

Abstract

Cerebral venous thrombosis is heterogeneous and non-specific in its clinical presentation making the diagnosis challenging. The use of oral contraceptive agents is considered the most frequent independent risk factor for cerebral venous sinus thrombosis in younger female patients.

We report a young woman presenting with a sinister headache with papilledema while on contraceptive pills for a short duration. She was diagnosed with extensive cerebral vein thrombosis and subsequently detected to have protein S deficiency.

The presence of concurrent hereditary thrombophilia in a patient with a provocative trigger for thrombosis interacts in a multiplicative manner to increase the risk of cerebral venous thrombosis.