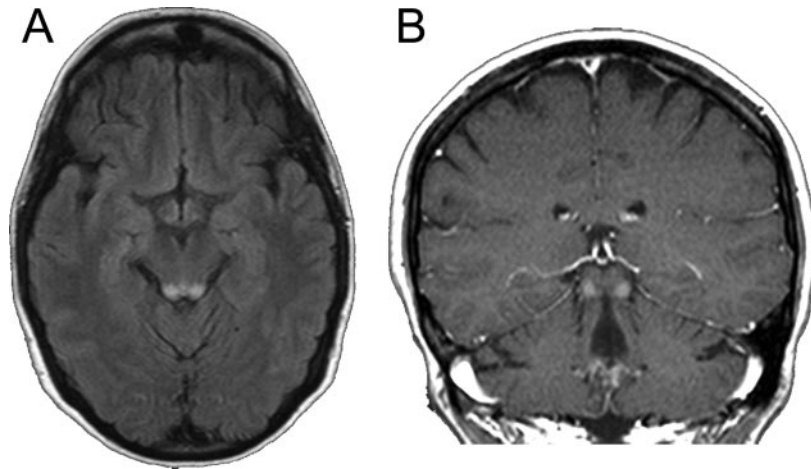


Hearing and seeing

Unusual early signs of Wernicke encephalopathy

Figure Axial FLAIR imaging showed a symmetric hyperintense lesion of the inferior colliculi (A) with slight contrast (gadolinium) enhancement on T1-weighted images (B)



A 31-year-old woman with Crohn disease presented with tinnitus, headache, apathy, blurred vision, and nystagmus after 3 weeks of IV nutrition and partial colectomy. MRI showed abnormalities of the inferior colliculi (figure). Serum thiamine was low (56 nM/L, normal > 66) and symptoms resolved within 48 hours of thiamine IV supplementation, suggestive of Wernicke encephalopathy (WE). MRI usually shows damage of the mammillary bodies and paraventricular region. Hearing loss has been reported in WE,¹ but not in relation with a lesion of the inferior colliculi, which is the first to occur in a nonhuman primate model of thiamine deficiency.²

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