An 86-year-old woman with history of generalized tonic-clonic seizures and syncopal episodes presented after a fall. She was awake, alert, and oriented to location, but not date, which was typical; she was abulic with no spontaneous speech output. Language and comprehension were intact. Eye movements were full with minimal nystagmus on right and end gaze. CT and MRI (figure) showed changes related to transcranial frontal lobotomy performed in the 1950s for unspecified “psychiatric reasons.” This case is of historical interest and practical importance: patients with frontal lobotomies require clinical attention, so the sequelae of this procedure should be recognized.

Daniel T. Ginat, MD, MS, Boston, MA

The author reports no disclosures relevant to the manuscript. Go to Neurology.org for full disclosures.

Correspondence & reprint requests to Dr. Ginat: ginatd01@gmail.com
Frontal lobotomy
Daniel T. Ginat

Neurology 2012;79;1830
DOI 10.1212/WNL.0b013e3182704069

This information is current as of October 22, 2012

Updated Information & Services
including high resolution figures, can be found at:
http://n.neurology.org/content/79/17/1830.full

Subspecialty Collections
This article, along with others on similar topics, appears in the following collection(s):
Neuropsychological assessment
http://n.neurology.org/cgi/collection/neuropsychological_assessment
Psychosis
http://n.neurology.org/cgi/collection/psychosis

Permissions & Licensing
Information about reproducing this article in parts (figures, tables) or in its entirety can be found online at:
http://www.neurology.org/about/about_the_journal#permissions

Reprints
Information about ordering reprints can be found online:
http://n.neurology.org/subscribers/advertise