CADASIL EMERGENCY CARD

Cerebral Autosomal Dominant Arteriopathy with Sub-cortical Infarcts and Leukoencephalopathy

IMPORTANT INFORMATION

- Avoid Anticoagulant Treatments which aim at unblocking blood vessels as they increase the risk of a cerebral haemorrhage and Vasoconstricting Medicines (issued from rye ergot or from Triptan) which may increase the risk of cerebral infarction.
- Avoid Cerebral Conventional Angiographies (contrast agent within the arteries in the brain for exam of the cerebral vasculature) because of potential neurological complications (migraine with extended and severe aura).
- Using Anaesthesia must be monitored as it could cause abrupt changes in blood pressure.

CADASIL SUPPORT UK

Registered Charity No: 1175812

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CADASIL (is a hereditary autosomal dominant disease affecting all the small cerebral arteries. It causes subcortical infarcts and damages the white matter (leukoencephalopathy) and it is due to various mutations of the Notch3 gene situated on chromosome 19.

Clinical Onset: Adult-hood, Recurrent Sub-cortical Ischemic Events, Strokes, Migraines, Headaches, Cognitive Dysfunction, Dementia, Psychiatric Disorders & Neuropathy. If a cerebral stroke is suspected & an MRI exam is done, it will show characteristic appearances with abnormalities in the deeper parts of the brain or white matter. An MRI alone cannot confirm CADASIL. Genetic Testing or a Skin Biopsy (Electron Microscope evaluation) is required to diagnose CADASIL.

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