A 40-year-old woman who received a liver transplantation developed nystagmus, downward gaze palsy of her right eye, and gradual mental deterioration. CT and MRI (figure) showed signal change in medial thalami and hemorrhage in the bilateral inferior colliculi, suggesting Wernicke encephalopathy. Swelling around the aqueduct resulted in hydrocephalus. After beginning thiamine supplementation (100 mg/day), her consciousness began to return. Follow-up MRI revealed partially resolved hemorrhages and improved hydrocephalus. Gross hemorrhage is an uncommon finding in Wernicke encephalopathy, although microscopic hemorrhage is well-documented in pathology textbooks. Typical findings include signal change in mamillary bodies, medial thalami, tectal plate, and periaqueductal gray matter.

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