CASE REPORT

Giant Curved Calcified Basilar Artery Causing Headache: A Case Report

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ABSTRACT

The aim of this paper is to share a rare finding in a geriatric patient. The patent has a chronic headache for many years with no explanations for his condition. Anatomical variations in the circle of Willis are common, but anatomical variations that are causing pain are uncommon findings. This case report will explain these case findings on computed tomography and magnetic resonance imaging scans.

Key words: Basilar artery, intracranial arterial calcification, anatomical variations, computed tomography, magnetic resonance imaging

INTRODUCTION

Basilar artery is located anterior to the pons in the pre-pontine groove. Any abnormality could cause harm to the brainstem and posterior cerebral arteries territories. This case will provide a new finding related to this topic.

CASE REPORT

A 86-year-old male patient started to have chronic headaches in 2013. A computed tomography (CT) scan was done for him that showed a calcified curved basilar artery, but due to his age (atherosclerosis changes in arteries), it was considered normal [Figure 1]. The basilar artery is not in the normal location in the prepontine groove, but it crosses from the left side to the right side of the pons [Figure 2]. In 2018, he went to the hospital for another head CT scan, and the same normal findings were found, but it was not reported [Figure 2]. In 2020, the patient came to the hospital with the same claims, and a CT scan was done, which revealed the same findings [Figures 3-5]. A magnetic resonance imaging (MRI) scan for the brain was requested, which revealed a giant curved calcified basilar artery [Figures 6-9]. The artery cross from the left side of the pons to the right side then passes anteriorly to the midbrain to cross to the left side of the brain to join the circle of Willis in a rare fashion. The calcification is really giant that extend from the vertebral arteries until the basilar artery joins the circle of Willis. The entire length of the basilar artery is calcified. When a CT scan performed, it was done without any contrast media, but the scan appeared as if the patient was injected with contrast media intravenously. The artery does not make any bifurcation, but the artery joins the circle of Willis on the left side [Figures 3 and 10].

DISCUSSION

It is well known in medical practice that there are cases such as trigeminal neuralgia and glossopharyngeal neuralgia, but a calcified artery with anatomical variations (curved and not in normal location) that can cause chronic headache is uncommon. The calcification maybe is a result of atherosclerosis and the aging process. The curvature of the basilar artery could be caused by calcification which created the anatomical variation (curved artery out of the normal

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Figure 1: Computed tomography scan (in 2013) for the brain shows curved basilar artery (brain window)

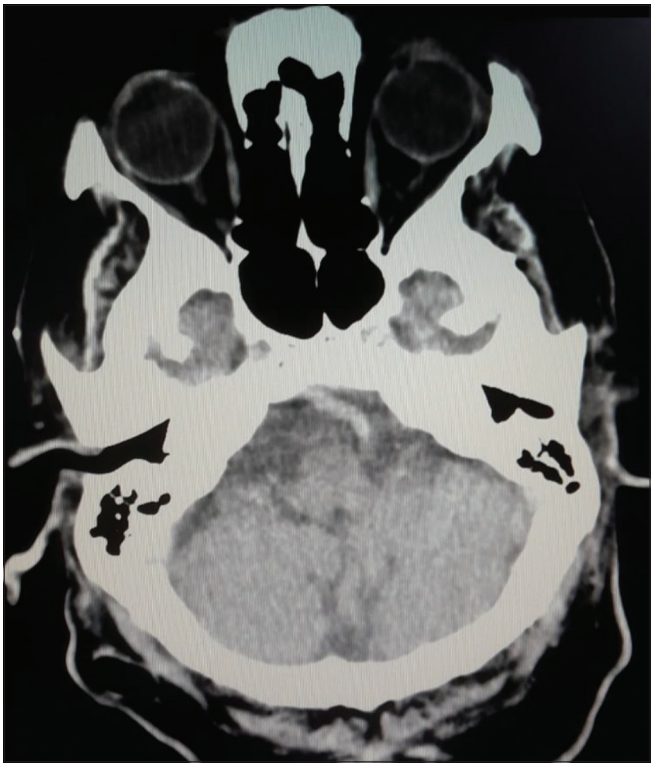

Figure 3: Computed tomography scan (in 2018) for the brain shows the basilar artery join the circle of Willis on the left side without making a bifurcation (brain window).

