DESCRIPTION

A 57-year-old marathon runner presented with orthostatic dizziness and headache, which appeared just after running a few kilometres and had persisted for 7 days. No other neurological abnormalities were found. On lumbar puncture, the initial pressure was zero. A cranial MRI with gadolinium showed a marked enhancement of the dura mater (figure 1, arrows). MR cisternography and holocord MR myelography revealed a cerebrospinal fluid (CSF) leak at the right C3 and C4 spinal root sleeves (figure 2, arrows). The patient was confined to complete bed rest under the administration of necessary intravenous fluids for 14 days. On the 14th hospital day, orthostatic symptoms had resolved and MR myelography demonstrated the disappearance of the CSF leak (figure 3). He resumed occasional running 6 months later in the absence of any recurrence of the symptoms and a follow-up cranial MRI with gadolinium confirmed the disappearance of dura mater enhancement (figure 4).

CSF leak syndrome is usually caused by various degrees of trauma. The strain of running had not been excessive for this individual, but the mode of onset suggested that running must have had some influence on the initial appearance of this disorder. Although blood patching of the dura mater is focused on as a method of treatment for this condition, in some cases recovery is seen after a certain number of days of complete bed rest. If accurate

An episode of cerebrospinal fluid leak syndrome involving a marathon runner

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Figure 1  Gadolinium MRI on admission.

Figure 2  MR myelography (right anterior oblique) on admission.
and early diagnosis of this syndrome can be made, a more conservative method is sometimes adequate.\textsuperscript{2}

Competing interests None.

REFERENCES


Figure 3  MR myelography (right anterior oblique) before discharge.

Figure 4  Gadolinium MRI after clinical resolution.

Patient consent Obtained.

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