

| INTRODUCTION | MATERIALS / METHODS | MANAGEMENT | DISCUSSION |
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| <p>Posterior Reversible Encephalopathy Syndrome(PRES) is a clinico radiological syndrome,disorder of reversible subcortical vasogenic brain edema predominantly involving bilateral parieto-occipital region.It is diagnosed by characteristic CT/MRI features and may occur in situations like hypertension , Preeclampsia,Eclampsia ,Patients on immunosuppression , thrombocytopenia,SLE,sepsis,HUS</p> | <p>CASE REPORT: A 25 yr old female P1L1 was brought to casualty on POD-9 of Primary Emergency LSCS with H/O 2 episodes of seizures within a duration of 3 hrs.She had a H/O fall followed by tonic contraction of neck to one side with ipsilateral UL and LL associated with uprolling of eyeballs, LOC, tongue biting, frothing from mouth and she had spontaneous recovery after 1 hr; each episode of seizure was preceeded by headache. She had H/O Nausea, Loss of vision since 1 day. She had high bp recording of 180/110 mm Hg at the time of presentation. No h/o involuntary passage of urine or stools. No other complaints. All her routine investigations were normal. Fundal Examination showed Right Macular drusens.</p> | <p>On MRI Brain with contrast – S/O Posterior reversible encephalopathy syndrome involving B/L parieto occipital regions and right frontal region. She was managed conservatively by giving Inj.Levipil and Lorazepam as stat doses. After subsiding of seizure episode, MgSo4 loading dose and maintenance dose was given. Her high bp recordings were managed by giving T.Nicardia Retard 20mg. She was hemodynamically stable after 24hrs.</p> | <p>PRES is characterised by white matter vasogenic edema affecting the posterior occipital and parietal lobes of brain predominantly. It causes visual disturbances and altered consciousness. It is also associated with many other clinical conditions. Exact pathophysiology is unclear. C/Fs include headache, seizures, altered mental status, visual loss.</p> |
| | | | CONCLUSION |
| | | | <p>PRES is associated with many clinical conditions and it is a serious complication of eclampsia. Its early recognition helps in preventing some of its devastating sequelae such as permanent vision loss.</p> |
| | | | REFERENCES |
| | | | <p>1. Fugate JE, Rabinstein AA. Posterior reversible encephalopathy syndrome: clinical and radiological manifestations, pathophysiology, and outstanding questions. <i>Lancet Neurol.</i> 2015;14(9):914–925. doi: 10.1016/S1474-4422(15)00111-8. [PubMed] [CrossRef]</p> |
| | | | ACKNOWLEDGEMENTS |
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| AIMS / OBJECTIVES | | | |
| <p>Aim of this case report is to prove that as there is increased chances of earlier radiological diagnosis, prognosis will be much better. As this is a case report, materials and methods cannot be used.</p> | | | |

