



## Cryptogenic Stroke

Mohammad Saadatnia, MD,.

Professor of Neurology and Neuroradiology, Isfahan University of Medical Sciences, Iran.

\*Corresponding Author: Email: [mosaadatnia@yahoo.com](mailto:mosaadatnia@yahoo.com)

Cryptogenic stroke is defined as brain infarction that is not attributable to a source of definite embolism, large artery atherosclerosis, or small artery disease despite a thorough vascular, cardiac, and serologic evaluation. Despite many advances in our understanding of ischemic stroke, cryptogenic strokes remain a diagnostic and therapeutic challenge.

The pathophysiology of cryptogenic stroke is likely various. Probable mechanisms include cardiac embolism secondary to occult paroxysmal atrial fibrillation, aortic atheromatous disease or other cardiac sources, paradoxical embolism from atrial septal abnormalities such as patent foramen ovale, hypercoagulable states, and preclinical or subclinical cerebrovascular disease. Cryptogenic stroke is one-fourth among cerebral infarction, but most of them could be ascribed to embolic stroke. A significant proportion of cryptogenic strokes adhere to embolic infarct topography on brain imaging and improvement in our ability to detect paroxysmal atrial fibrillation in patients with cryptogenic stroke has strengthened the idea that these strokes are embolic in nature. a significant proportion of cryptogenic strokes adhere to embolic infarct topography on brain imaging. embolic stroke of undetermined sources (ESUS) was planned for unifying embolic stroke of undetermined source. The etiologies underlying ESUS included minor-risk potential cardioembolic sources, covert paroxysmal atrial fibrillation, cancer-associated coagulopathy and embolism, arteriogenic emboli, and paroxysmal embolism. Extensive evaluation including transesophageal echocardiography and cardiac monitoring for long time could identify the etiology of these patients. Therefore cryptogenic stroke is a diagnosis of exclusion. Compared with other stroke subtypes, cryptogenic stroke tends to have a better prognosis and lower long-term risk of recurrence.

Key words: cryptogenic stroke, brain infarction



DOI: 10.7575/aiac.abcmcd.ca1.62

Published Date: February 2017

Peer-review is under responsibility of *the 9th Iranian Stroke Congress*.

Published by Australian International Academic Centre, Australia

This published work is open access under the CC BY license.

Available online at [www.abcmcd.aiac.org.au](http://www.abcmcd.aiac.org.au)

