

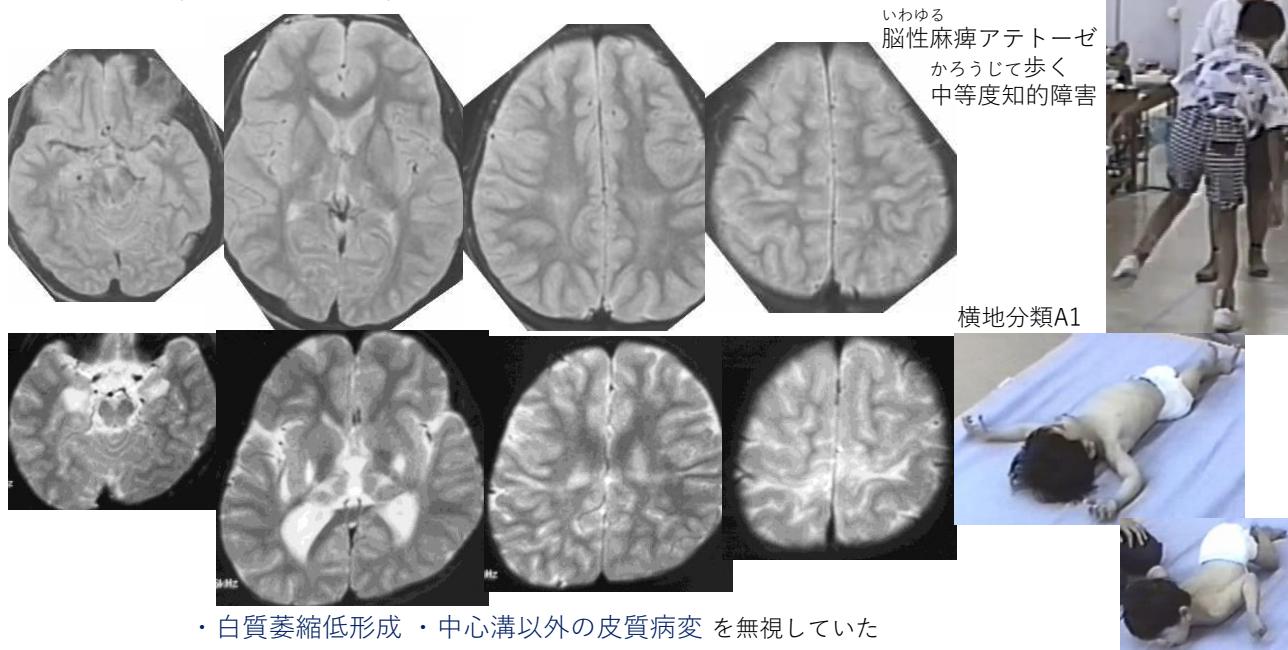


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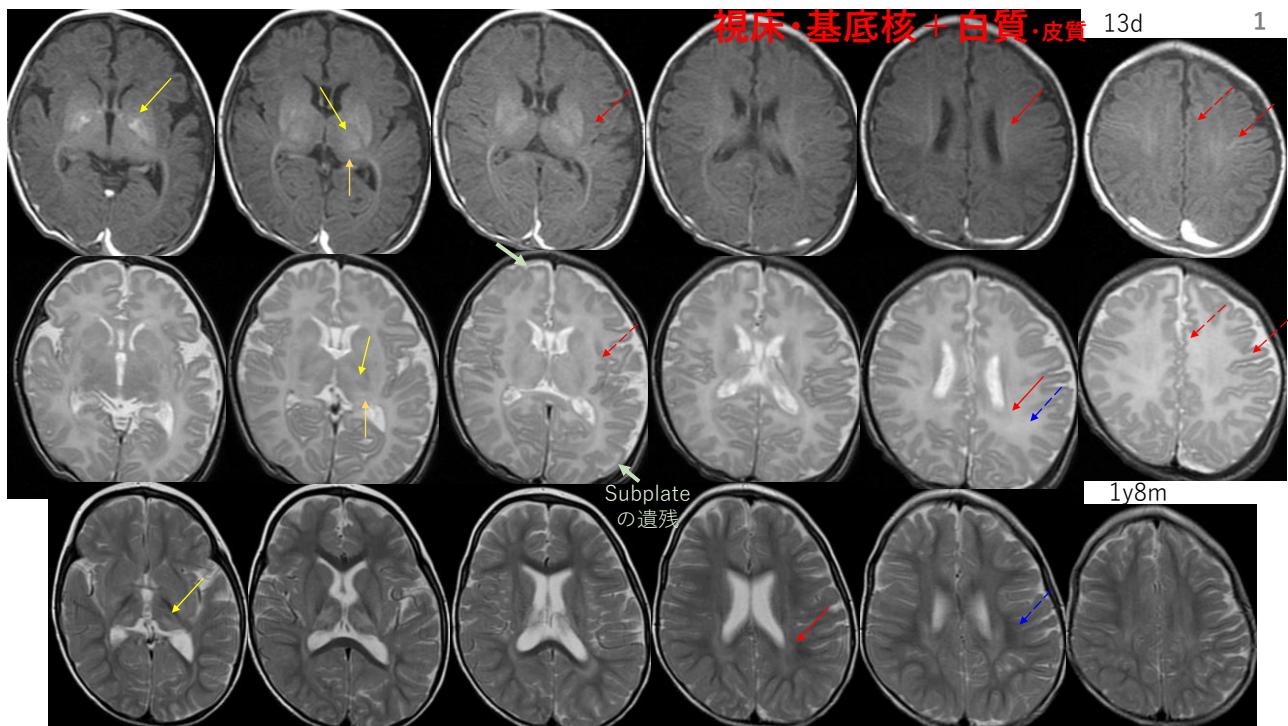
# 満期低酸素性虚血性脳症重症例の運動障害

横地健治

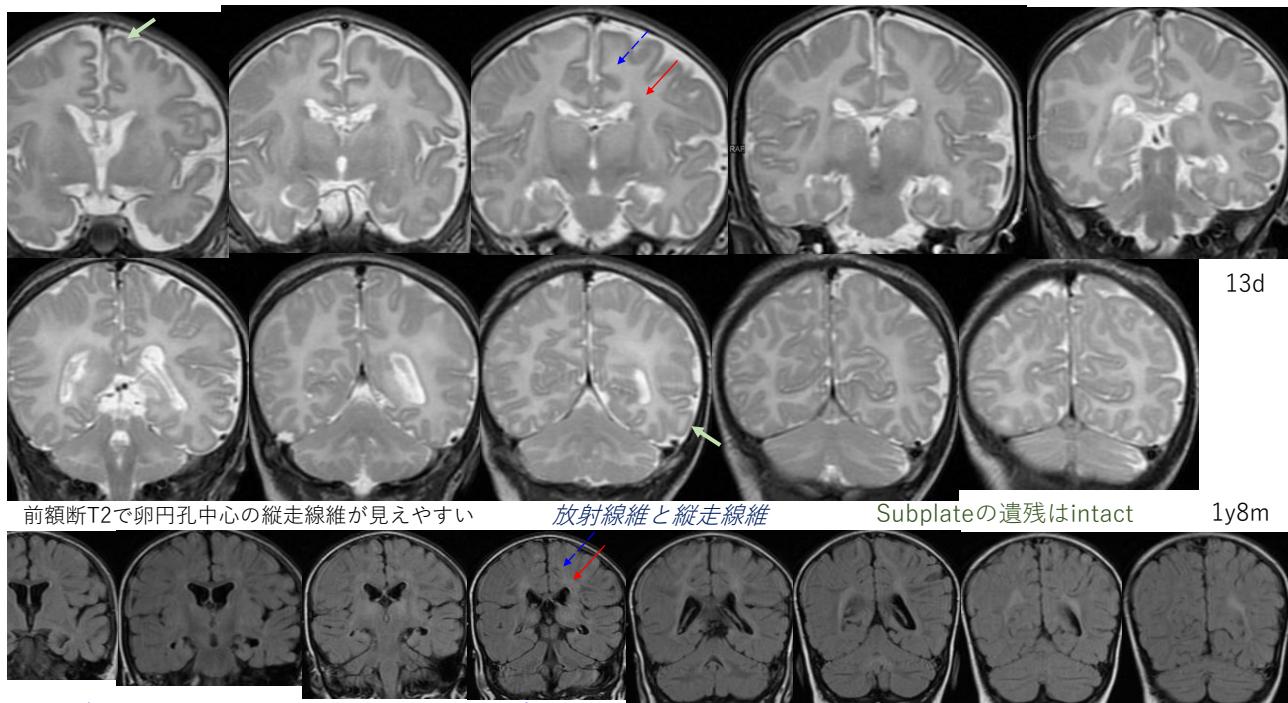
Kenji Yokochi. Clinical profiles of children with cerebral palsy having **lesions of the thalamus, putamen and/or peri-Rolandic area**. Brain Dev 2004;26:227-32.



2



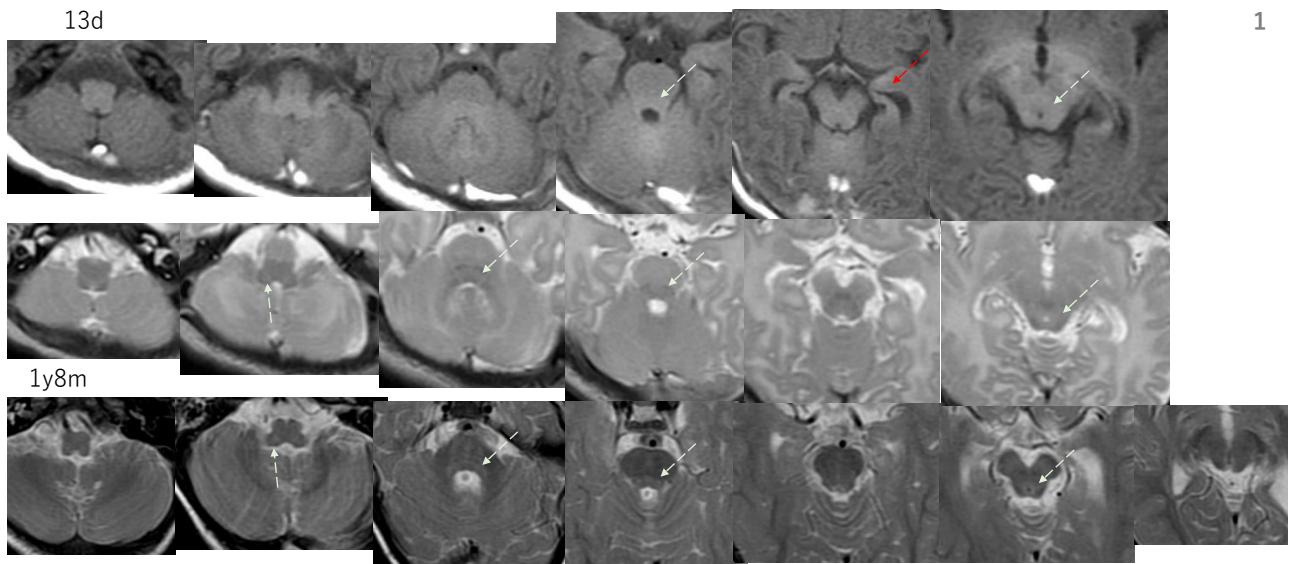
3



大脑白質の萎縮・低形成とWaller変性の共存

4

2



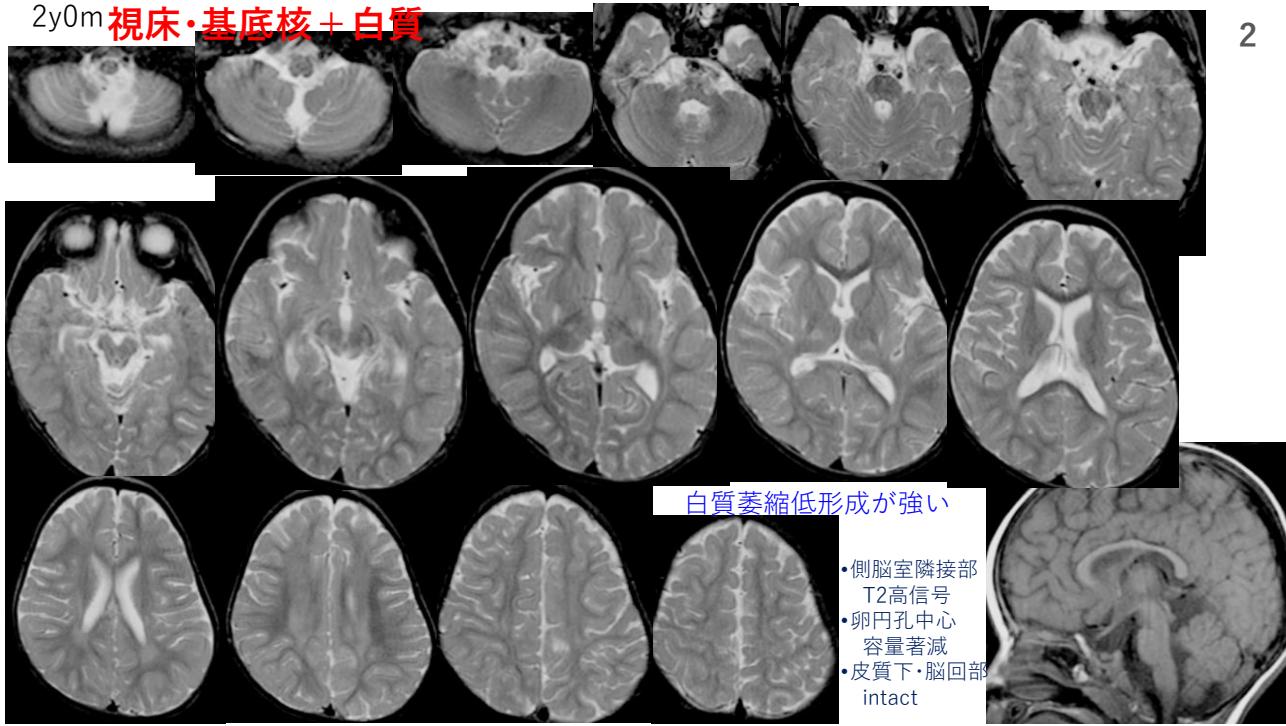
あやしい脳幹病変

5



6

2y0m 視床・基底核 + 白質



7

Compartmental organization of the brain with related axonal pathways.

