A 42-year-old man without known history of alcoholism presented comatose. CT and MRI (figure) demonstrated characteristic imaging features of Marchiafava-Bignami disease without signs of Wernicke encephalopathy (such as involvement of the mammillary bodies). Under symptomatic treatment including artificial respiration and parenteral nutrition, the patient’s Glasgow Coma Scale score improved from 3 to 7.

Marchiafava-Bignami is a rare disease associated with alcoholism though rarely also seen in patients without alcoholism, characterized by demyelination and necrosis of the corpus callosum. Since clinical symptoms can vary from cognitive impairment, gait disturbance, and hemiparesis to stupor, coma, and death, early recognition of neuroimaging characteristics is crucial for diagnosis and treatment.

AUTHOR CONTRIBUTIONS
Dr. Tozakidou: drafting/revising the manuscript, analysis or interpretation of data. Dr. Stippich: drafting/revising the manuscript, study concept or design. Dr. Fischmann: drafting/revising the manuscript, study concept or design, analysis or interpretation of data.

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Teaching NeuroImages: Radiologic findings in Marchiafava-Bignami disease
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