INTRODUCTION AND AIM OF THE WORK

Though no overall incidence figures are available, cerebrovascular disease (CVD) in children is uncommon (Erenberg and Golden, I97I). It is difficult to obtain accurate information regarding the relative frequency of the various types of cerebrovascular lesions, because the reported incidence is frequently based on autopsy data (Erenberg and Golden, I97I). In a series of 555 autopsies carried out in the Children Hospital, Boston death was attributed to cerebrovascular accidents in 8.6 %.

Using autopsy data in epidemiological studies has the advantage of accuracy in diagnosis, but there are many sources of error.

Using death certificate data, the age specific death rates for cerebrovascular disease was given as I5/million for age under 5 years and 7/million for children of 5-I4 years (Moriyama et al, I97I).

Despite the diversity of the aetiological factors, the clinical presentation is often similar. Therefore it is not usually possible to define their aetiological nature on the basis of symptoms and signs (Capildes, I978). Therefore further investigation will always be necessary.

Usually, there is reluctance to perform invasive investigation in infants and children. With the advent of computed tomography, those cases requiring further investigation can be defined more clearly. So, it is hoped that such a correlative study would clarify the aetiology and diagnosis of the cases, which may accordingly determine their management.