



Fig. 2. a: arterial phase image of Time Resolved Imaging of Contrast KineticS (TRICKS) image shows vessel outline with poor spatial resolution; b: CUBE image showing flow void (arrow) in spinal canal and exiting the neural foramen in thoracic level, identifying the feeder; c: fusion images show good anatomical details with differential contrast; d: DSA confirming the feeder level.

Disclosure of interest

The authors declare that they have no competing interest.

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Available online 11 April 2019

<https://doi.org/10.1016/j.neurad.2019.03.012>

Congenital Zika syndrome and cerebellar cortical problem



Dear Editor,

we read the publication on “Congenital Zika syndrome associated with findings of cerebellar cortical dysplasia - Broadening the spectrum of presentation of the syndrome” with a great interest [1]. In fact, Zika virus infection can result in a very wide clinical spectrum with the common presentation being asymptomatic [2]. Cerebellar involvement in congenital Zika virus syndrome is not uncommon but scarcely mentioned in the literature [3]. In the report by Melo et al. [3], cerebellar hypoplasia was observed in all cases with congenital Zika syndrome [4]. Since the clinical presentation of cerebellar abnormality might be more difficult for detection than that of cerebral abnormality, the practitioner can easily under recognize the cerebellum problem in these patients. For any cases of congenital Zika syndrome, the investigation on all parts of the neurological system is recommended.

Disclosure of interest

The authors declare that they have no competing interest.

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Available online 7 March 2019

<https://doi.org/10.1016/j.neurad.2019.02.008>

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