

Neonatal Stroke: A Review on Epidemiology, Pathogenesis, Diagnostics and Therapy

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Abstract

Neonatal stroke, including perinatal arterial ischaemic stroke and cerebral sinovenous thrombosis, remains a serious problem in the neonate. This article reviews the current evidence on epidemiology, pathogenesis, diagnostics and therapeutic options.

a delay in diagnosis. Additional signs may include abnormal eye movements, megalencephaly, and feeding difficulties and hypotonia [5]. Some infants may have a history of feeding difficulties, developmental delay, and hypotonia after a perinatal stroke [6]. Infants may have a history of abnormal eye movements, megalencephaly, and feeding difficulties [6]. Infants may have a history of abnormal eye movements, megalencephaly, and feeding difficulties [6]. Infants may have a history of abnormal eye movements, megalencephaly, and feeding difficulties [6].

therapy

Cerebral infarction may be identified on imaging and may lead to the development of hemiparesis [9]. It includes cerebral hemorrhage, meningitis and congenital head disease. Stroke in infants with CSVT has been reported in, cerebral infarction, cerebellar atrophy, which may lead to cerebral atrophy. Adjusting the infant's diet may be helpful and has been shown to be effective in the management of cerebral atrophy.