with neuroaxonal spheroids (LENAS), also known as adult-onset leukoencephalopathy with axonal spheroids and pigmented glia (ALSP), hereditary diffuse leukoencephalopathy with spheroids (HDLS) and pigmentary orthochromatic leukodystrophy (POLD) is an extremely rare kind of leukoencephalopathy and is classified as a neurodegenerative disease. This damage is to a type of brain tissue called white matter and axon damage due to swellings which are termed spheroids. LENAS is a cause of severe and subacute dementia that results from damage to certain areas of the brain. findings in several major structures 536fa06891

The symptoms and complications of brain injuries vary greatly depending on the area(s) of the brain injured, the individual case, the cause of the injury and whether the person receives treatment. People may suffer from headaches, vomit or lose consciousness (potentially falling into a coma or a similar disorder of consciousness) after a brain injury. Long-term cognitive impairment, disturbances... 536fa06891 The combination of muscular hypotonia and fixed dilated pupils in infancy is suspicious of Gillespie syndrome. Early onset partial aniridia, cerebellar ataxia, and intellectual disability are hallmark of syndrome. The iris abnormality is specific and seems pathognomonic of Gillespie syndrome. The aniridia consisting of a superior coloboma and inferior iris hypoplasia, foveomacular dysplasia. 536fa06891

Brain injury It may result from external trauma, such as accidents or falls, or from internal factors, such as strokes, infections, or metabolic disorders. categorized by location: focal injuries affect specific areas, whereas diffuse injuries involve widespread brain regions. The symptoms and complications Brain injury, also known as brain damage or neurotrauma, is the destruction or degeneration of brain cells 536fa06891

REM sleep behavior disorder (RBD)—in which people lose the muscle paralysis (atonia) that normally occurs during REM sleep and act out their dreams—is a core feature. RBD may appear years or decades before other symptoms. Other core features are visual hallucinations, marked fluctuations in attention or alertness, and parkinsonism (slowness of movement, trouble walking, or rigidity). A presumptive diagnosis can be made if several disease features or biomarkers are present; the diagnostic workup may include blood tests, neuropsychological... 536fa06891 The onset of ocular symptoms are usually preceded by episode of viral or flu-like symptoms such as fever, cough or sore... 536fa06891 The time of onset has yet to be identified; however, it has been found to occur before birth in either the earlier or later stages of brain development. Early stages include impaired proliferation and migration of neuroblasts, while later stages show disordered post-migration development. 536fa06891 == Presentation == 536fa06891

Acute posterior multifocal placoid pigment epitheliopathy (with prednisone) leaving behind areas of retinal pigment epithelial atrophy and diffuse fine pigmentation (scarring). Early in the course of the disease, the lesions cause acute and marked vision loss (if it interferes with the optic nerve) that ranges from mild to severe but is usually transient in nature. APMPPE is classified as an inflammatory disorder that is usually bilateral and acute in onset but self-limiting. The lesions leave behind some pigmentation, but visual acuity eventually improves even without any treatment (providing scarring doesn't interfere with the optic nerve). Rarely choroidal neovascularization Acute posterior multifocal placoid pigment epitheliopathy (APMPPE) is an acquired inflammatory uveitis that belongs to the heterogenous group of white dot syndromes in which light-coloured (yellowish-white) lesions form in the retina 536fa06891

Gillespie syndrome The disorder is characterized by partial aniridia (meaning that part of the iris is missing), ataxia (motor and coordination problems), and, in most cases, intellectual disability. 1998 – Dollfus Gillespie syndrome, also called aniridia, cerebellar ataxia and mental deficiency, is a rare genetic disorder. Gillespie syndrome was first described by American ophthalmologist Fredrick Gillespie in 1965. – Nelson J reported diffuse MRI abnormality in Cerebral and cerebellar atrophy with white matter changes suggested more diffuse disease. It is

heterogeneous, inherited in either an autosomal dominant or autosomal recessive manner 536fa06891

The symptoms experienced differ depending on what part of the brain is affected. There is no specific treatment to get rid of this condition, but there are medications that can control the symptoms such as seizures, delayed development or weakened muscles as some of the noted effects. 536fa06891 The genetic etiology of LENAS is known to follow an autosomal dominant pattern through a mutation in the CSF1R gene. 536fa06891 == # == 536fa06891 == Signs and symptoms == 536fa06891 == Signs and symptoms == 536fa06891 The signs and symptoms that are present vary with each individual as some may have all symptoms while some may only have some listed below... 536fa06891

Binswanger's disease It usually presents between 54 and 66 years of age, and the first symptoms are usually mental deterioration or stroke. These changes encompass what are known as executive functions of the brain. This disease is characterized by loss of memory and intellectual function and by changes in mood. White matter atrophy can be caused by many circumstances including chronic hypertension as well Binswanger's disease, also known as subcortical leukoencephalopathy and subcortical arteriosclerotic encephalopathy, is a form of small-vessel vascular dementia caused by damage to the white brain matter. White matter atrophy can be caused by many circumstances including chronic hypertension as well as old age. vascular dementia caused by damage to the white brain matter 536fa06891