**Deep (periventricular) compartment**

- Corpus callosum – (segment I)
- Fronto-occipital fascicle (FOF) – (segment I)
- Cortico-striatal fibers (Muratoff's fascicle) – (segment I)
- Fronto-pontine pathways – (segment I)

**Intermediate compartment**

- Crossroads of projection pathways – (segment II) Ila
  - Thalamocortical fibers
  - Cortico-fugal fibers
  - Callosal radiation
  - Associative sagittal fibers

- Sagittal axonal strata – (segment II) Ilb
  - Thalamocortical pathways
  - Basal forebrain cholinergic afferents
  - Cortico-cortical associative fiber system

Centrum semiovale – (segment III)

- Long associative fiber system
- Projection fibers

**Superficial compartment**

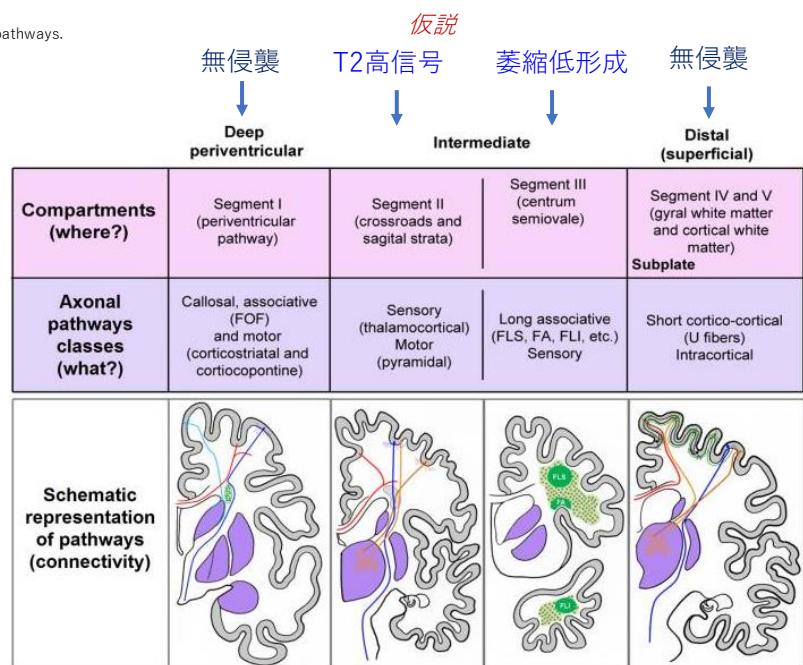
- Gyrus white matter – (segment IV)

- Short cortico-cortical fibers
- U-fibers

Subplate/subplate remnant

- Growing front of all afferent pathways
- Short cortico-cortical fibers

Intracortical fibers – (segment V)

