A 66 year-old woman with congenital macrocephaly and developmental delay presented with aphasia and right-sided weakness. Head CT revealed severe hydrocephalus of the lateral and third ventricles with a normal fourth ventricle due to a chronic congenital process (Fig. 1A). MRI confirmed subacute embolic infarcts of the left middle cerebral artery territory (Fig. 1B) and a heparin drip was initiated. The patient initially improved but then rapidly decompensated due to hemorrhagic transformation (Fig. 1C) and eventually expired despite protamine and ventricular shunting.

Longstanding compensated congenital hydrocephalus (1, 2) can decompensate for various reasons including stroke.

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**REFERENCES**


Santosh Kesari, M.D., Ph.D., Moores Cancer Center, University of California, San Diego, 3855 Health Sciences Drive, La Jolla, CA 92093-0819 E-mail: skesari@ucsd.edu

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**Fig. 1.** — A) Head CT revealing giant hydrocephalus of the lateral ventricles. B) Brain MRI DWI sequence confirming acute to subacute infarcts of the left middle cerebral artery. C) Head CT showing intraventricular catheter plus some intraventricular hemorrhage.