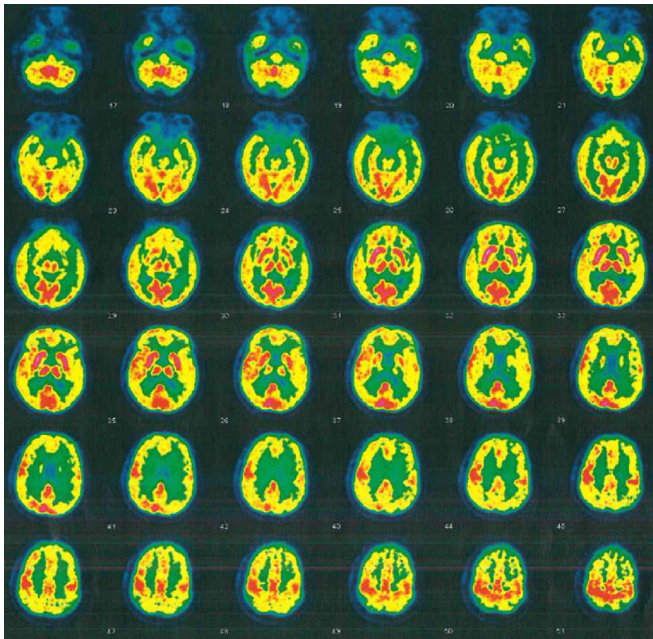




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Results

At follow-up extrapyramidal and psychiatric disorders got slowly better. At control psychometric tests and cerebral PET patient improved. She is performing 18PDG- PET every 6 months to exclude an underlying paraneoplastic syndrome.

Conclusions

Hashimoto's Encephalopathy seems to respond to steroids and immunoglobulins therapy.

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118789

Chronic lymphocytic inflammation with pontine perivascular enhancement responsive to steroids (clippers) after COVID-19

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Background and aims

SARS-CoV-2 infection is now known to be associated with a wide spectrum of neurological autoimmune syndromes, in some cases responding to immunotherapies, arising during or after the infection. Whether molecular mimicry or other immune stimulation may induce an aberrant delayed autoimmune response is still to be established.

Methods

Case Report.

Results

A 71 year-old man with no previous medical history apart from mild COVID-19 pneumonia 3 month earlier, sought medical attention for a subacute onset of diplopia in left gaze, general malaise and fatigue. MRI was characterized by bilateral FLAIR hyperintensities with punctate, perivascular and confluent post-gadolinium enhancement in the pons, mesencephalon, hypothalamus, internal capsules and right hippocampus. Repeated cerebrospinal fluid analysis were normal (2 cells/ μ L), with no evidence of oligoclonal bands or atypical cells. Screening panel for autoimmune and infectious aetiologies was negative. Whole-body contrast-enhanced CT was unremarkable. Stereotactic temporal lobe brain biopsy showed aspecific chronic lymphocytic perivascular inflammation. Partial spontaneous remission of symptoms occurred within few weeks. He was then treated with intravenous high-dose methylprednisolone with almost complete enhancement regression on MRI. Collected data were suggestive of CLIPPERS with diffuse bilateral supratentorial involvement. The patient started daily oral steroid tapering and monthly cycles of intravenous cyclophosphamide with persistent clinical and neuroradiological stability.

Conclusions

CLIPPERS is a rare diagnosis and to the best of our knowledge, this is the first time it was reported after COVID-19 disease. Even though a case report is not enough to suggest a causal link, future reports could support this possibility.

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A rare cause of drug induced mononeuropathy

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Background and aims

Drug-induced mononeuropathy is a common and painful condition seen with use of chemotherapeutic agents, antimicrobials and anticonvulsants. It takes weeks to months to set in. Churg Strauss Syndrome (CSS) is primarily a disease of middle age and its presentation in childhood is rare. We hereby present a rare case of an adolescent female presenting with mononeuropathy which later turned out to be a part of eosinophilic granulomatosis with polyangiitis or CSS precipitated by prolonged use of leukotriene receptor antagonist.

Methods

16 year old female child presented with complaints of rash and swelling over legs and arthralgia for last 7 days. She also had severe pain and numbness in right foot. Child had been diagnosed with bronchial asthma one year back for which she took montelukast. A nerve conduction velocity study was done which showed evidence of sensory neuropathy in right sural nerve. The complete blood counts consistently showed more than 70% eosinophils. Total IgE levels were elevated and HRCT chest showed bronchiectasis. Skin biopsy results revealed leukocytoclastic vasculitis with perivascular eosinophils. With the diagnosis of CSS child was started on oral steroids and montelukast was discontinued. pANCA and cANCA levels were negative.