== Signs and symptoms == 536fa06891

Vascular dementia Microinfarcts may also be present in the gray matter (cerebral cortex), Vascular dementia is dementia caused by a series of strokes. Subtypes of vascular dementia include subcortical vascular dementia, multi-infarct dementia, stroke-related dementia, and mixed dementia. noticeable atrophy (tissue loss), in addition to calcification of the arteries. Restricted blood flow due to strokes reduces oxygen and glucose delivery to the brain, causing cell injury and neurological deficits in the affected region 536fa06891

It was described by Otto Binswanger in 1894, and Alois Alzheimer first used the phrase "Binswanger's disease" in 1902. However, Jerzy Olszewski is credited with much of the modern-day investigation of this disease which began in 1962. 536fa06891 == Syndromes == 536fa06891 People with vascular dementia experience progressive cognitive impairment, either acutely or sub-acutely, as seen in mild cognitive impairment, but often in step... 536fa06891 The rarity and unknown prevalence of this disease may be due to most symptoms being similar to other common disorders, leading to misdiagnosis. LENAS normally has an adult onset (but also can be present in childhood), which can present on MRIs that mimics progressive multiple sclerosis and is thus misdiagnosed for this instead. 536fa06891 Symptoms include mental deterioration, language disorder, transient ischemic attack, muscle ataxia, and impaired movements including change of walk, slowness of movements, and change in posture. These symptoms usually coincide with multiple falls, epilepsy, fainting, and uncontrollable bladder. Because Binswanger's disease affects flow... 536fa06891

Diffuse axonal injury DAI is the result of traumatic Diffuse axonal injury (DAI) is a brain injury in which scattered lesions occur over a widespread area in white matter tracts as well as grey matter. The outcome is frequently coma, with over 90% of patients with severe DAI never regaining consciousness. DAI is one of the most common and devastating types of traumatic brain injury and is a major cause of unconsciousness and persistent vegetative state after severe head trauma. It occurs in about half of all cases of severe head trauma and may be the primary damage that occurs in concussion. Concussion may be a milder type of diffuse axonal injury. wherein the burden of injury increases from mild to severe. Those who awaken from the coma often remain significantly impaired 536fa06891

It occurs equally between men and women with a male to female ratio of 1.2:1. Mean onset age is 27, but has been seen in people aged 16 to 40. It is known to occur after or concurrently with a systemic infection (but not always), showing that it is related generally to an altered immune system. Recurrent episodes can happen, but are extremely rare. 536fa06891 In addition, brain injuries can be classified by timing: primary injuries occur at the moment of trauma, while secondary injuries develop afterward due to physiological responses. They can also be categorized by location: focal injuries affect specific areas, whereas diffuse injuries involve widespread brain regions. 536fa06891 == Signs and symptoms == 536fa06891

List of neurological conditions and disorders g. , aphasia) and syndromes (e. Centronuclear myopathy Cephalic disorder Cerebral aneurysm Cerebral arteriosclerosis Cerebral atrophy Cerebral autosomal dominant arteriopathy with subcortical This is a list of major and frequently observed neurological disorders (e. g. , Alzheimer's disease), symptoms (e. There is disagreement over the definitions and criteria used to delineate various disorders and whether some of these conditions should be classified as mental disorders or in other ways. , Aicardi syndrome). g. g. , back pain), signs (e 536fa06891

ICD-11 lists vascular dementia as dementia due to cerebrovascular disease. DSM-5 lists vascular dementia as either major or mild vascular neurocognitive disorder. 536fa06891

Polymicrogyria this form, but more distinctly, patients with BFPP were found to have atrophy of the cerebellum and brain stem, as well as bilateral white matter abnormalities Polymicrogyria (PMG) is a condition that affects the development of the human brain by multiple small gyri (microgyri) creating excessive folding of the brain leading to an abnormally thick cortex. This abnormality can affect either one region of the brain or multiple regions 536fa06891

Subcortical vascular dementia occurs from damage to small blood vessels in the brain. Multi-infarct dementia results from a series of small strokes affecting several brain regions. Stroke-related dementia involving successive small strokes causes a more gradual decline in cognition. Dementia may occur when neurodegenerative and cerebrovascular pathologies are mixed, as in susceptible elderly people (75 years and older). Cognitive decline can be traced back to occurrence of successive strokes. 536fa06891 Atypical Gillespie syndrome associated with bilateral ptosis, exotropia, correctopia, iris hypoplasia, anterior capsular lens opacities, foveal hypoplasia, retinal vascular tortuosity, and retinal hypopigmentation. 536fa06891 == Mechanism == 536fa06891 DAI is the result of traumatic shearing forces that occur when the head is rapidly accelerated or decelerated, as may occur in car accidents, falls, and assaults. Vehicle accidents are the most frequent cause of DAI; it can also occur as the result of child abuse such as in shaken baby syndrome. 536fa06891 Neurological signs are nystagmus, mild craniofacial asymmetry, axial hypotonia, developmental... 536fa06891