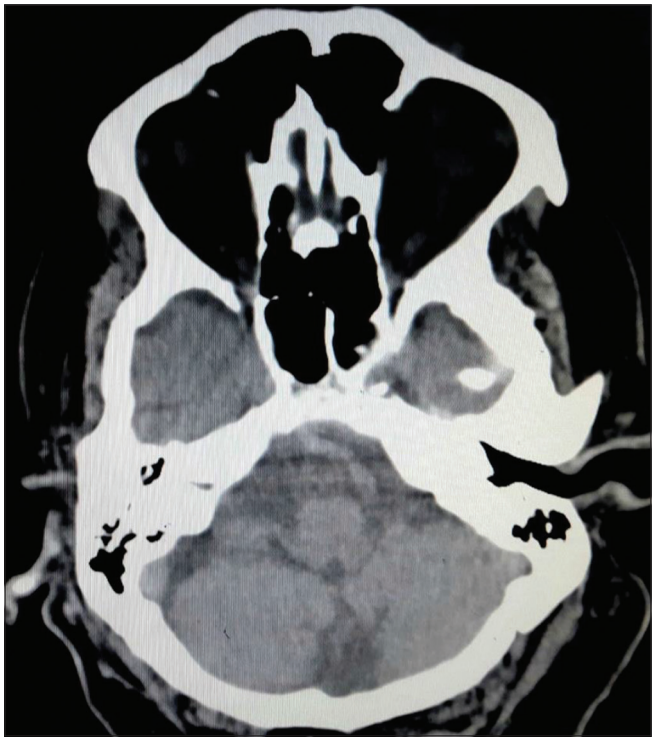

Figure 2: Computed tomography scan (in 2018) for the brain which shows a calcified basilar artery (brain window). The scan was affected by beam hardening artefact

Figure 4: Computed tomography scan (in 2020) for the brain which shows the calcified basilar artery (brain window)

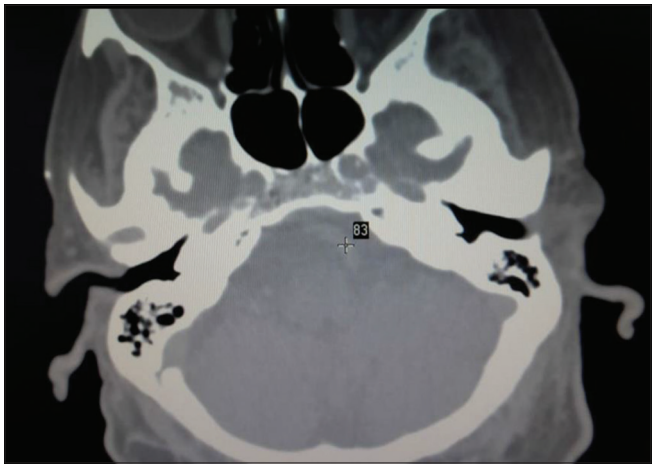

Figure 5: Computed tomography scan (in 2020) for the brain which shows the calcified basilar artery (Hounsfield Unit = 83 and bone window)

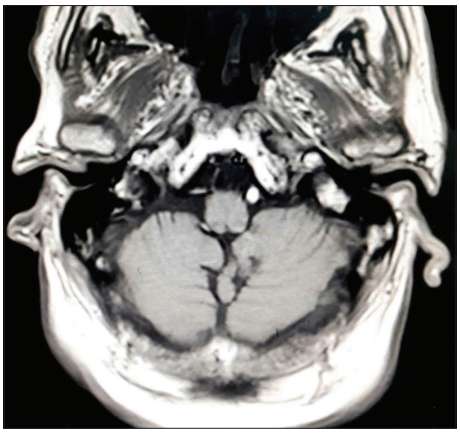

Figure 6: Magnetic resonance imaging T1 scan (in 2020) for the brain which shows the beginning and the diameter of the basilar artery at the pontomedullary junction

