Brainstem & Spinal Cord Syndromes

Bilateral

Syndrome	Affected Artery / Cause	Location of Lesion	Motor Deficits	Sensory Deficits	Cranial Nerve Involvement	Other Findings
Central Cord Syndrome	Occlusion of anterior spinal artery (hyperextension of neck)	Central spinal cord (mostly cervical region)	Bilateral weakness, upper > lower limbs	Bilateral loss of pain & temperature sensation		Bladder dysfunction
Medial Medullary Syndrome (Dejerine's Syndrome)	Occlusion of anterior spinal artery	Medial medulla By pyramids	Contralateral hemiparesis (corticospinal tract)	Contralateral loss of proprioception, fine touch, vibratory sense (medial lemniscus)	Ipsilateral tongue deviation when protruded (hypoglossal nerve) ₩	Alternating hemiplegia <u>4</u>
Lateral Medullary Syndrome (Wallenberg's Syndrome / PICA Syndrome	Occlusion of <u>PICA</u>	Lateral medulla		Contralateral loss of pain & temperature from body ipsilateral loss from face	 -Hoarseness, dysphagia (nucleus ambiguus) -ipsilateral Horner's syndrome (hypthalamospinal fibers) -Vertigo & nystagmus (vestibular nuclei) eye muscles 	Loss of taste (<mark>ipsilateral</mark> half of tongue)
Vascular Lesions of Posterior Spinal Artery	Occlusion of posterior spinal artery	Dorsal spinal cord		Ipsilateral loss of proprioception & vibratory sense (PCML) , <mark>Ipsilateral</mark> loss of pain & temperature from face		

Brainstem & Spinal Cord Syndromes

Bilateral

lpsilateral Contralateral

	Syndrome Foville Syndrome	Affected Artery / Cause Occlusion of paramedian branches of	Location of Lesion	Motor Deficits Contralateral hemiparesis (corticospinal	Sensory Deficits Contralateral sensory loss (variable) damage to medial lemniscus	Cranial Nerve Involvement Ipsilateral <u>abducens</u> nerve paralysis (lateral rectus weakness) €€ →	Other Findings
	Millard-Gubler Syndrome	basilar artery Occlusion of basilar artery (lateral shift)	Lower pons	tract) Contralateral <u>hemiparesis</u> (corticospinal tract)		Ipsilateral <u>facial</u> paralysis (facial nerve) 😊	
	Midpontine Base Syndrome	Occlusion of <u>paramedian</u> & <u>short</u> <u>circumferential</u> branches	Mid pons	Contralateral <u>hemiparesis</u> (corticospinal tract)	Ipsilateral loss of pain & temperature (face) (trigeminal nerve)	Ipsilateral <u>masticatory</u> muscle weakness (trigeminal motor nucleus) 🍽	Ataxia (middle cerebellar peduncle)
	Weber Syndrome	Occlusion of <u>medial midbrain</u> <u>vessels</u>	Midbrain (<u>Crus cerebri</u> <u>+ Oculomotor</u> <u>nerve</u>	Contralateral hemiparesis (corticospinal tract)		Ipsilateral oculomotor palsy (ptosis, dilated pupil, eye down & out)	Contralateral lower face weakness Contralateral tongue deviation
_	Claude Syndrome	Occlusion of vessels serving <u>central midbrain</u>	Midbrain (<u>Red nucleus +</u> <u>Oculomotor</u> nerve)		Contralateral ataxia, tremor, incoordination (red nucleus involvement)	Ipsilateral oculomotor palsy dilated pupil, eye down & out – lateral rectus + superior oblique	
	Benedikt Syndrome	Occlusion of <u>central & medial</u> <u>midbrain</u> <u>arteries</u>	Midbrain (Crus cerebri, Red nucleus, Oculomotor nerve)	Contralateral hemiparesis (corticospinal tract)	Contralateral ataxia, tremor, incoordination (red nucleus)	Ipsilateral oculomotor palsy ●● ➡ (same above)	Combination of Weber + Claude

Brainstem & Spinal Cord Syndromes

Bilateral

<mark>Ipsilateral</mark>

Contralateral

Syndrome	Affected Artery / Cause	Location of Lesion	Motor Deficits	Sensory Deficits	Cranial Nerve Involvement	Other Findings
Tonsillar Herniation	-Increased ICP (tumor, hemorrhage) - damage <u>ventrolateral</u> reticular area	Cerebellar tonsils pressing on medulla downward to foramen magnum	Variable motor deficits	Variable sensory deficits		Severe respiratory & cardiac instability, loss of consciousness, possible death , hyperventilation, hypertension
Arnold-Chiari Malformation	<u>Congenital</u> tonsillar herniation	Cerebellar tonsils + Medulla through foramen magnum	Possible progressive motor deficits	Possible progressive sensory deficits		May be asymptomatic early, surgical treatment is available
Central Herniation	Increased ICP (supratentorial mass lesion	Diencephalon pressing down through midbrain tentorium	<u>Decorticate</u> then → Decerebrate posturing	Profound sensory loss		Respiratory dysfunction, loss of consciousness, eye movement irregular, tachypnea, apnea
Upward Cerebellar Herniation	Mass in posterior fossa → Upward shift <u>tentorial</u> <u>notch</u>	Cerebellum compressing midbrain	Ataxia, motor deficits by occlusion superior cerebellar artery	Obstruction of Cerebral aqueduct + hydrocephalus		Risk of hydrocephalus, increased ICP, vomiting, lethargy 🤒
Uncal Herniation	Temporal lobe (anteromedial) herniation over tentorium	Uncus pressing on midbrain	Contralateral weakness (corticospinal tract) weakness of extremities		Ipsilateral oculomotor palsy, dilated pupil, abnormal eye movements, double vision 👀	Later : Progresses to respiratory failure