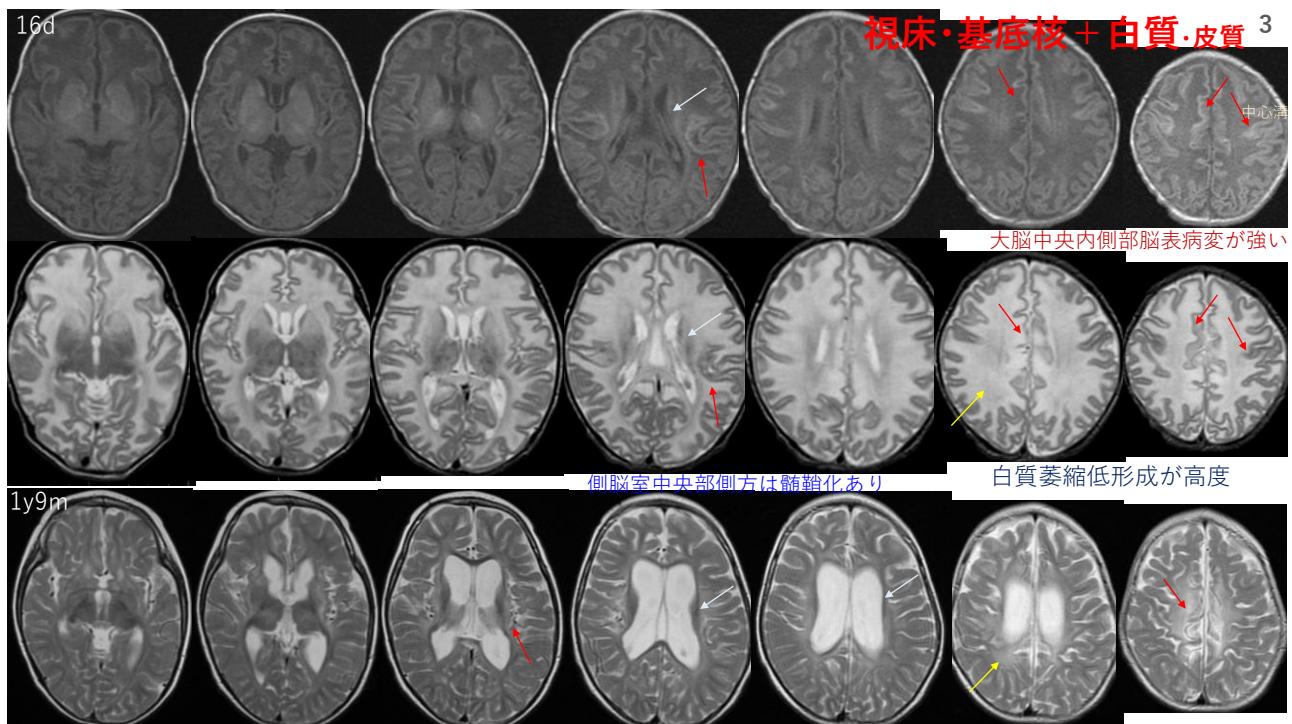


Ivica Kostović

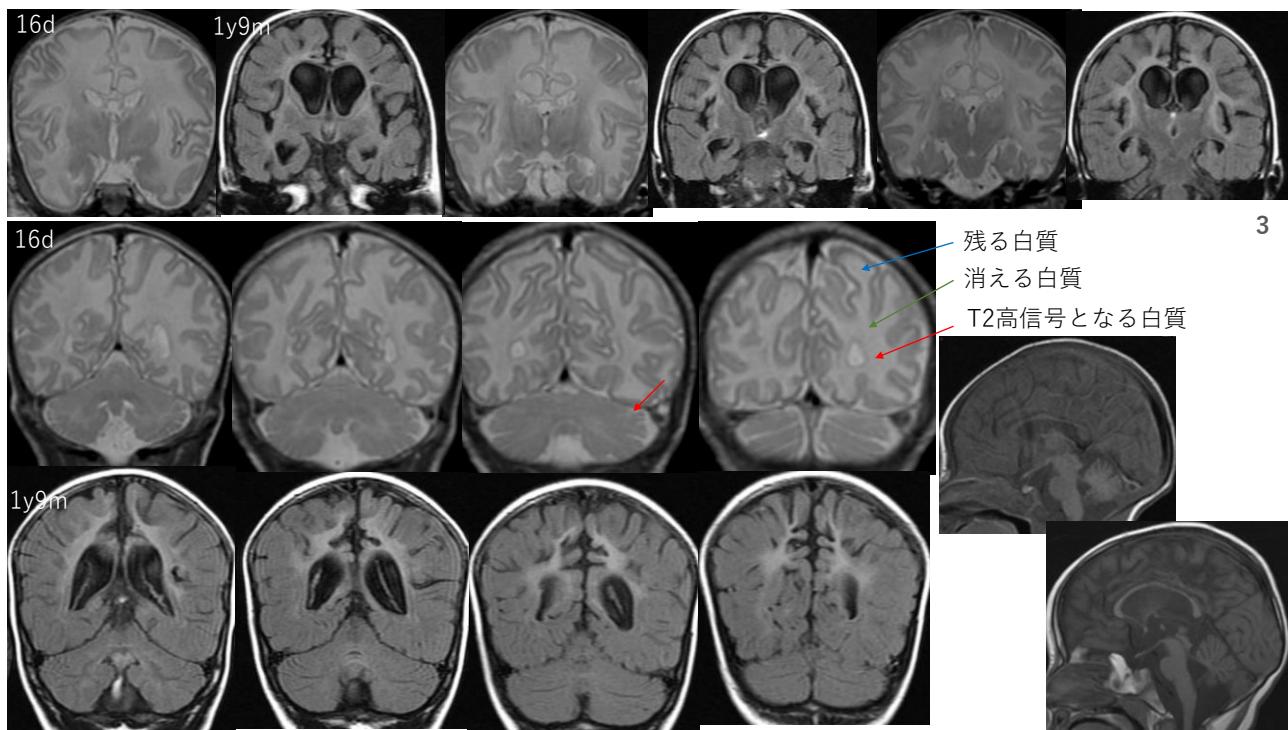
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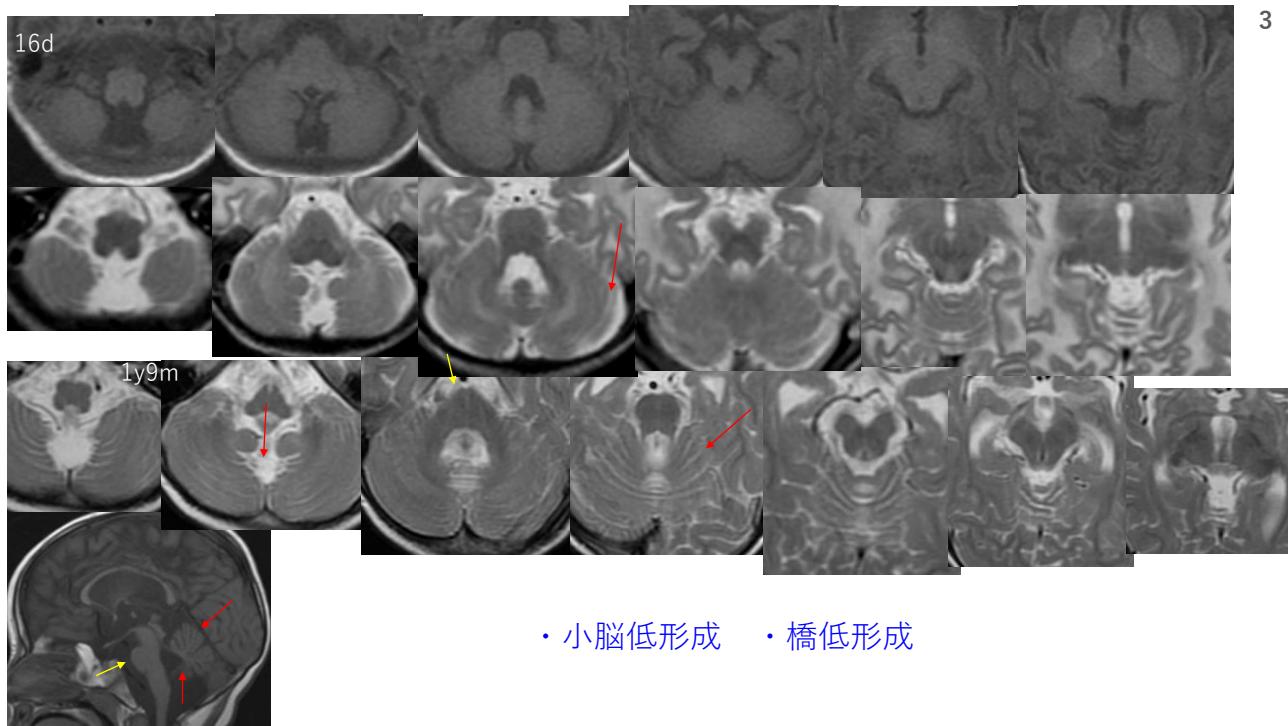
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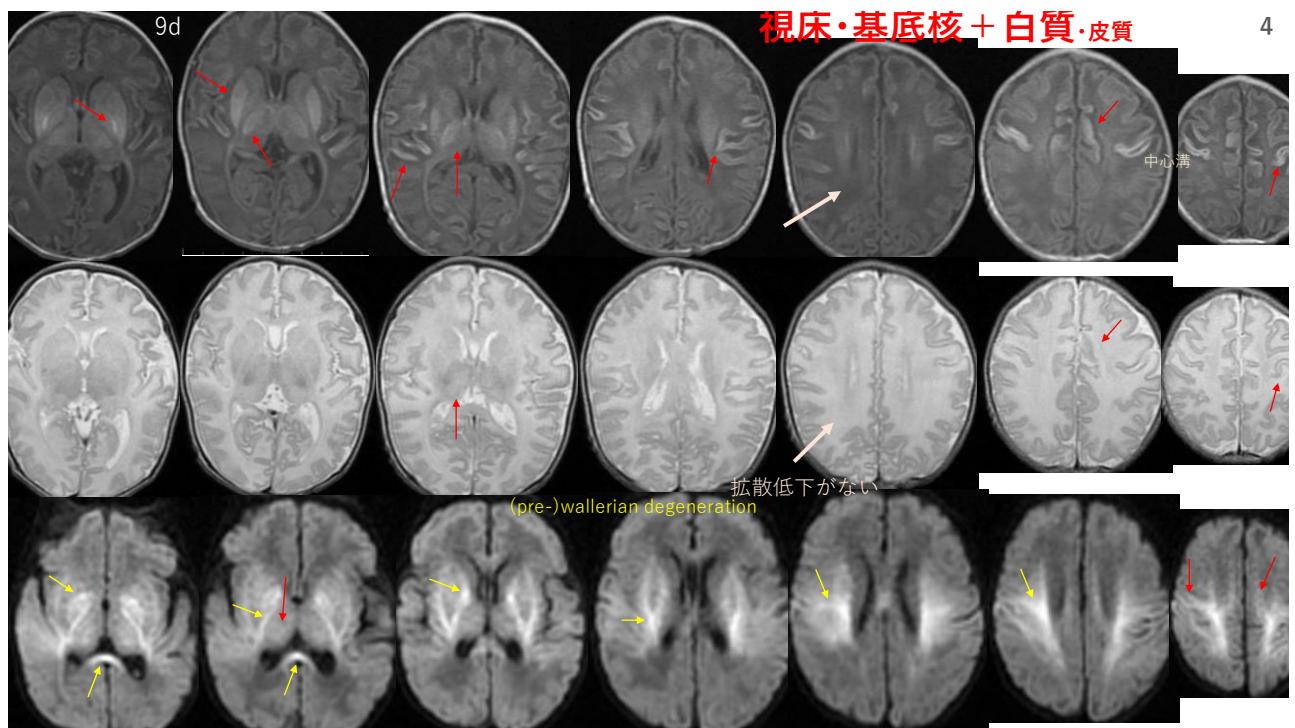
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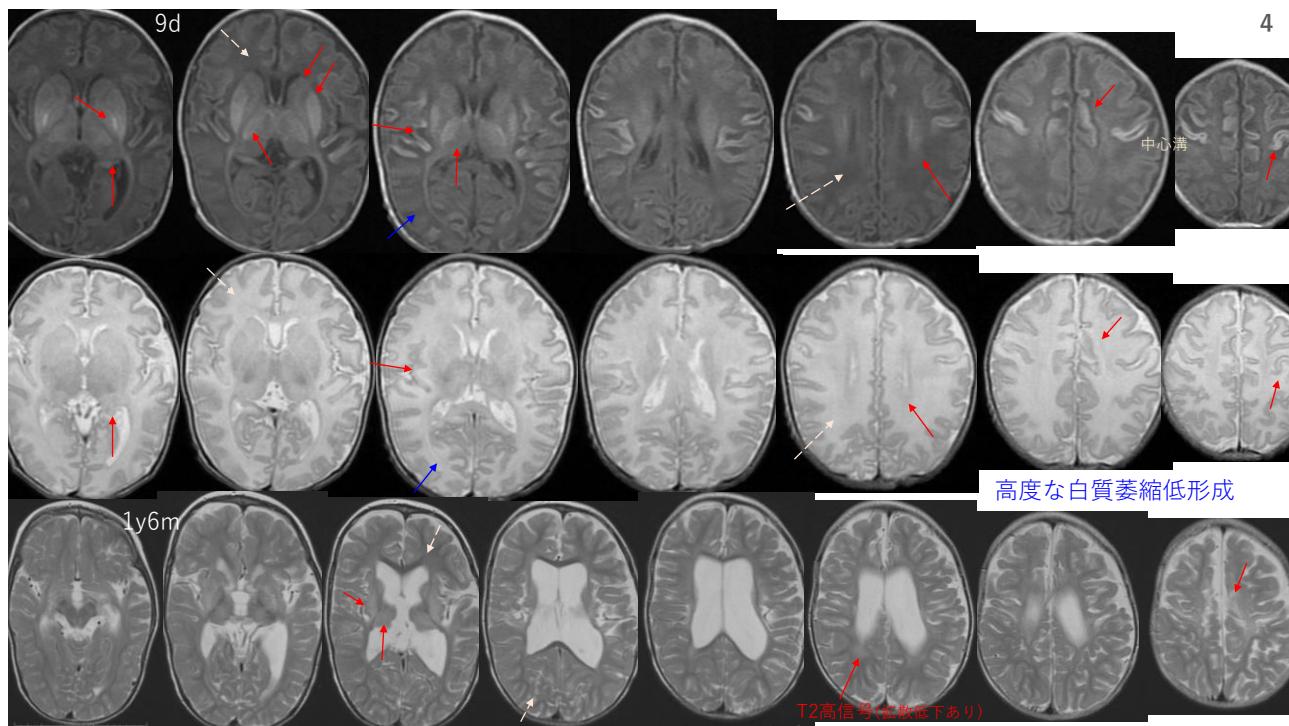
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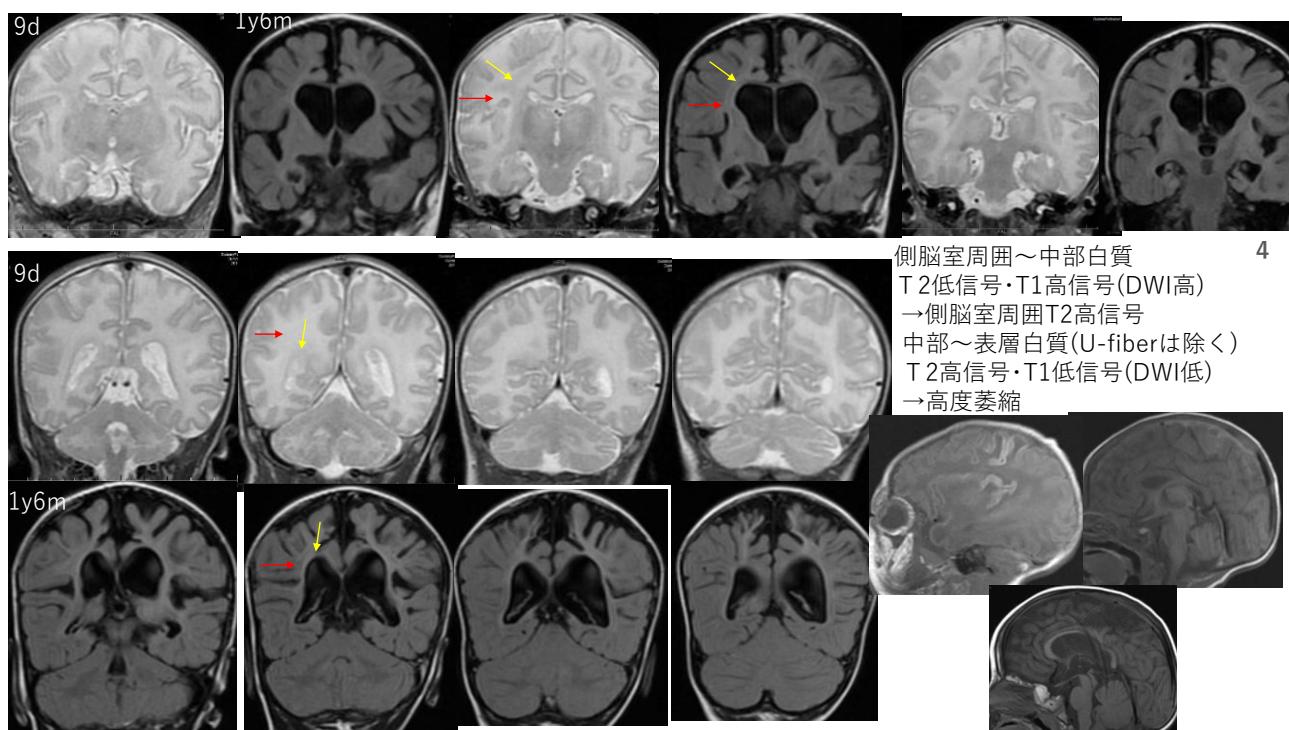
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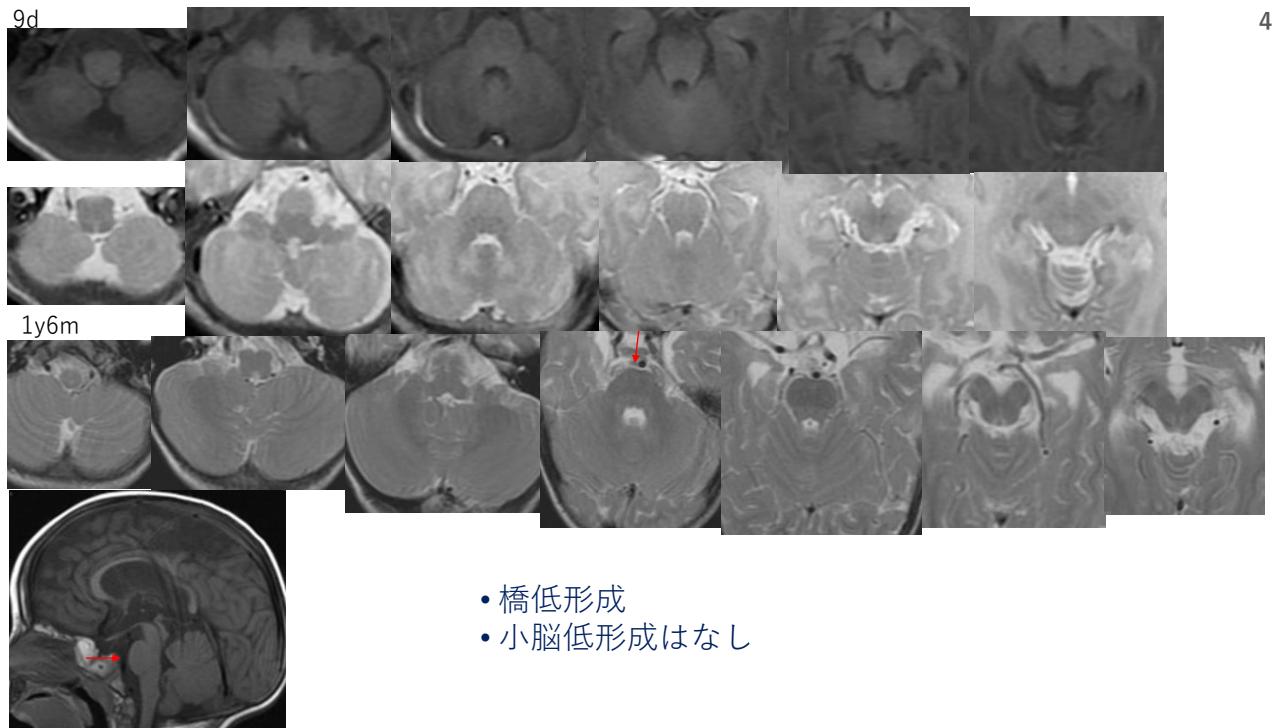
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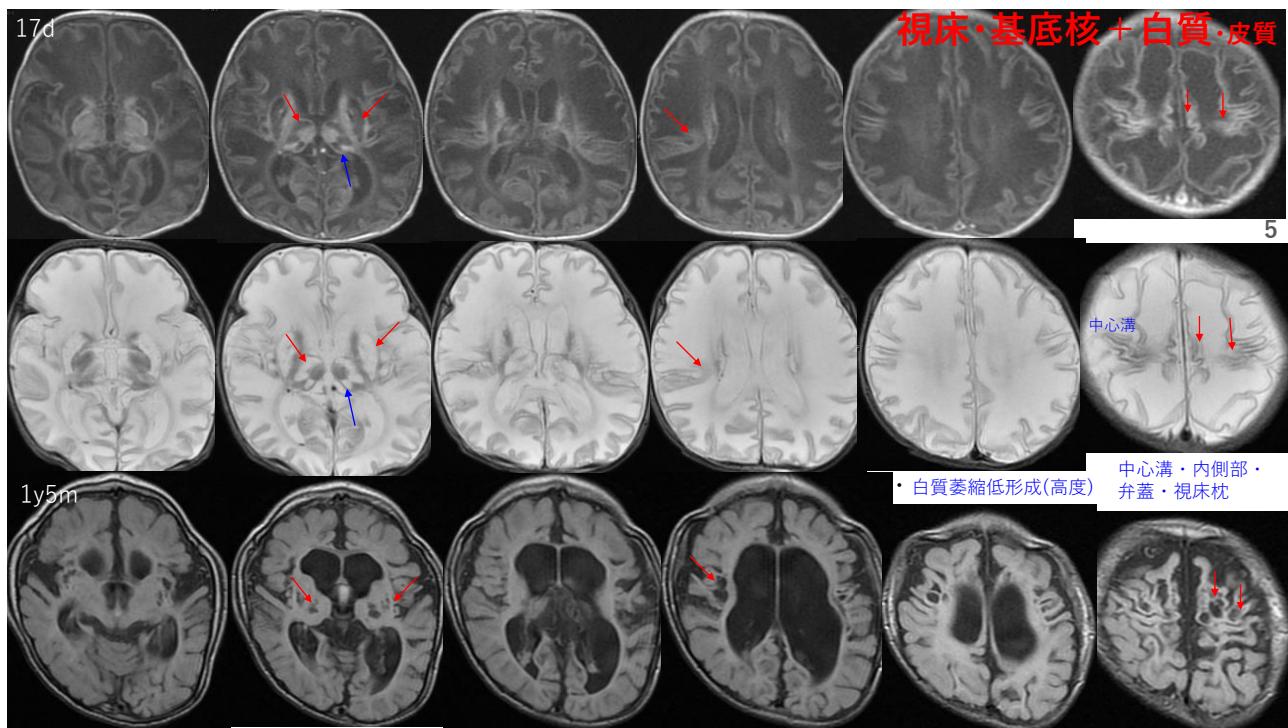


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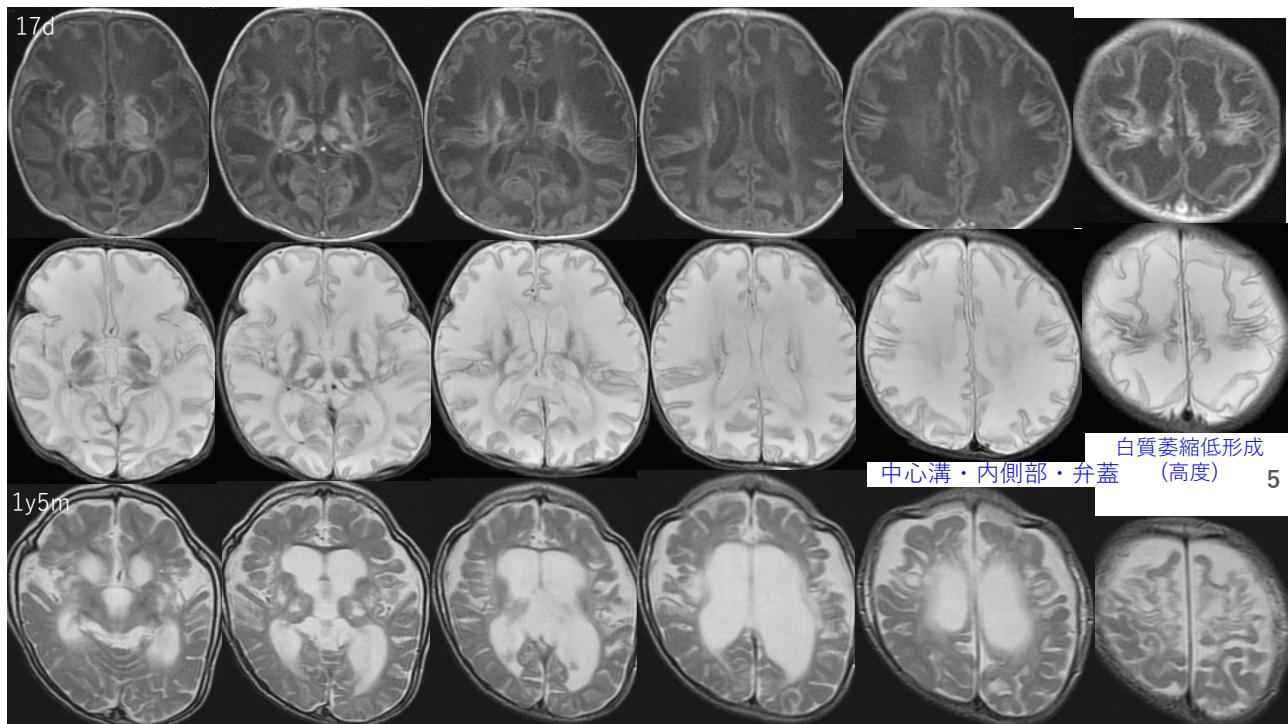


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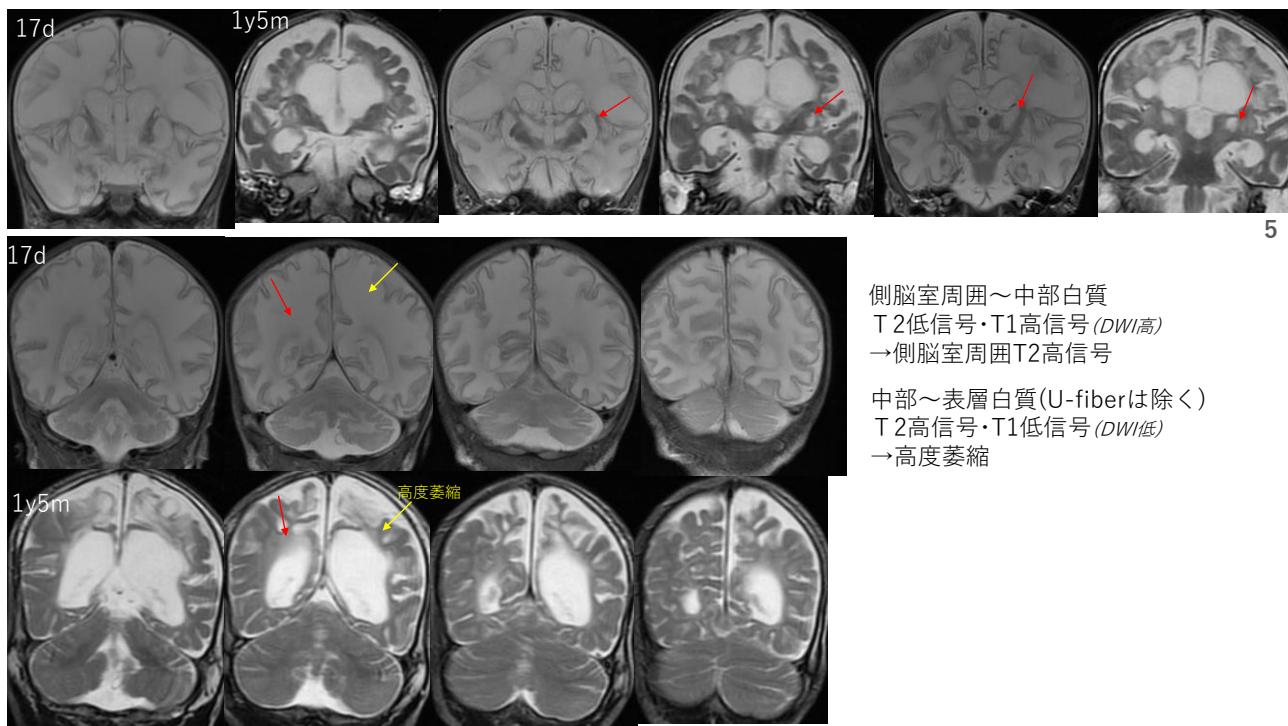




