

Editöre Mektup/Letter to the Editör

Radiological Imaging Findings of Walker-Warburg Syndrome

Walker-Warburg Sendromunun Radyolojik Görüntüleme Bulguları

Hüseyin Alper KIZILOĞLU

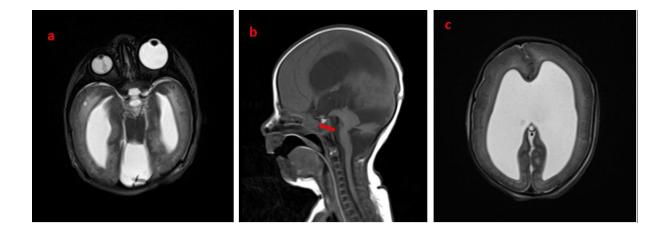
Dr. Öğretim Üyesi, Tokat Gaziosmanpaşa Tıp Fakültesi, Radyoloji AD, Tokat, 0000-0002-6921-8716

Sorumlu yazar: Hüseyin Alper Kızıloğlu, Tokat Gaziosmanpaşa Tıp Fakültesi, Radyoloji AD, Tokat, alperkzloglu@hotmail.com Başvuru/Submitted: 19.09.2023 Kabul/Accepted: 25.01.2024 Cite this article as: Kızıloğlu H. A. Radiological Imaging Findings of Walker-Warburg Syndrome. *J TOGU Heal Sci.* 2024;4 (1):148-151.

To the Editor

Walker-Warburg Syndrome (WWS); it is an autosomal recessive, fatal congenital muscular dystrophy with elevated creatinine phosphokinase values, accompanied by eye and brain anomalies (1). Most patients with WWS, the most severe form of congenital muscular dystrophies, are symptomatic at birth or infancy, and patients usually die before the age of 3 years. In this syndrome; a number of eye anomalies such as cataracts, microcornea, microphthalmia, lens defects, optic nerve atrophy or hypoplasia, glaucoma and retinal dysplasia can be seen. In addition, intracranial malformations such as type 2 (cobblestone) lissencephaly, hydrocephalus, hypomyelination in white matter, corpus callosum dysplasia, cerebellar dysplasia, presence of abnormal brain stem and encephalocele may be seen (2). Among the MRI findings, the most typical findings for WWS are; angulation at the level of brainstem-spinal cord junction, type 2 lissencephaly, cerebellar hypoplasia, corpus callosum hypoplasia and cerebellar cysts (3). It is defined as the Z-shape in the literature, different from what we have seen (4).

Microphthalmia and persistent hyperplastic primary vitreous (PHPV) were detected in the right eye in the MRI performed when the patient was 3 days old. There was dilatation in the third and fourth ventricles in both lateral ventricles, and the cerebellar vermis was found to be hypoplasic. In addition, with Type 2 (cobblestone) lissencephaly and interventricular septum agenesis, the brain stem was Z-shaped and the pons was hypoplasic (Figure 1).



Kızıloğlu

.

Figure 1 a. Axial T2-weighted image. Microphthalmia and PPHV in the right eye, both lateral ventricles dilated, infratentorial cystic structure behind the mesencephalon. **b.** Sagittal T1-weighted image. Angle (W-shaped) at the level of brain stem-spinal cord, hypoplasic cerebellum, dilated ventricles, infratentorial cystic structure behind the mesencephalon(Red arrow). **c.** Axial T2-weighted image. Both lateral ventricles dilated, septum pellucidum agenesis, type 2 (cobblestone) lissencephaly

We submitted this letter to highlight the Z-shaped brainstem appearance, an imaging finding that is under-reported in the literature. In our opinion, this image should be called a "W-shape" rather than a Z shape.

Ethics Committee Approval: Ethical committee approval is not necessary.

Author Contributions: All tasks done by H.A.K.

Funding: The author declared that this study has received no financial support.

REFERENCES

1. Vajsar J, Schachter H. Walker-Warburg syndrome. Orphanet J Rare Dis. 2006;1:29.

2. Dobyns WB, Pagon RA, Armstrong D, et al. Diagnostic criteria for Walker-Warburg syndrome. Am J Med Genet. 1989;32:195-210.

3. Van der Knaap MS, Smit LM, Barth PG, et al. Magnetic resonance imaging in classification of congenital muscular dystrophies with brain abnormalities. Ann Neurol. 1997;42:50-59.

4. Cecil DM, Chaturvedi A, Kapoor D. Z-shaped brainstem and other magnetic resonance imaging findings in congenital muscular dystrophy. Neurol India. 2016;64(3):577-578.