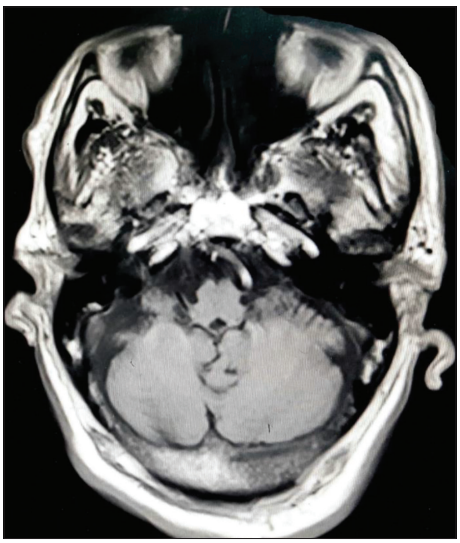

Figure 7: Magnetic resonance imaging T1 scan (in 2020) for the brain which shows the basilar artery out of the prepontine groove and crossing from the left side to the right side

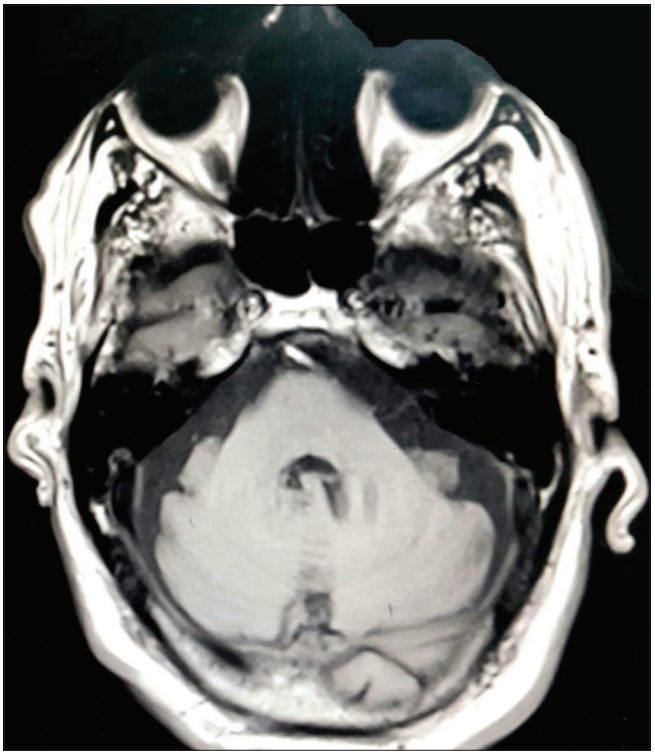

Figure 8: Magnetic resonance imaging T1 scan (in 2020) for the brain which shows the cross of the basilar artery from the left side to the right side

