

[ PICTURES IN CLINICAL MEDICINE ]

## Postictal Periorbital Petechial Rash

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**Picture.**

A 16-year-old boy, with a history of juvenile myoclonic epilepsy, which had been treated with valproic acid since he was 9 years of age, presented with bilateral periorbital rash. His family had found him in a stupor state after groaning early the previous morning. The patient had a history of morning myoclonic seizures and absence seizures, but no history of generalized tonic-clonic seizures. An electroencephalogram showed generalized polyspike-wave abnormalities. The results of neurological and physical examinations, including blood pressure, were normal and the routine laboratory data were unremarkable. The petechial rash on the bilateral periorbital regions (Picture) disappeared spontane-

ously within one week.

Epilepsy-induced thoraco-cervicofacial purpura is a rare finding after generalized tonic-clonic seizures. It has previously been suggested that this finding may be caused by increased blood pressure or a high degree of congestion during the tonic-clonic phase, such as occurs in the Valsalva maneuver (1). This purpura may be a valuable indicator of epileptic seizure, even in the absence of other signs of epilepsy (2). Based on these arguments, we diagnosed this rash as a postictal periorbital petechial rash.

**The authors state that they have no Conflict of Interest (COI).**

### References

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