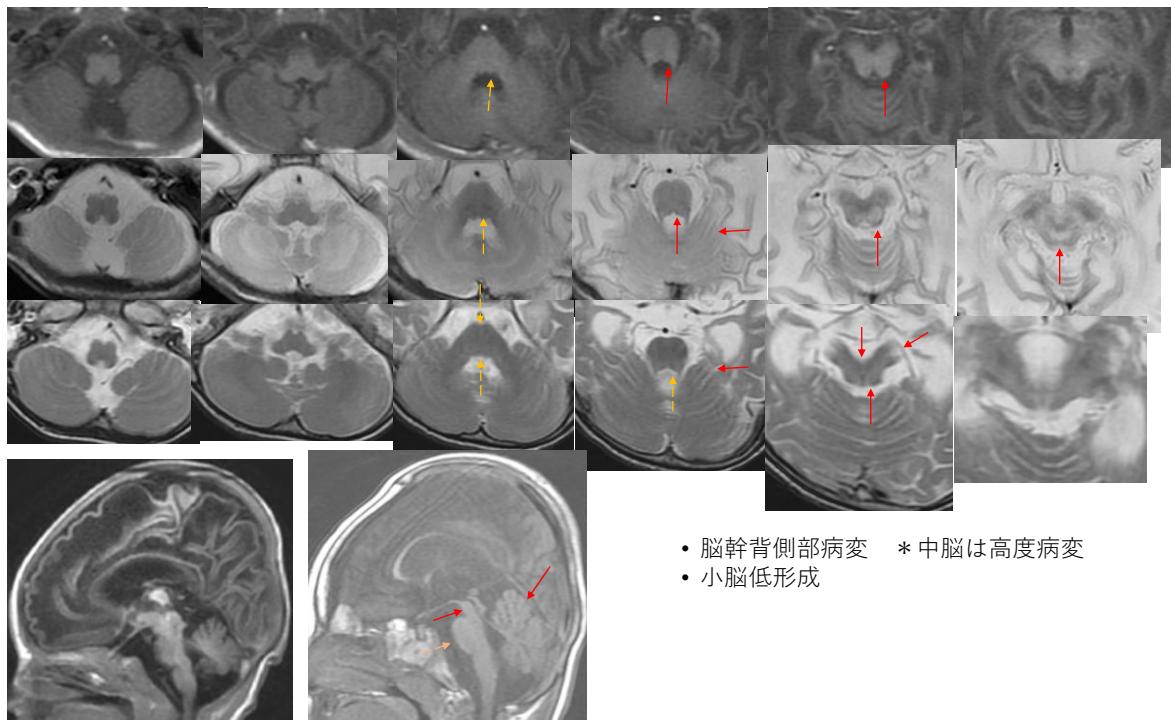
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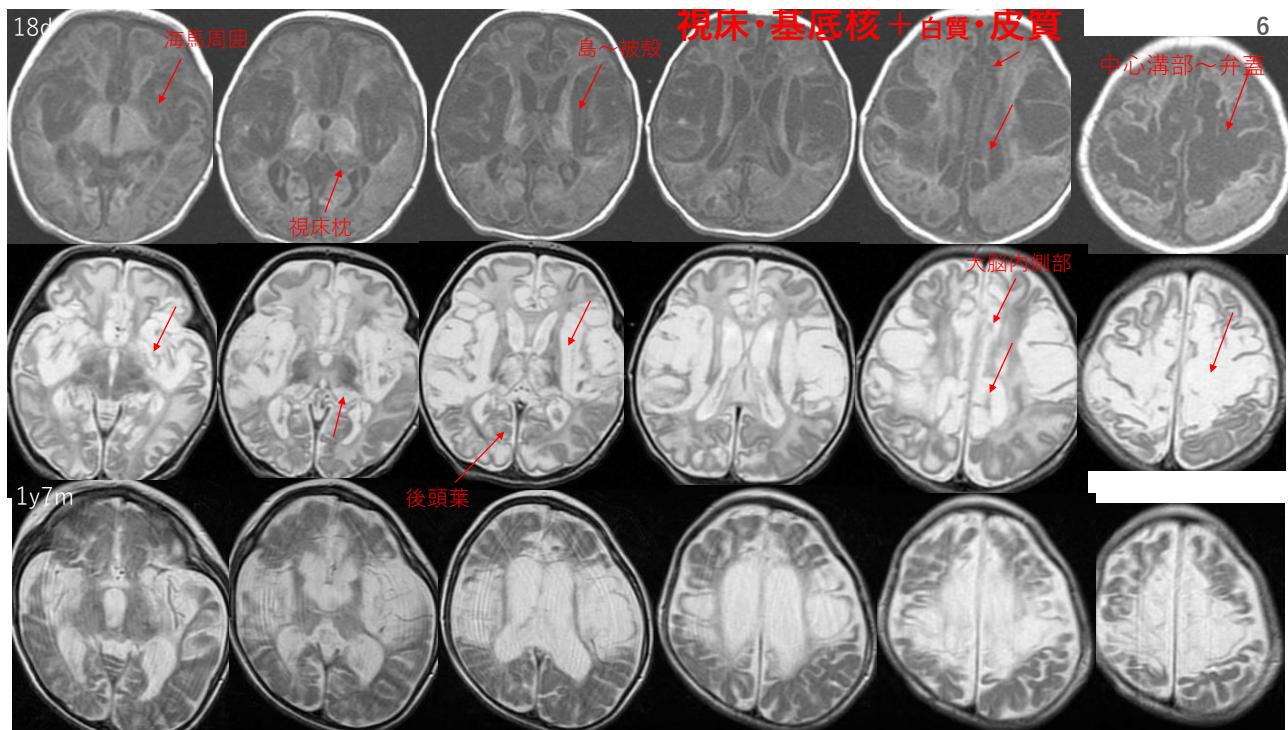
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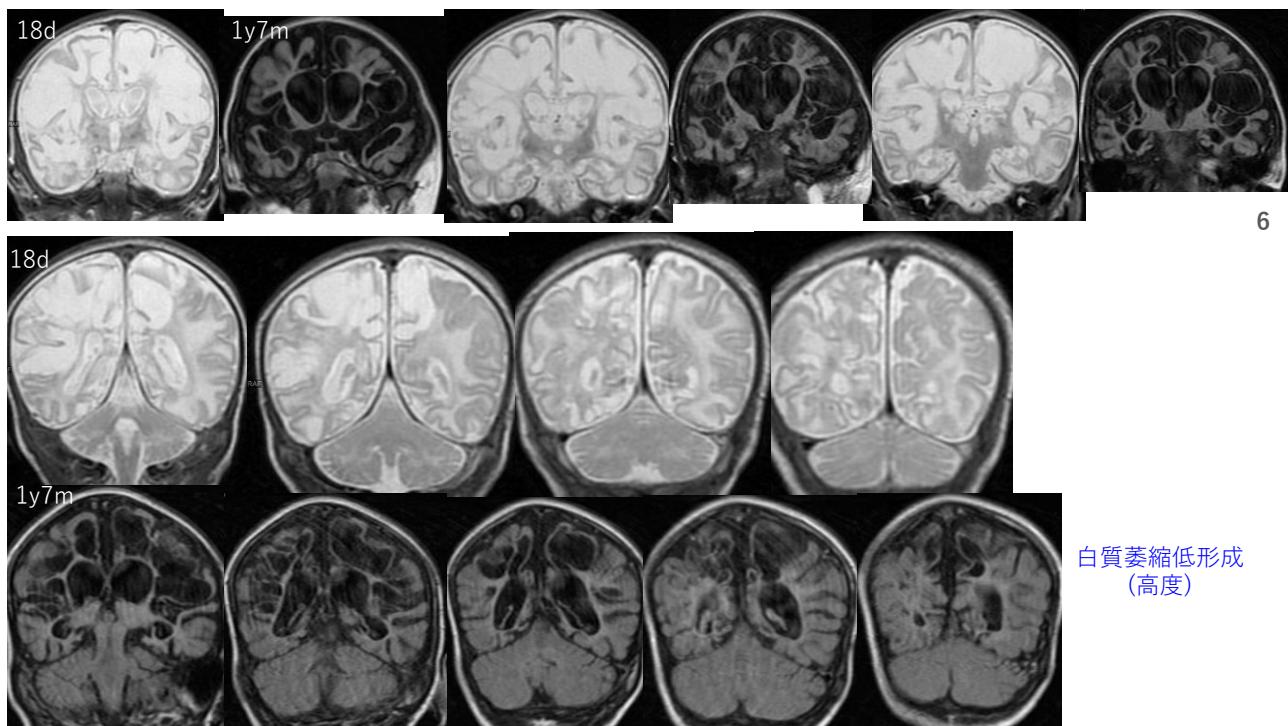
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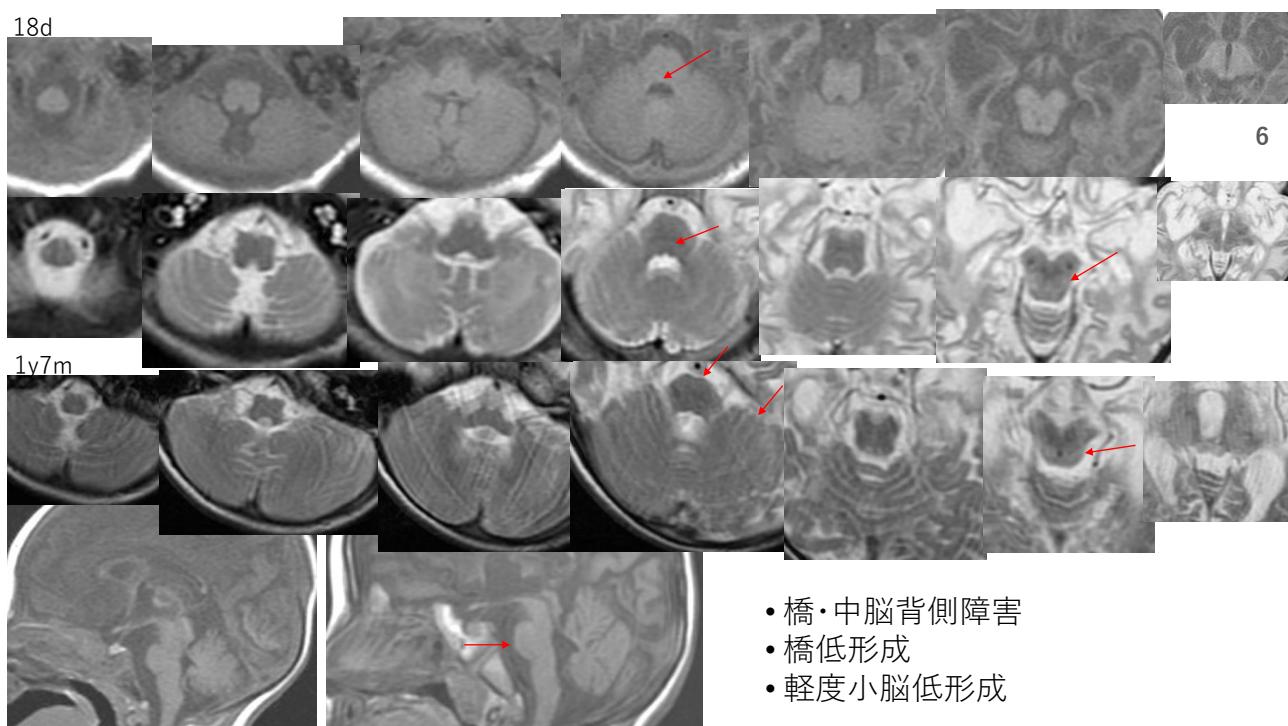


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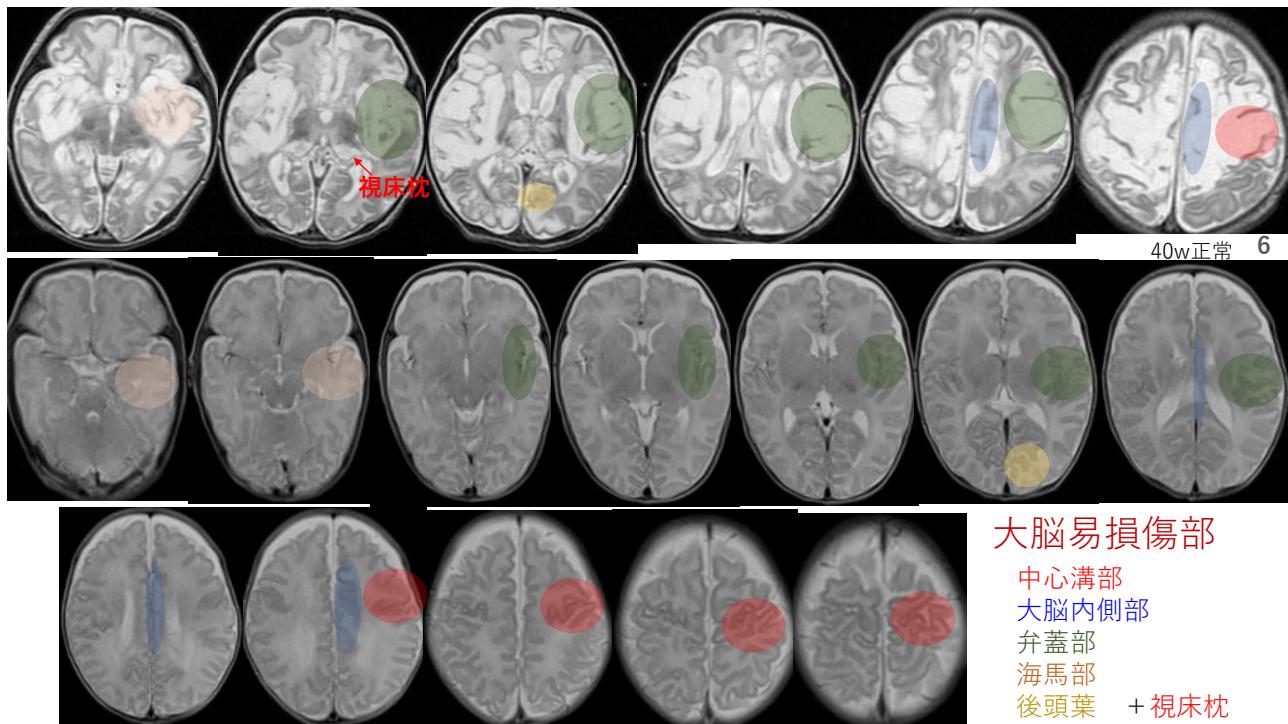
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白質萎縮低形成  
(高度)



