

ture and lead to its abnormal catabolism.<sup>2</sup> Patients with CADASIL are heterozygous for the mutation, and homozygosity may be incompatible with life. *De novo* mutations have been reported<sup>3</sup> and may have occurred in our patient, as neither of his parents had symptoms of the condition. Screening for the Notch3 mutation in young patients presenting with lacunar stroke is likely to have a poor yield in the absence of a family history or other clinical features of the disease.<sup>4</sup> Diagnosis of CADASIL is important for prognosis of symptomatic patients as well as for counselling of asymptomatic family members who may be at risk. Our patient's children have not been

tested to date. No specific treatment is currently available, but the current approach includes aggressive management of the major cerebrovascular risk factors of hypertension, smoking, diabetes and hyperlipidemia.

**Jessica E. Simon**

Calgary Stroke Program

University of Calgary

**Jillian Parboosingh**

Department of Medical Genetics

University of Calgary

**Arthur Clark**

**David George**

Division of Neuropathology

University of Calgary

Calgary, Alta.

**Anne-Louise Lafontaine**

Division of Neurology

McGill University

Montréal, Que.

**Michael D. Hill**

Calgary Stroke Program

University of Calgary

Calgary, Alta.

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