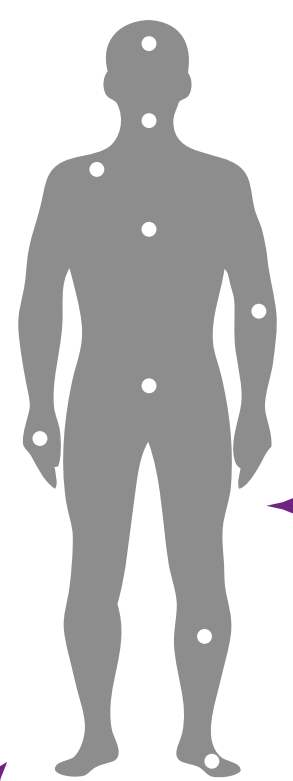


Diagnosis

The paths people take to a Chiari diagnosis are as numerous and varied as its many symptoms. There is no single objective test to diagnose symptomatic Chiari



Diagnostic Process

Patient reported symptoms and whether they are likely caused by Chiari.

Evaluation of neurological signs and whether they are likely caused by Chiari



MRI evidence of abnormal anatomy: cerebellar tonsils out of CSF spaces, crowding or compression of brain tissue, bony abnormalities, and/or presence of a syrinx

Physician's own experience and judgment

Missed Diagnoses- Misdiagnoses

Missed Diagnoses occur when physicians ascribe initial symptoms to stress or other factors. Unfortunately, some patients are told their symptoms are psychological in nature. In other cases, patients are told that Chiari is not the cause of their symptoms or that Chiari is nothing to worry about and they were just born that way.

Misdiagnoses occur when the many possible symptoms of Chiari are associated to other conditions, such as: MS, Fibromyalgia, Chronic Fatigue, Lupus, Migraines, Carpal Tunnel Syndrome and ALS (Lou Gehrig's). These associations cause confusion to the medical situation and can result in critical delays in getting proper treatment

The average adult waits 30 months for a Chiari diagnosis.

Diagnostic Tests

Most common tests:

Neurological Exam- a way to explore what is happening to the nervous system by examining how different parts of the body respond to different forms of stimulus and functional tasks

MRI- Magnetic Resonance Imaging, creates an image of the brain and spine

Cine-MRI- also known as phase-contrast MRI, creates an image of the flow of spinal fluid

Other tests:

X-Rays

CT Scans

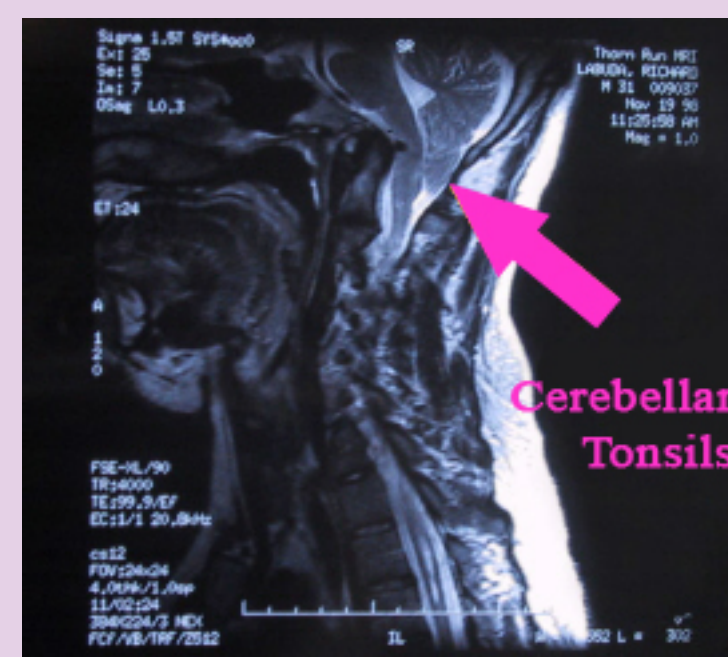
Hearing Vision

Upright MRI

Vestibular

Urodynamic

Neuropsychological



Experts recommend that anyone diagnosed with Chiari should have an MRI of their entire spine.

Set of Symptoms

*Headache, Dizziness
Weakness in arms/hands
Numbness in arms/hands
Leg Weakness
Fatigue, Tinnitus*

Conditions with similar symptoms

*Multiple Sclerosis
Fibromyalgia, Chronic Fatigue
Lupus, Migraines, Carpal Tunnel
ALS (Lou Gehrig's)*



Pediatric Diagnosis

Children cannot always verbalize what they are feeling, sometimes the first clue is lack of proper development, either physically or cognitively. Some children will bang their heads when they can't verbalize that their head hurts. Symptoms may result in changes in behavior and attitude. MRIs require the patient to remain still for an extended period of time which is not easy for a young child. Young children may need to be anesthetized. In older children, unusual presentations of scoliosis are a strong indication that an MRI should be performed.