Mystery Case:
Injuries of neural tracts in the Papez circuit following anterior thalamic infarction

An 80-year-old woman received conservative management for an infarct in the anterior thalamus (figure, A). She had shown severe memory impairment since the onset of infarction. Diffusion tensor tractography at 2 weeks after onset showed that the thalamocortical tract between the anterior thalamic nuclei and the cingulate gyrus and the mamillothalamic tract were reconstructed in the right hemisphere.¹,² By contrast, the left thalamocortical tract showed thinning compared with that of the right hemisphere and the left mamillothalamic tract was not reconstructed. This patient’s memory impairment was mainly the result of injuries of these tracts in the Papez circuit.¹,²

AUTHOR CONTRIBUTIONS
Sung Ho Jang: drafting/revising the manuscript, study concept or design, accepts responsibility for conduct of research and final approval, study supervision, obtaining funding. Jun Lee: study concept or design, accepts responsibility for conduct of research and final approval, acquisition of data. Hyeok Gyu Kwon: drafting/revising the manuscript, analysis or interpretation of data, accepts responsibility for conduct of research and final approval, statistical analysis.

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DISCLOSURE
The authors report no disclosures relevant to the manuscript. Go to Neurology.org for full disclosures.

REFERENCES

MYSTERY CASE RESPONSES
The Mystery Case series was initiated by the Neurology® Resident & Fellow Section to develop the clinical reasoning skills of trainees. Residency programs, medical student preceptors, and individuals were invited to use this Mystery Case as an educational tool. Responses were solicited through a group e-mail sent to the American Academy of Neurology Consortium of Neurology Residents and Fellows and through social media.

All the responses that we received came from individuals rather than groups. A total of 50% of respondents correctly identified the left thalamic infarction in the figure, A, and the loss of the left mammillothalamic tract on diffusion tensor tractography in the figure, B.

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