A 38 years old male presented with a history of sudden onset difficulty in walking and giddiness. His examination revealed cerebellar signs on the left side and absent brachial and radial pulses in the left hand. CT scan showed an infarct in left cerebellar hemisphere (Fig. 1). MR angio showed retrograde filling of left vertebral artery (Fig. 2). A conventional angiogram revealed total blockage of left subclavian artery (Fig. 3) thereby confirming the diagnosis of subclavian steal. Patient was treated with surgery and made a good recovery.

Fig. 1 : NCCT head showing an infarct in cerebellum (arrow).

Fig. 2 : MR angiogram TOF images showing a thin retrogradely filling left vertebral artery (small arrow).

Fig. 3 : Conventional angiogram showing total blockage of left subclavian artery.