Mystery Case:
Idiopathic bilateral stenosis of the foramina of Monro

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A 42-year-old man presented with chronic, continuous, bifrontal pressure headaches, slightly worse in the morning, forgetfulness, and confusion. There was no history of prior CNS hemorrhage or infection. The neurologic examination was unremarkable. No papilledema was present. Neuroimaging demonstrated symmetric enlargement of the lateral ventricles, a slit-like third ventricle, and downwards transtentorial herniation (figure 1). No mass lesion or abnormal enhancement was seen. A diagnosis of idiopathic bilateral stenosis of the foramina of Monro was considered. The patient underwent endoscopic

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foraminoplasty of the left foramen of Monro and septoplasty (figure 2). Follow-up demonstrated resolution of the hydrocephalus and regression of symptoms. Nine cases of idiopathic bilateral stenosis of the foramina of Monro have been published. Bilateral lateral ventricular hydrocephalus and a slit-like third ventricle in the absence of focal mass lesion or abnormal enhancement at the foramina of Monro should raise a red flag for this uncommon treatable entity.

AUTHOR CONTRIBUTIONS

Dr. Raz: manuscript drafting and literature research. Dr. Fatterpekar: revising the manuscript for intellectual content. Dr. Davis: revising the manuscript for intellectual content and literature research. Dr. Huang: manuscript drafting and revising the manuscript for intellectual content. Dr. Loh: revising the manuscript for intellectual content.

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