A vaginal CSF leak

A 26-year-old woman presented to her gynecologist with persistent clear vaginal fluid loss for 2 months, accompanied by symptoms of headache and vertigo. Subsequently, she developed tenesmus. Surgical exploration revealed a duplicated anus and a presacral mass draining clear fluid containing white particles. In the following hours the patient developed a fulminant meningitis. Imaging (figure) revealed a neuroenteric fistula communicating with the thecal sac through a ventral sacral meningocele. This combination of anorectal malformation, sacral defect, and meningocele is known as the Currarino triad.\textsuperscript{1,2} Early recognition of this entity is of paramount importance in preventing a potentially devastating meningitis.

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Disclosure: The authors report no disclosures.

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Neurology 2009;72;1446
DOI 10.1212/WNL.0b013e3181a18890

This information is current as of April 20, 2009