In 1881, Carl Wernicke described a "polioencephalopathia haemorrhagica superior" in 3 alcoholic patients with gray matter hemorrhages in the mammillary bodies.

Contrast enhancement in the mammillary bodies, an important imaging sign of Wernicke encephalopathy (WE), suggests a disrupted blood–brain barrier, which may be the cause for the microbleeds.

In a 58-year-old man with acute WE, brain magnetic resonance susceptibility-weighted imaging (SWI) revealed blood deposits in mammillary bodies, which were not evident on standard T2* images (figures 1 and 2). SWI may be a preferred sequence to detect the pathologic hallmark of WE in vivo and extends the MRI characteristics of this treatable condition.

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Author contributions: Prof. Dr. Elke Hattingen: discovery of the pathology in this case, interpretation, manuscript writing. Dr. Aline Beyle: acquisition of clinical data, analysis and interpretation. Dr. Andreas Müller: acquisition of the magnetic resonance data, analysis and interpretation. Prof. Dr. Thomas Klockgether: critical revision of the manuscript for important intellectual content. Prof. Dr. Cornelia Kornblum: critical revision of the manuscript for important intellectual content.

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**Figure 2** Typical contrast enhancement in the mammillary bodies due to Wernicke encephalopathy

Coronal T1-weighted image after application of contrast agent shows a faint enhancement in the mammillary bodies.

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