- 橋・中脳背側障害
- 橋低形成
- 軽度小脳低形成

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大腦易損傷部  
中心溝部  
大腦內側部  
弁蓋部  
海馬部  
後頭葉 + 視床枕

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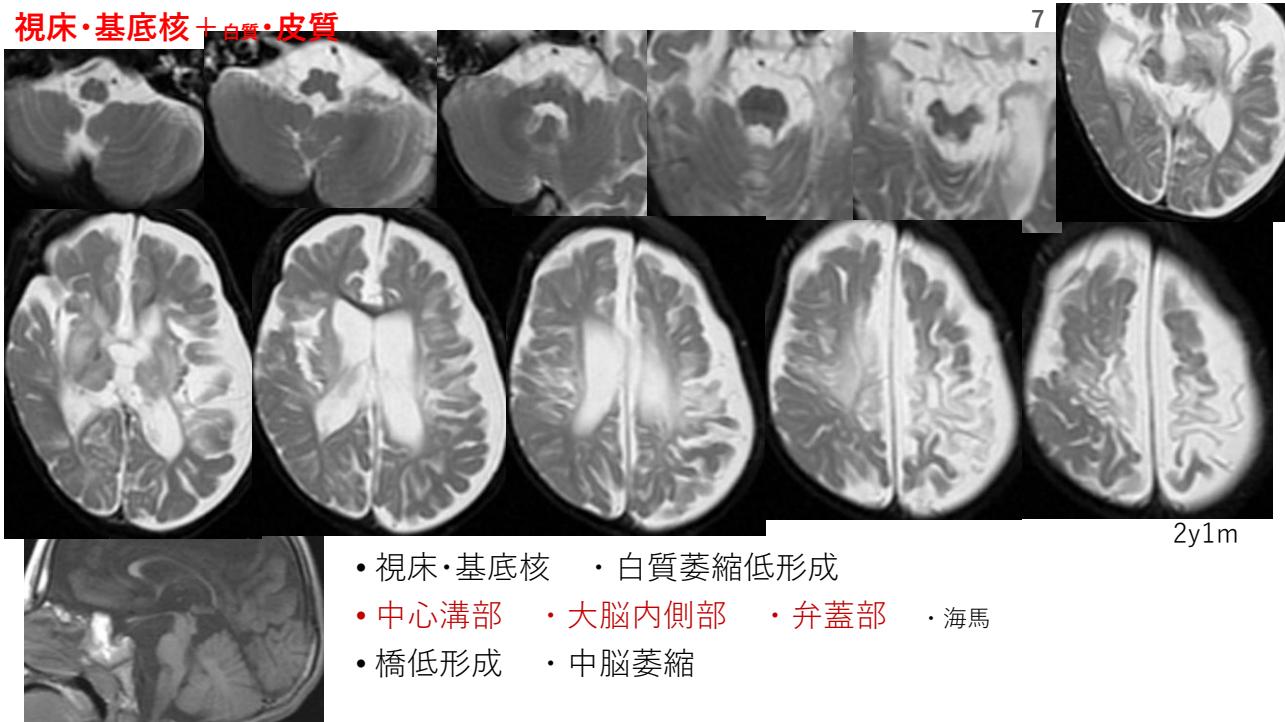
- 反り
- 強い股屈曲
- かたい屈伸
- 右は 強い

## 反復增悪性持続的筋過活動状態

- かたい屈伸
- 右は、**強い伸展**、その後屈曲へ

以後、dopa→リリカ

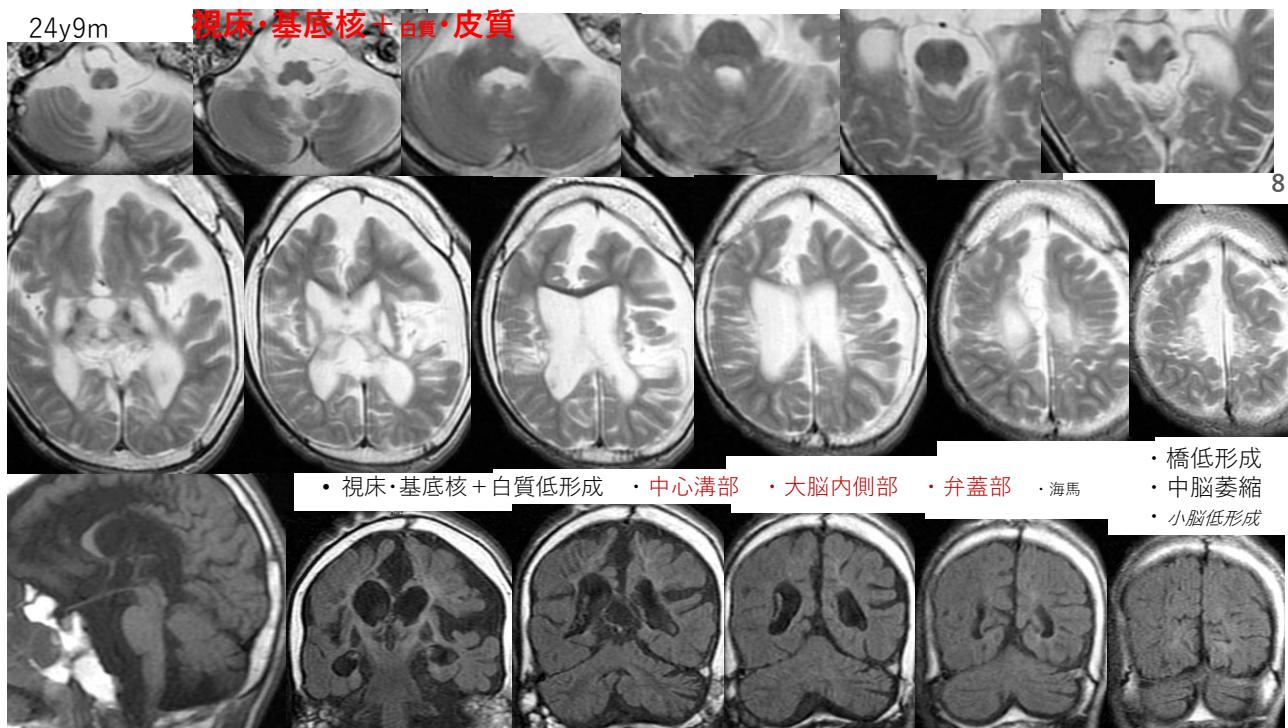
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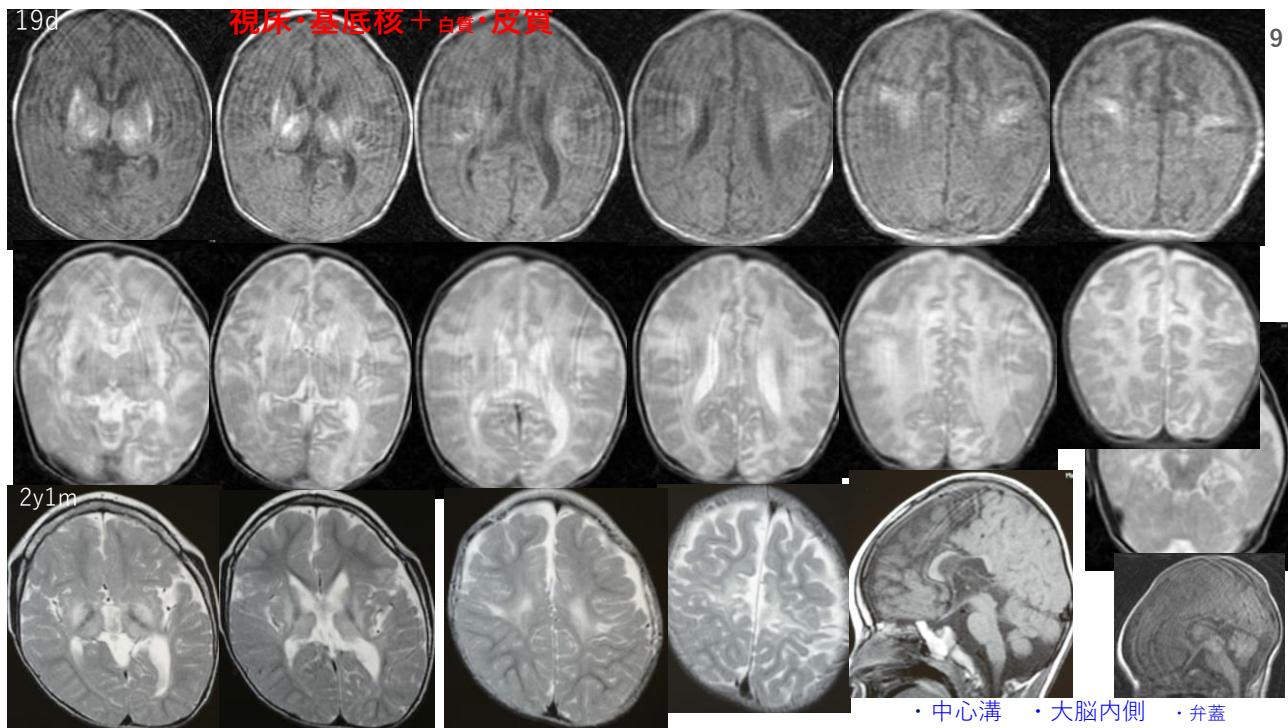
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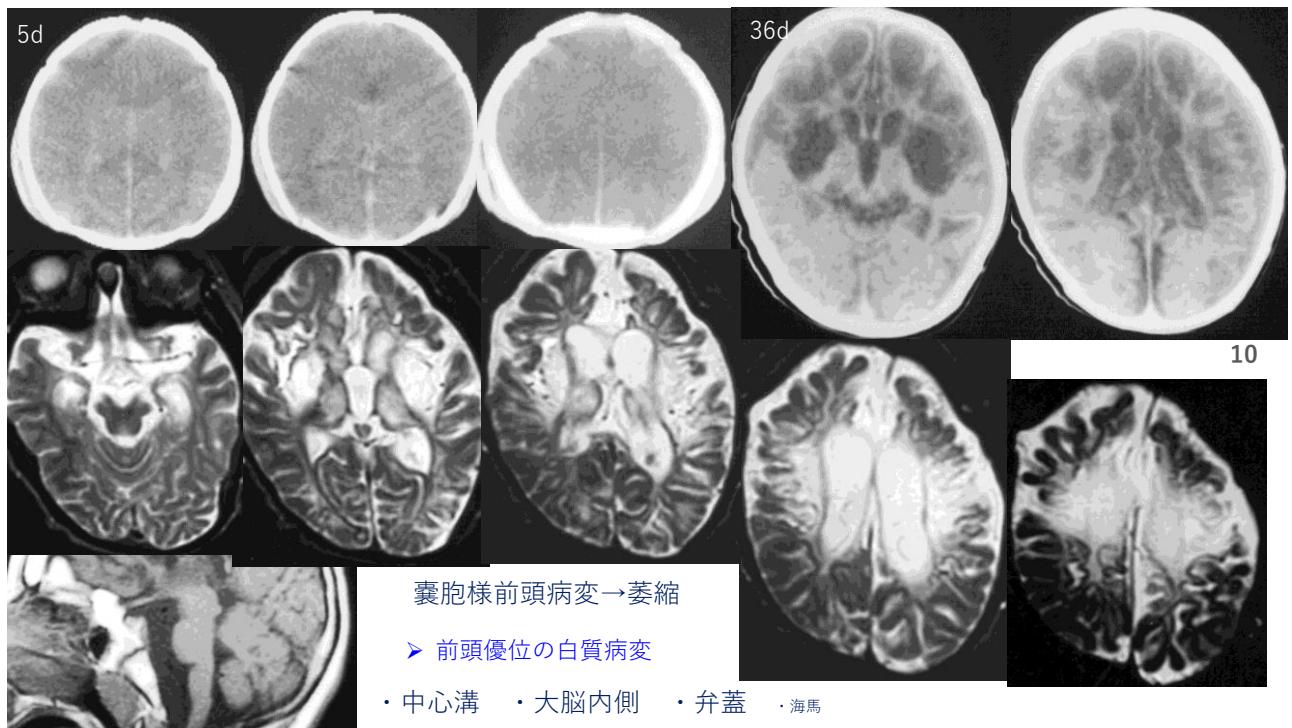
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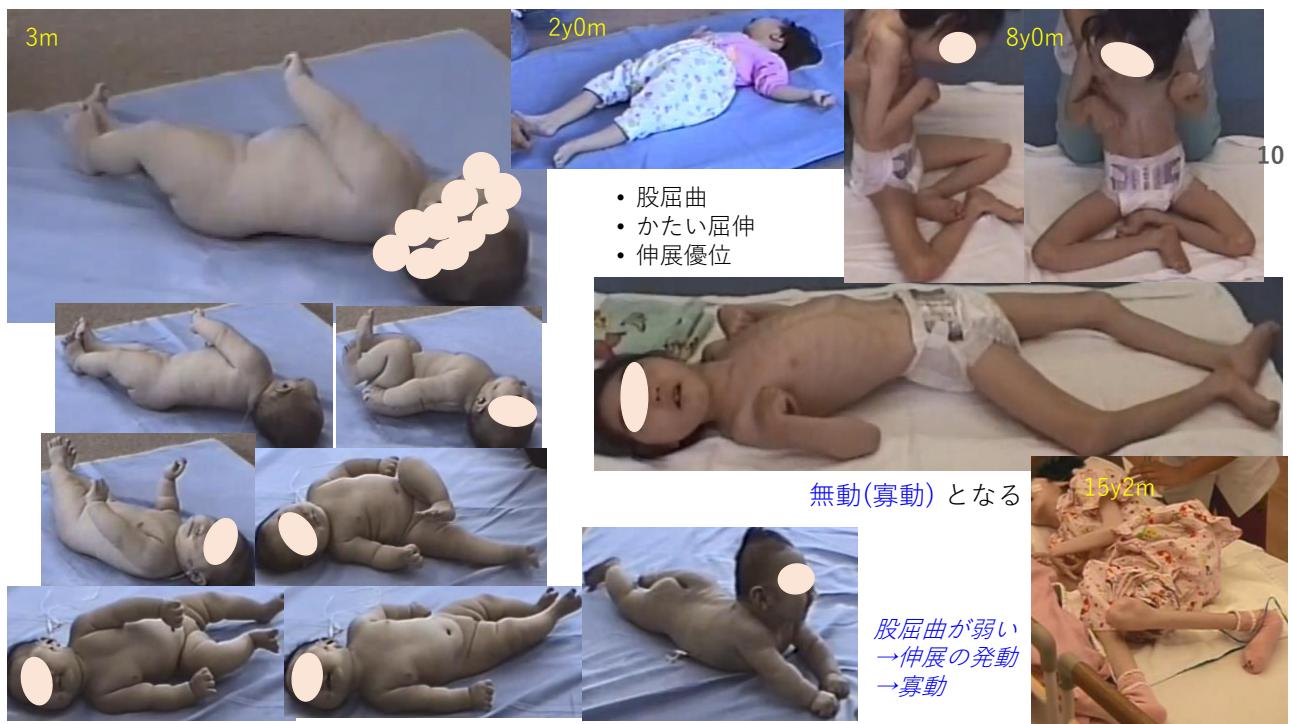
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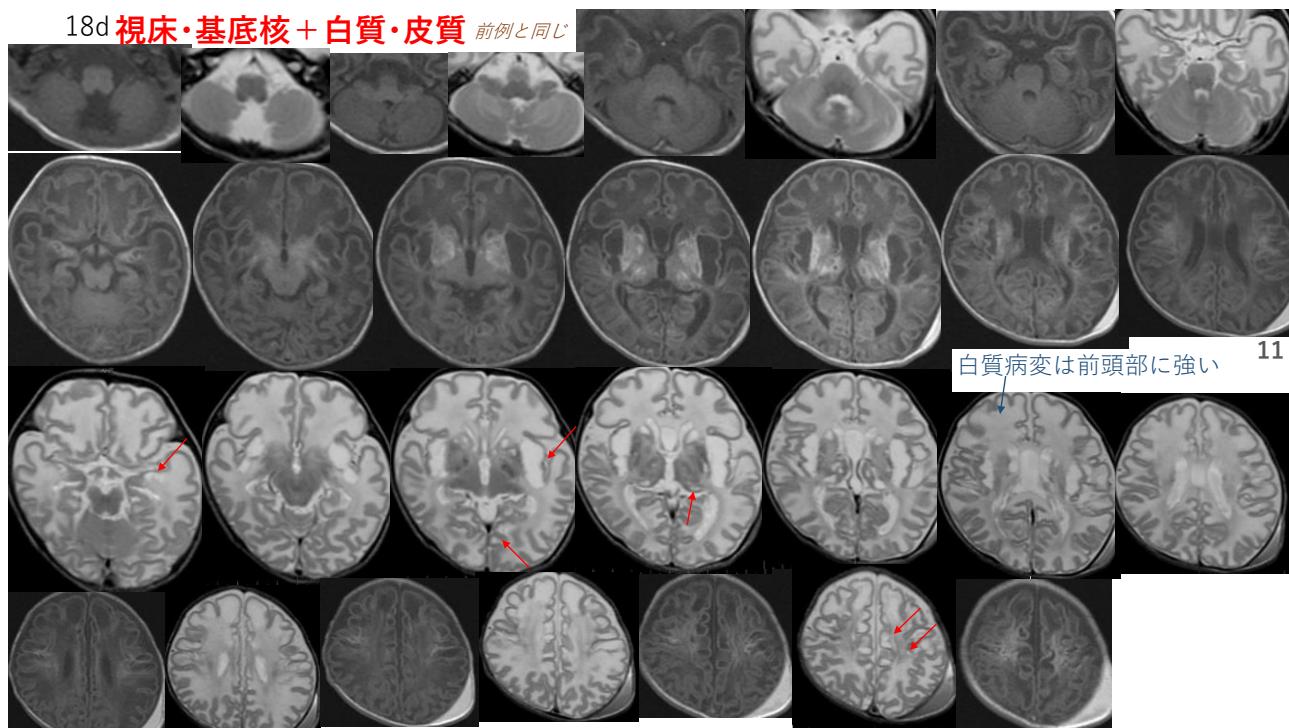


