

Abstract

Carotid artery dissection is a common cause for young stroke. But traumatic carotid artery dissection related ischaemic stroke is uncommon. We report a case of traumatic left distal common carotid artery dissection with delayed presentation. A 36 year old healthy male, heavy vehicle driver presented with right hemiparesis and global aphasia for 2 days which was preceded by neck pain for 3 days. Urgent non contrast CT brain demonstrated left middle cerebral artery infarction. On further evaluation of young stroke, carotid doppler ultrasonography revealed very low blood flow in left internal carotid artery. Findings of CT angiogram of brain favored a traumatic dissection or ulcer formation in left distal common carotid artery. Laboratory investigations for the causes of spontaneous carotid artery dissection were normal. He was managed with antiplatelets and statin. Digital subtraction angiography done after 2 weeks confirmed the traumatic dissection of left distal common carotid artery and it showed collateral formation. Therefore, he was managed with antiplatelet and neuro rehabilitation therapy without any surgical intervention. At 3 months of follow up he markedly improved and showed mild disability on the Modified Rankin Scale.