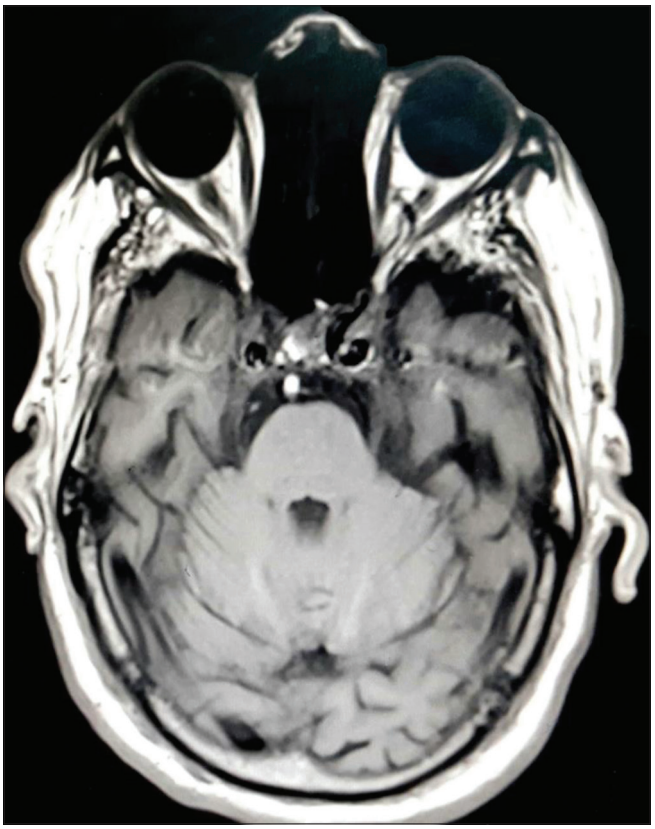

Figure 9: Magnetic resonance imaging T1 scan (in 2020) for the brain which shows the basilar artery crossing to the center

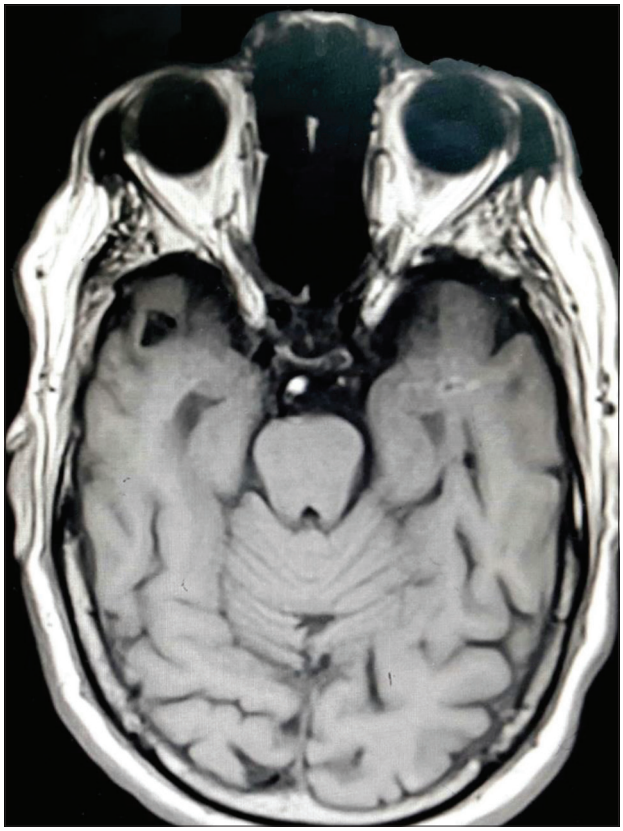

Figure 10: Magnetic resonance imaging T1 scan (in 2020) for the brain which shows the basilar artery crossing to the left side again to join the circle of Willis

location). There are some published papers that stated that anatomical variations can be caused by the aging process.[1] The curved artery is an anatomical variation that occurs in many arteries such as the carotids or any part of the circle of Willis.[1,2] The cutoff value of Hounsfield Units (HU) in a hyperdense basilar artery is 46.5 HU.[3] Some suggest that the HU for a calcified artery is above 130.[4]

CONCLUSION

The calcified curved basilar artery could be the cause of the chronic headache. This anatomical variation is caused by the calcification and the aging process. There are no clear criteria for calcified arteries and the criteria that available today are for specific arteries such as the carotid and coronary.

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How to cite this article: Alahmari A. Giant Curved Calcified Basilar Artery Causing Headache: A Case Report. Clin Res Neurol 2020;3(2):0-0.1-4.