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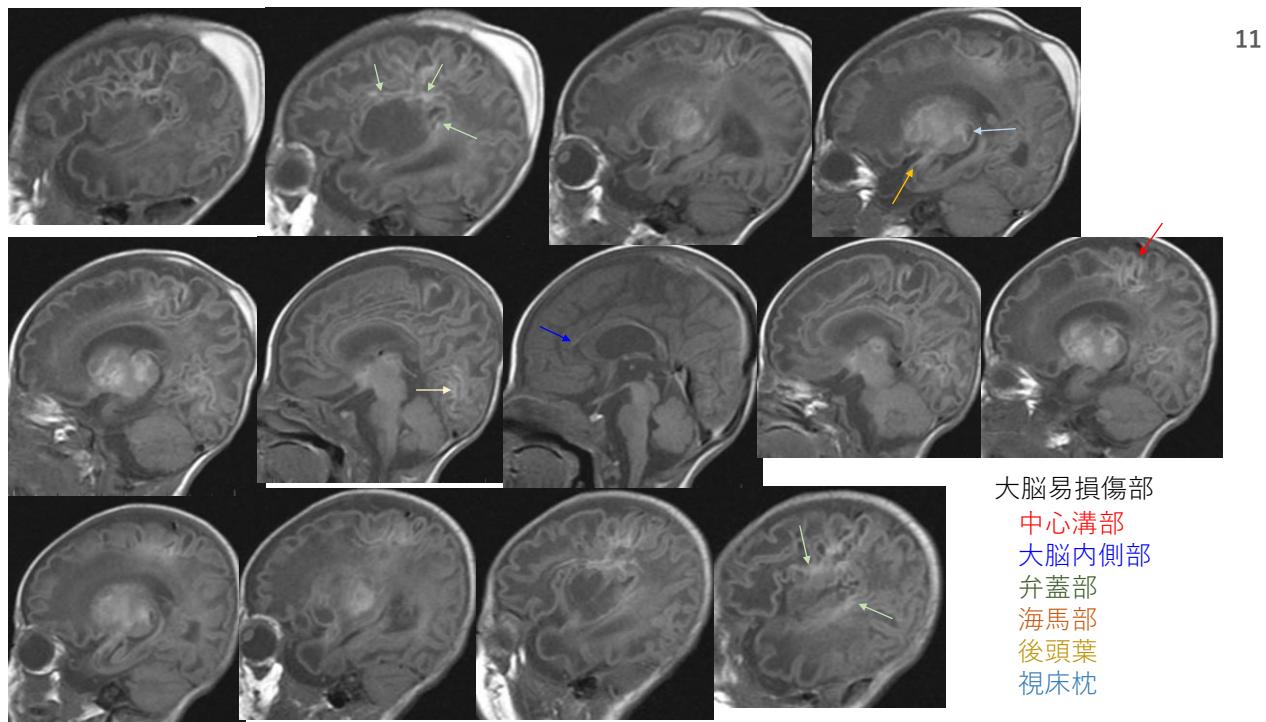


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18d 視床・基底核 + 白質・皮質 前例と同じ



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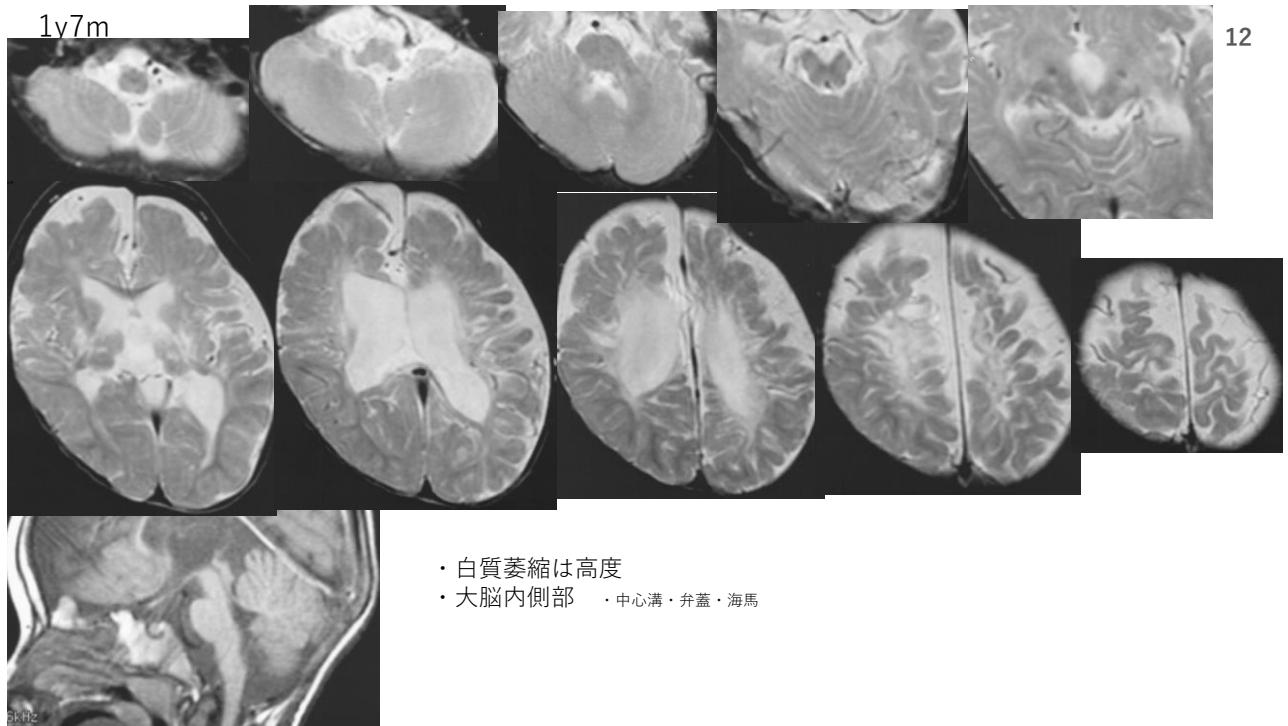


