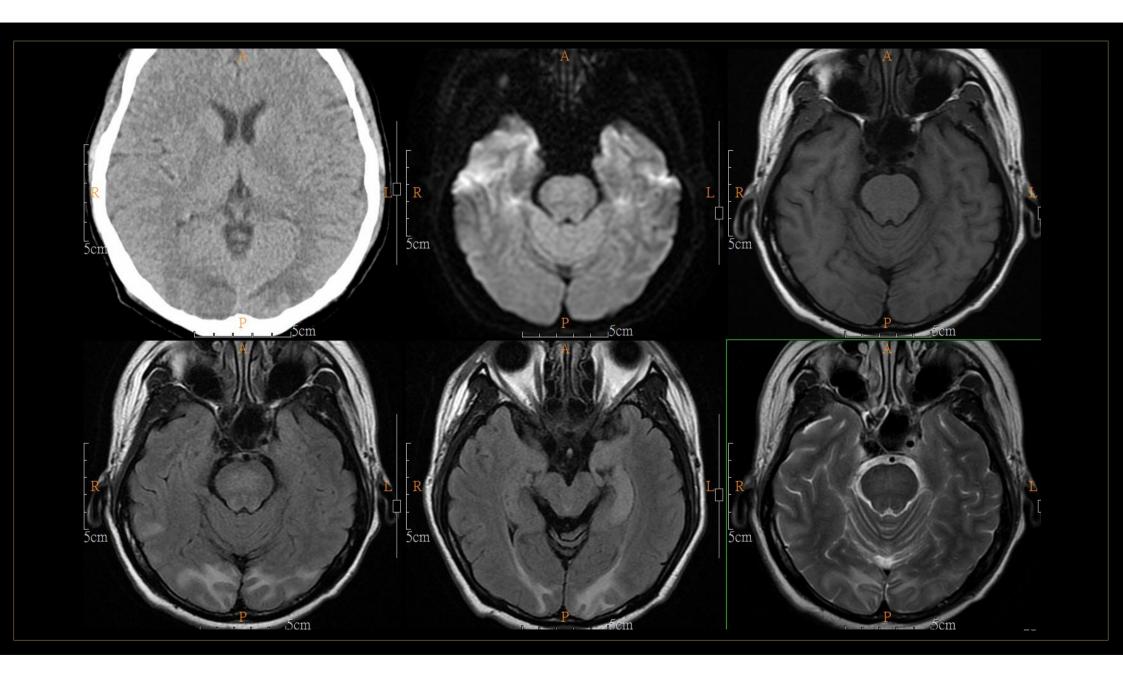
# Case 2

#### **Patient Profile**

- 36 years old, female
- Chief complaint
  - Recurrent severe lower limbs edema
  - Increased of body weight 10kg for 2weeks
- Past history
  - Unknown ??

## Image

- 2018-11-18 Brain CT
- 2018-11-20 MRI



### Differential Diagnosis

- Posterior reversible encephalopathy syndrome
- Acute cerebral ischemia-infarction
- Thrombotic microangiopathies (DIC, TTP, mHTN)

## Diagnosis

- Underline disease SLE under treatment for more than 10 years
- PRES, SLE related

# Discussion

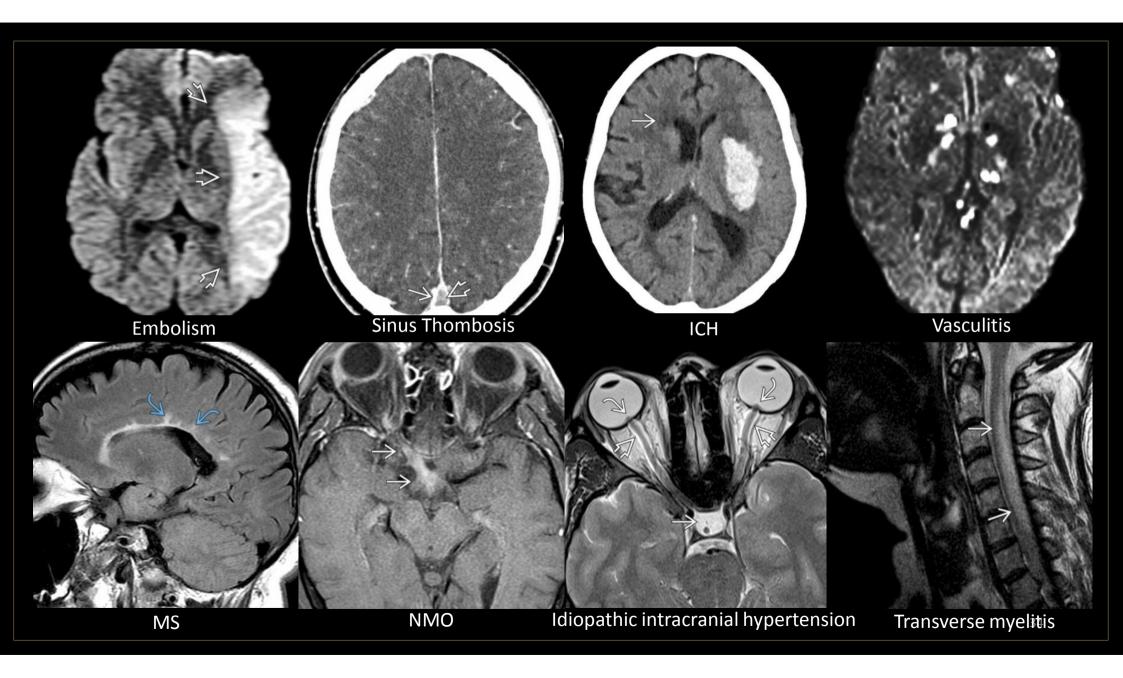
Systemic Lupus Erythematosus

#### Systemic Lupus Erythematosus

- A wide variety of neuropsychiatric manifestations
- The American College of Rheumatology (ACR) defines 19 distinct clinical central and peripheral neuropsychiatric syndromes that can occur in SLE, 12 of which are due to CNS involvement

#### Neurological Manifestation of SLE

- Seizure
- Cerebrovascular disease
  - Stroke, TIA, dural venous sinus thrombosis, ICH, vasculitis, PRES
- Demyelinating syndrome
  - Multiple sclerosis, optic neuritis, neuromyelitis optica, transverse myelitis
- Headache
  - Migraine, idiopathic intracranial hypertension
- Movement disorder
  - Chorea
- Aseptic meningitis



#### **PRES**

- Many etiologies with HTN as common component
  - Preeclampsia, eclampsia
  - Drug toxicity (e.g., chemotherapy)
  - Uremic encephalopathies
- Images
  - Patchy parietooccipital cortical/subcortical edema in patient with severe acute/subacute HTN
  - Parietooccipital T2/FLAIR hyperintensities in 95%
  - ± basal ganglia, pontine, cerebellar involvement
  - 3 patterns of hemorrhage: Focal parenchymal hemorrhage, microhemorrhages, convexity SAH
  - Generally no restriction on DWI
  - Variable patchy enhancement

