



CASE

Primi came for safe confinement with no known comorbidities ,during intrapartum period patient developed Generalised tonic clonic seizures with hypertension,patient immediately taken for emergency LSCS.Postpartum multiple episodes of Generalised tonic clonic seizures ,patient in altered sensorium,she was intubated on mechanical ventilator outside and referred to our hospital for further management.On examination patient was in altered sensorium,arousable to painful stimuli ,Bilateral pupils equally reactive to light ,paucity of movement in right upper limb and lower limb with plantar extensor on right side.Baseline investigations were normal.CT brain showed hypodense region with area of hemorrhage in bilateral parietal lobe,right occipital lobe. hemorrhage with surrounding edema of left gangliocapsular region causing squishing of left lateral ventricle extension of hemorrhage into ventricular system

DISCUSSION

A number of atypical radiological features detected by neuroimaging include Basal ganglia, brain stem, deep white matter, and splenium of the corpus callosum which are rarely affected, and usually unilateral. Hemorrhage is becoming more widely recognized as an atypical manifestation of PRES and does not exclude the diagnosis . It appears in 5% and 30% of cases according to various studies. The possible anatomical locations for its occurrence with a similar incidence are the brain parenchyma, appearing as a focal hematoma or petechial gyral bleeding, or the subarachnoid space. The success of the therapy lies primarily in recognizing these findings. if identified early could be reversible

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