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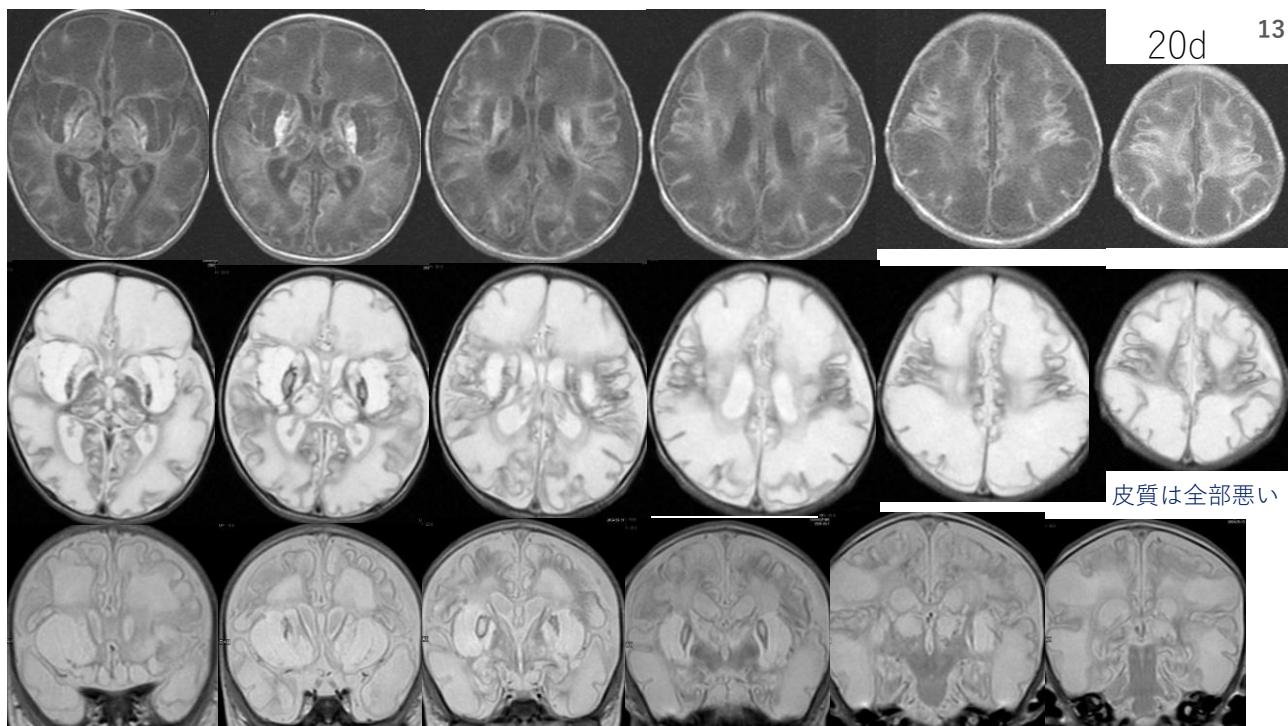
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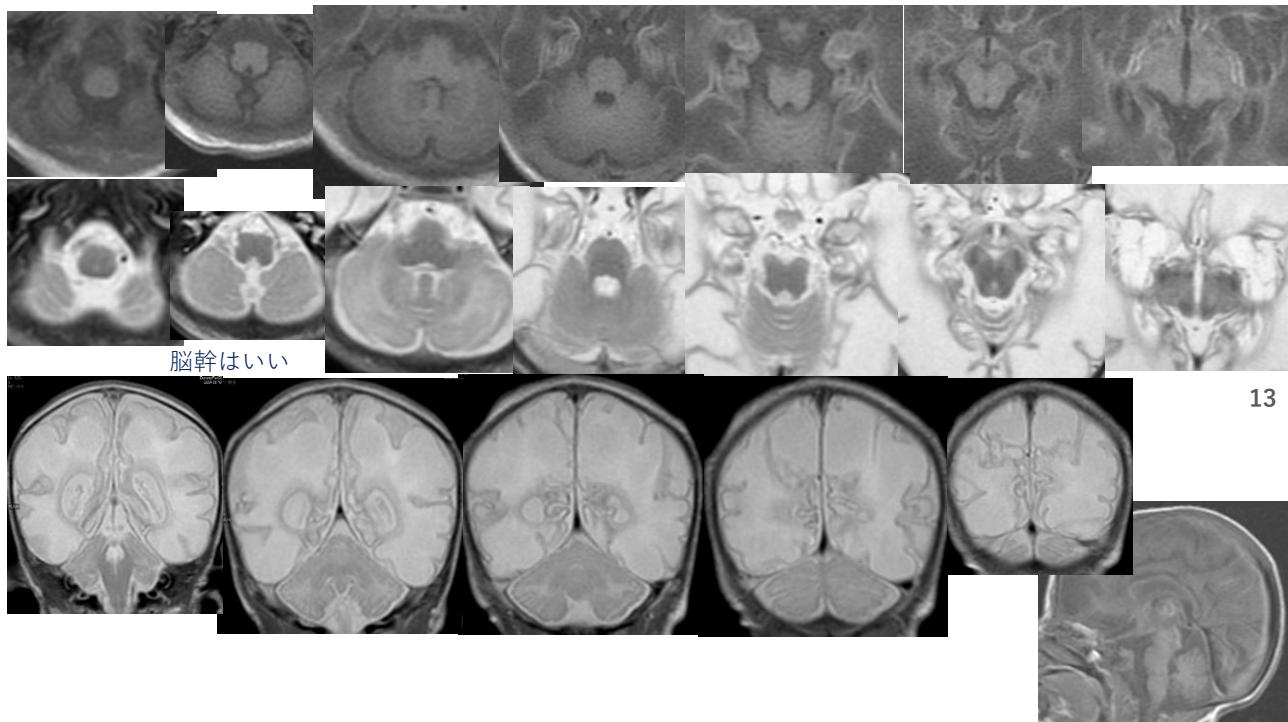
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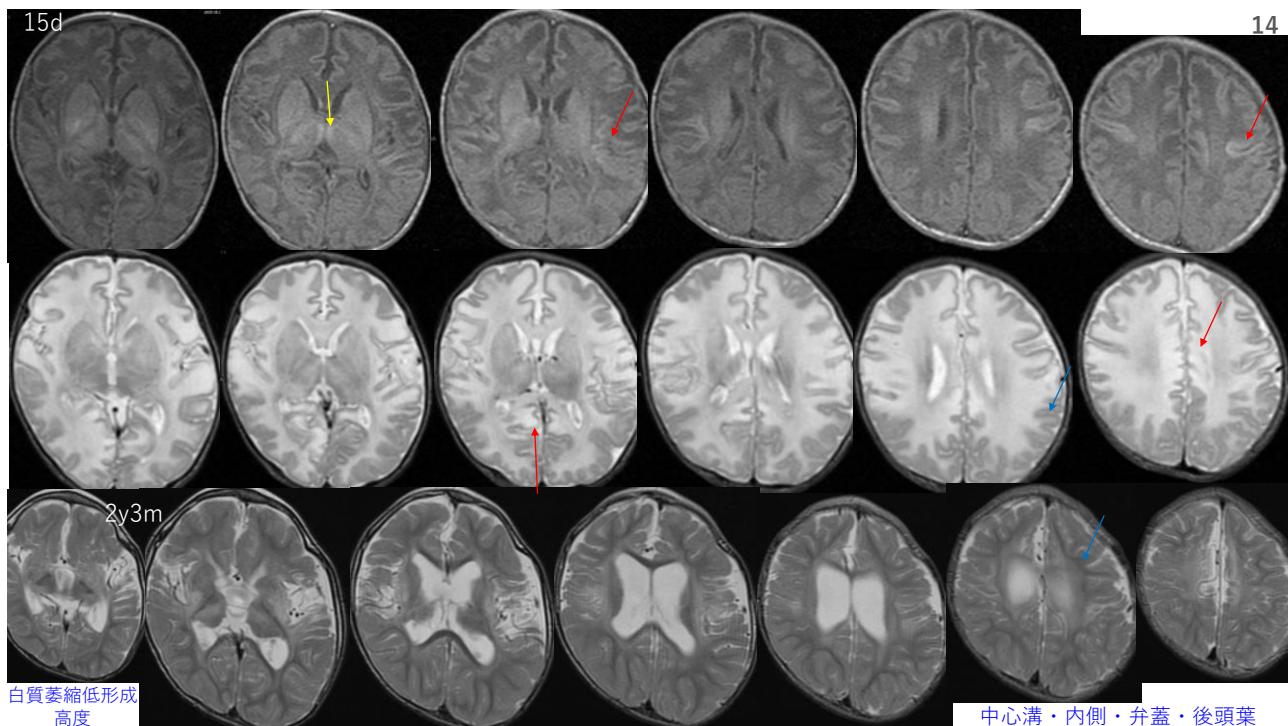
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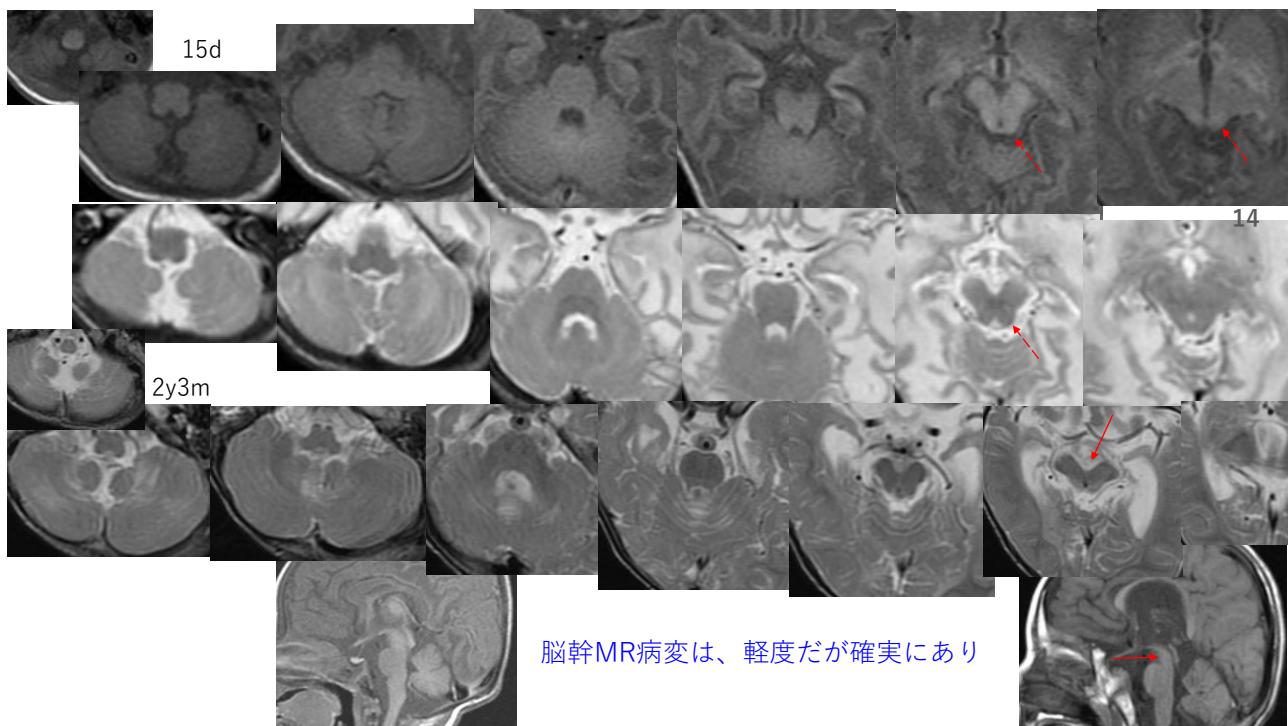
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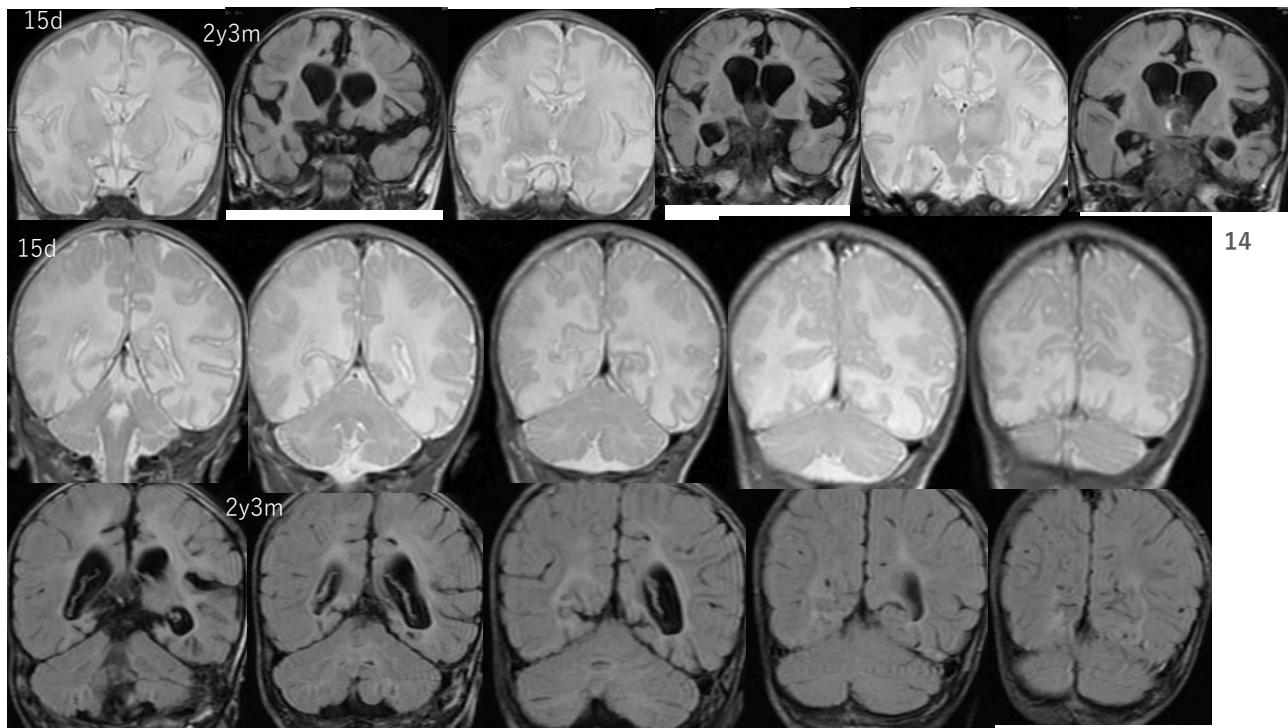
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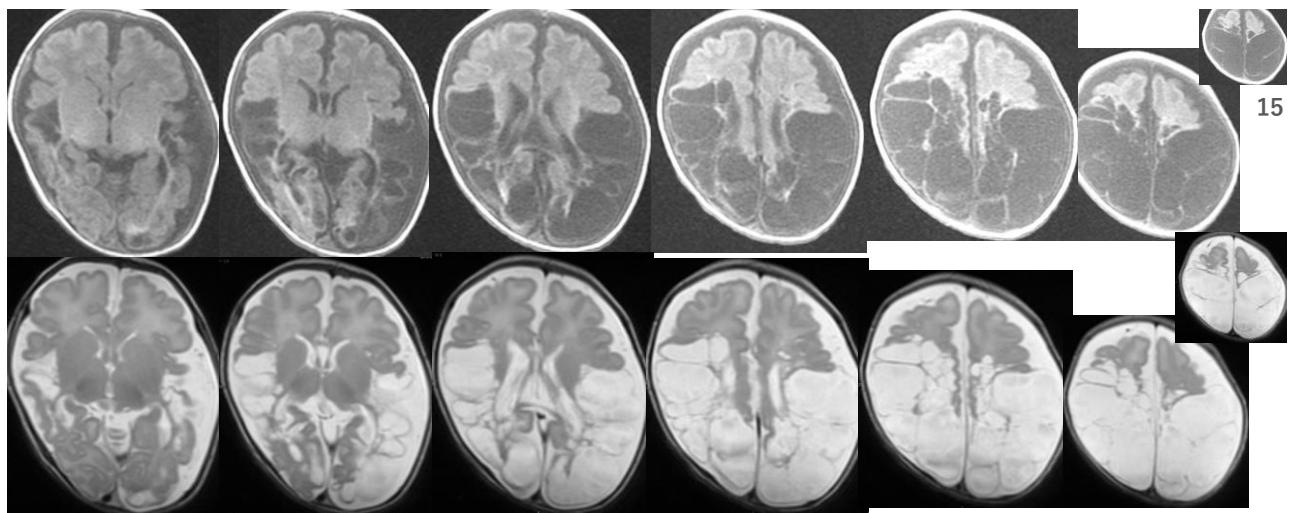
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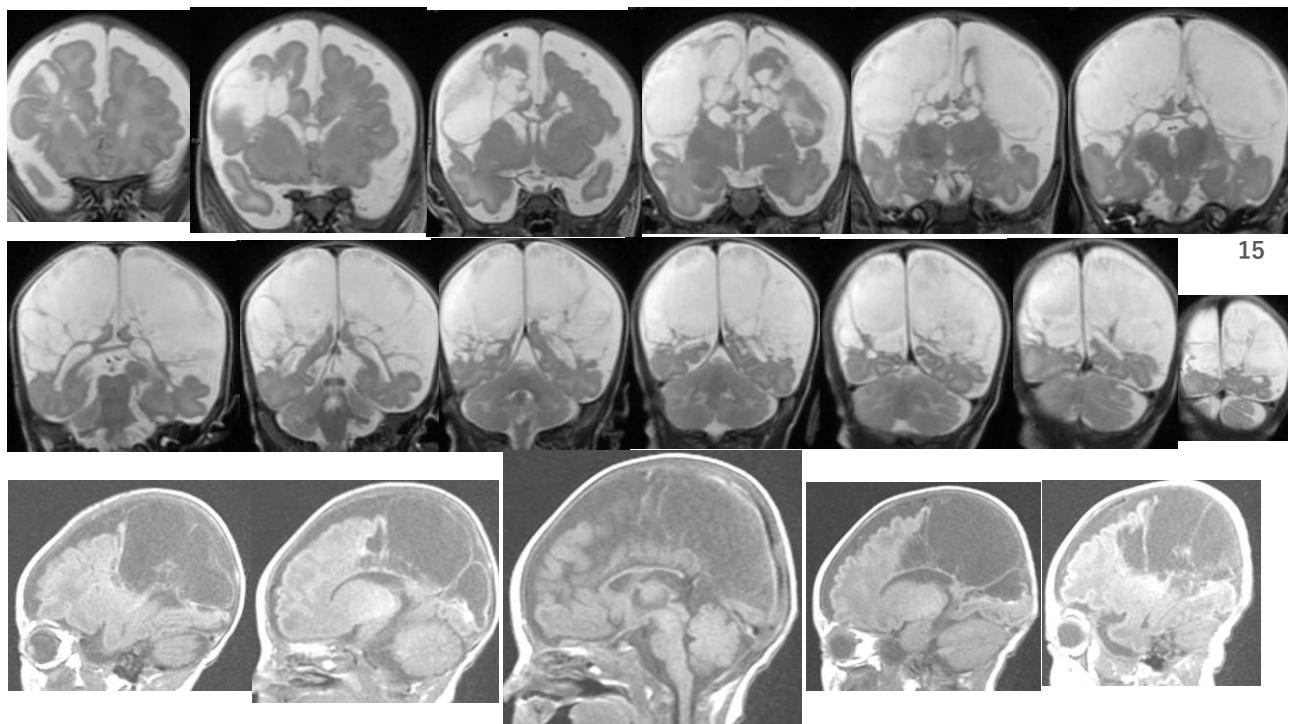
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• PCA本幹 ・ MCA・PCA境界域 ・ MCA本幹 ・ ACA本幹 ・ ACA・PCA境界域 40d(c4d)

萎縮せず、囊胞となる

49

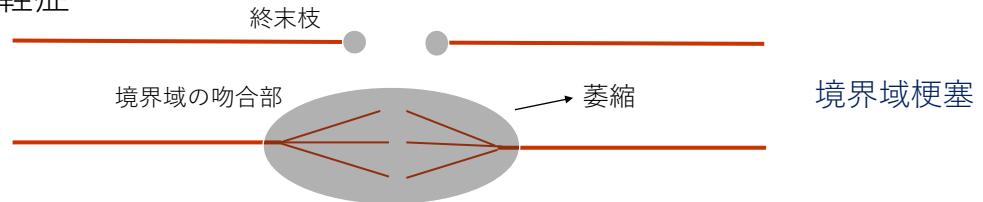


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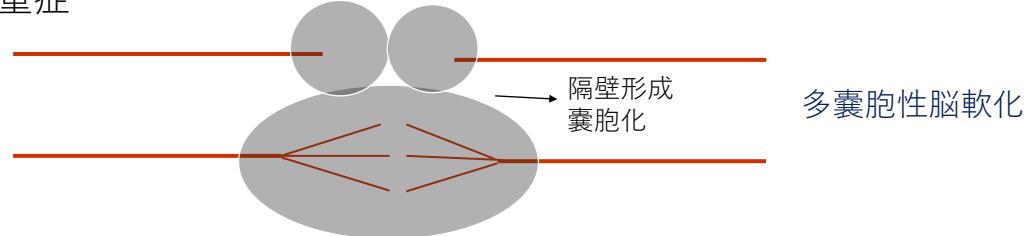
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## 囊胞化の成り立ち

低血流が軽症



低血流が重症



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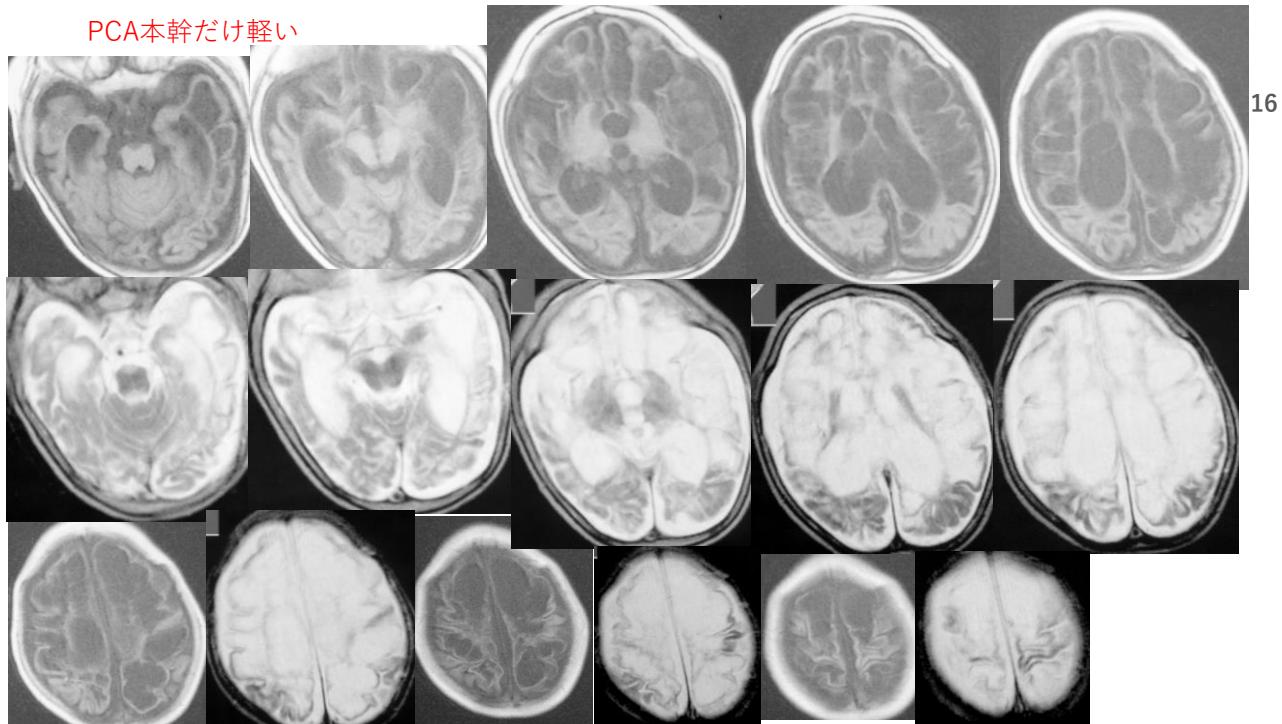


分離運動制限

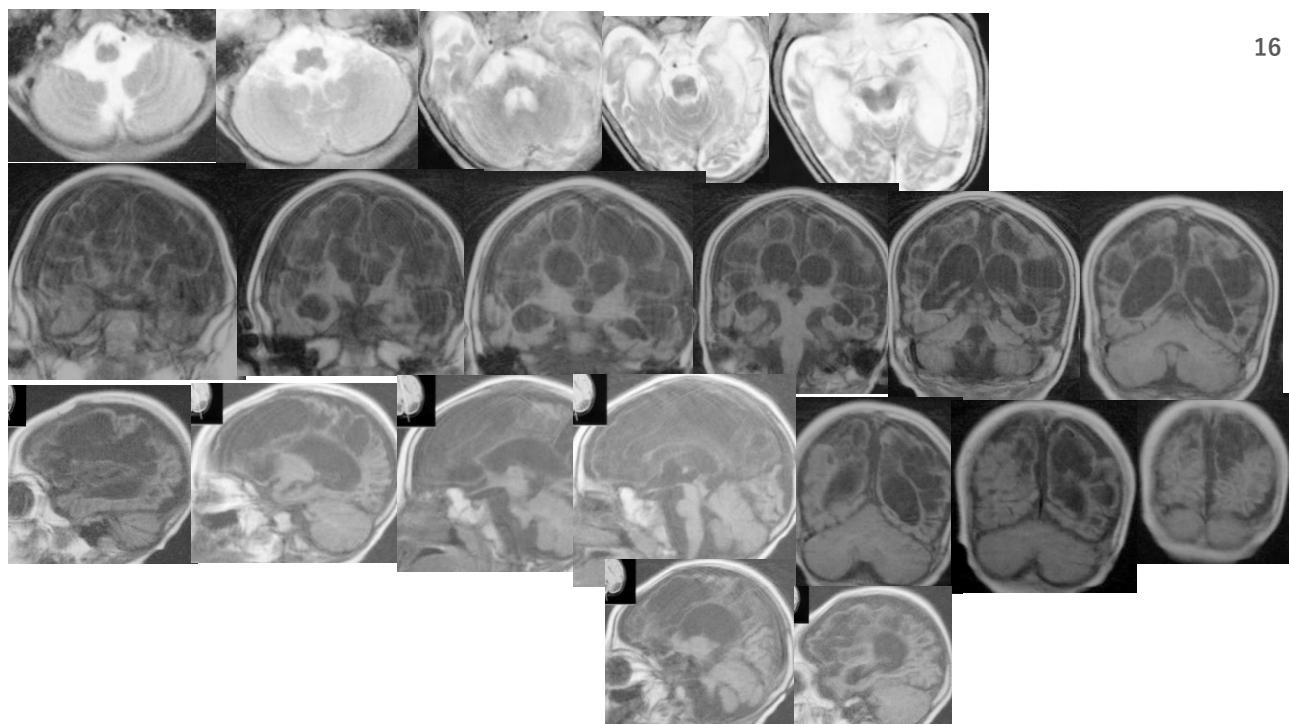
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PCA本幹だけ軽い

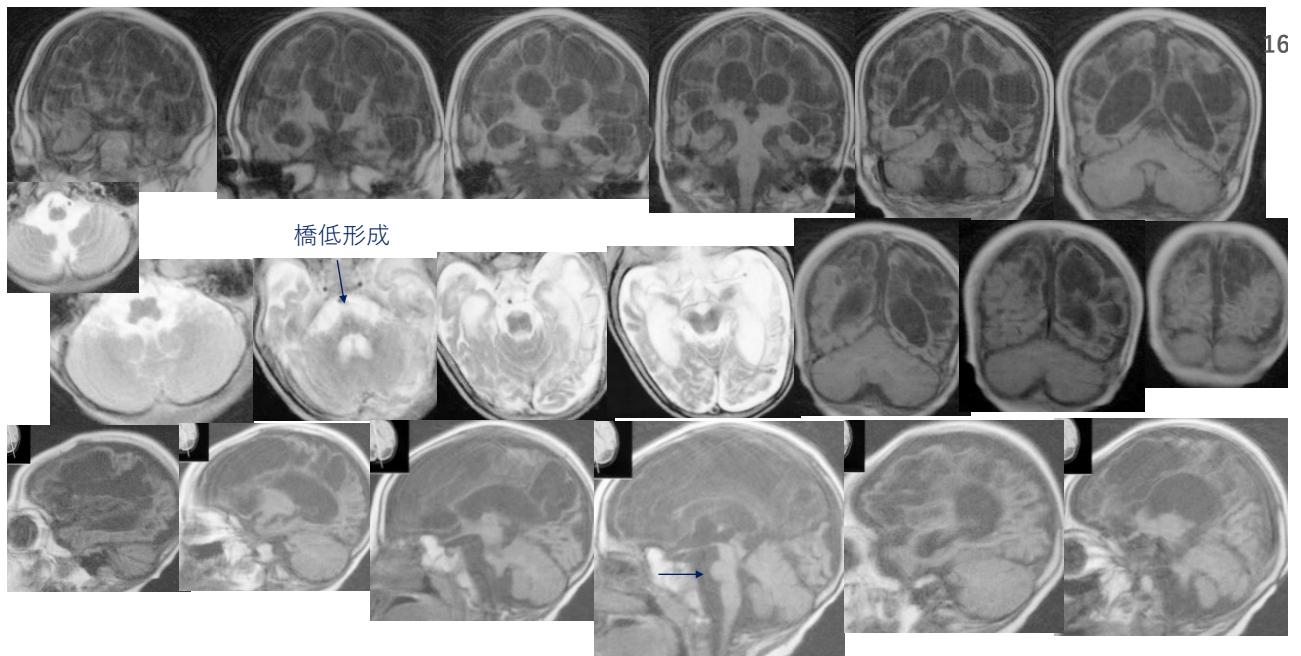


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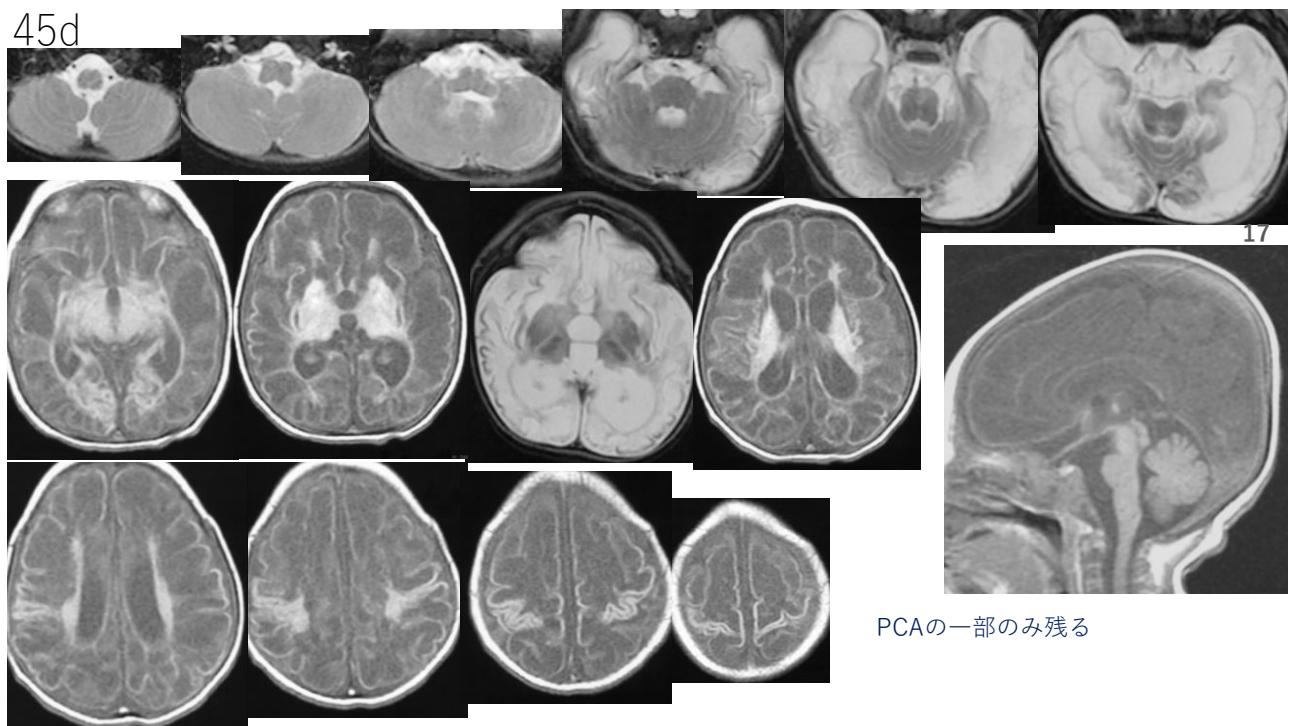


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[余談] 股屈曲過活動スペクトラムの肩  
 • 肩拳上  
     僧帽筋上部・肩甲拳筋・菱形筋  
 • 肩外転  
     三角筋中部線維・棘上筋・前鋸筋  
 \* 肩甲骨内側浮き出を造りうるのは前鋸筋

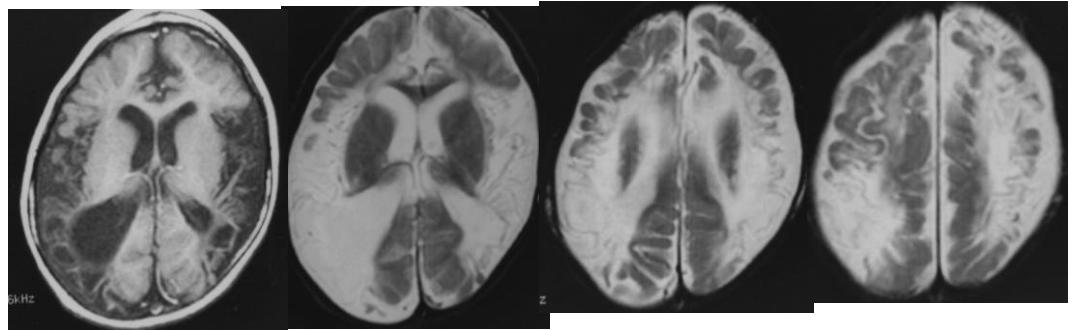
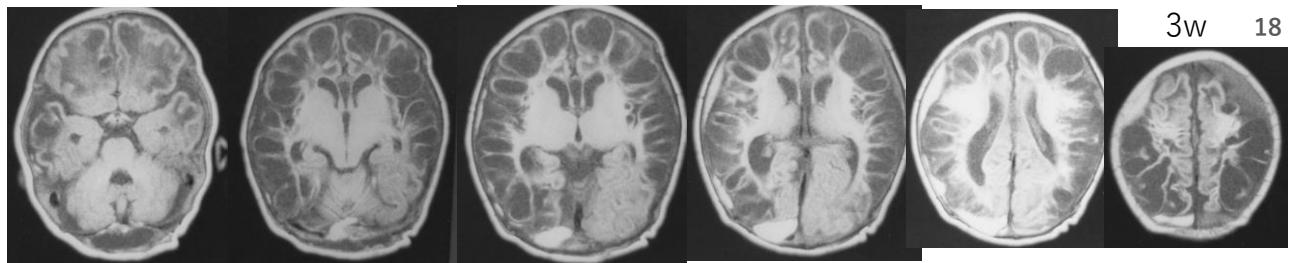
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- PCA域のみ残る
- 前頭部の新生児期囊胞性病変は、幼児期は萎縮病変になる

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## 満期産低酸素性虚血性脳症の大脳病変は

- 視床基底核 + 大脳白質 + 大脳易損傷部\*

\* 中心溝部・大脳内側部・弁蓋部・海馬部・後頭葉 (・視床枕)

← 低酸素性機序

- 大脳動脈境界域・終末枝領域

← 脳低血流障害

この2者に区分され、その混合はない